To:

House Committee on Finance

From:

Jennifer Ersing

Date:

May 1, 2024

Subject:

Support for HB 7204

Dear Chairman Abney and members of the Committee,

Thank you for allowing me a bit of space to share my story. When we decided to start our family, we were thrilled to see a positive pregnancy test after only one month. It was November 26, 2019. Immediately I began imagining a pregnant belly, maternity photos, a baby shower and holding my baby for the first time. No one plans for a pregnancy with hyperemesis gravidarum (extreme morning sickness) let alone being pregnant during a global pandemic, but when I went into labor early in the morning on July 27, 2020, I was thrilled to finally meet my little boy.

Emmett was born at 11:42 pm after 23.5 hours of labor and while he is now a happy and perfectly healthy 3.5-year-old, his entrance into the world was not easy and he was whisked away to the standby NICU team within the first 30 seconds of life. 4 days postpartum I was in my home and I experienced the "typical" hormonal crash that many refer to as the "baby blues". At the same time I also began experiencing terror that harm would come to my precious and now stable baby. I called my midwife as I felt that something was not quite right, and she referred me to a perinatal psychologist within Lifespan and asked me to let her know if things did not improve. This was also during the height of the Covid pandemic and no one was rushing to make more in person office visits.

Thankfully, pediatricians screen for postpartum mood disorders. Because my son had a rough start to life and also experienced slow weight gain, he was followed closely and I was handed this basic screening test at each and every appointment. We also were referred to a lactation consultant for help with breastfeeding and she also began to ask me questions about how I was coping postpartum.

I am so thankful for both my son's pediatrician and this lactation consultant who each separately called RI moms PRN. One afternoon Eva Ray from The W&I Women's Behavioral Health department called me in order to "check in" since my son's providers noted I was struggling. She was able to provide me with a number of resources that I was able to utilize while my name was then referred to the W&I day program. I cannot speak highly enough of the care I received through Women and Infants especially as I have since relocated to Kansas City and had my second child only 4 month ago (11/21/2023).

When I sought perinatal specialized care in Kansas City in preparation for my second child's birth I learned of a disjointed system where the full onus was on me to find support. The numerous providers I saw including a midwife, hospital birth center/L&D, pediatrician and then a NICU department did not know who to refer me to and I spent hours seeking out providers who were specialized in perinatal treatment. The stark difference in coordination of care in Kansas City vs Rhode Island for my two separate birth experiences has been quite amazing.

As a mom who has benefitted from the organization and support of RI MomsPRN, I hope that the lawmakers in the state of RI can find continued funding for a program that supports postpartum moms when they are needing it most. RI MomsPRN creates a single resource for health care providers to utilize that ensures peripartum women can receive the care they need. Screening is key and by making sure that all providers have the same information and can refer women to a single support then each of those women is more likely to get the specialized support she really needs.

Thank you again for your time,

Jennifer Ersing