

Rhode Island Chapter

INCORPORATED IN RHODE ISLAND

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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House Finance Committee

April 24, 2025

Re: Support for H6073

Chairman Abney and Members of the Committee,

Our names are Drs. Joey Michel and Emily Davis, and we are pediatric residents practicing here in Providence, Rhode Island. Thank you for considering our testimony in support of H-6073, requiring annual state investment to meet the match for the federal Maternal Infant and Early Childhood Home Visiting (MIECHV) program. This testimony has been written with guidance from our mentors at the Rhode Island Chapter of the American Academy of Pediatrics, and has been authorized to serve as their official endorsement of this bill.

We all know that “it takes a village” to raise a child, especially in the early days. From managing fussiness and feeding difficulties to addressing concerns that their child may be “behind” in their developmental progress, parents need people to turn to as they navigate their new reality. Many parents have family, friends, and co-workers that make up that village; and as pediatricians, we have the privilege of being a part of this village as well.

Unfortunately, many of the parents that we see every day in our practice do not have a village to support them. One single mother, seen in the emergency department with her two-week-old newborn, comes to mind. She came to the E.D. because her daughter was fussy and would not settle. She had some nasal congestion, but was otherwise well. In talking to this young woman, she expressed feeling overwhelmed caring for her infant, filled with uncertainty about what was considered typical behavior for a newborn and how best to manage it. She had recently moved to Providence with no family or support system in the area. At the end of the day, her daughter did not need a prescription nor a procedure—nor an expensive E.D. visit. They needed a village. The best intervention that we performed that day was a referral to the Rhode Island Family Home Visiting program.

Family Home Visiting programs provide evidence-based services that are known to improve the outcomes for children and families. They reduce child maltreatment, language delays, and emergency visits, such as those as we have described. These programs improve maternal mental health, parental education and employment, and school readiness. They also help connect families with community resources such as WIC and Early Intervention...to create their own village in Rhode Island.

It is imperative that we fund these programs. Over the past four years, enrollment in these programs has dropped by a striking 37-40%. Much of this

decline is due to financial strain and staffing challenges within the programs, therefore limiting the number of Rhode Islanders that can be served. In 2024, Rhode Island was one of only three states in the entire U.S. that did not meet the threshold for a federally matched \$3 for every \$1 allocated, as part of the federal MIECHV program. In doing this, we failed the children of Rhode Island. At a time when money is tight across household, state, and federal budgets, how can we afford to leave \$1.1 million on the table? Is it not a government's responsibility to allocate taxpayer money into programs that have been proven to improve the lives of its citizens, especially when those impacted are the next generation of Rhode Islanders? Not to mention the fact that programs like these have a strong return on investment—[\\$1.80 to \\$5.70](#) for every dollar spent—due to future savings on healthcare costs and public expenses.

These programs work. We have seen it firsthand: A mother in our practice had a new baby while in recovery for her substance use disorder. During the first few days of her child's life, she saw her infant as being so precious, so fragile, that she was worried she could harm her just by holding her. Through the partnership she formed with her home visiting staff member, she not only gained confidence as a mother—becoming empowered with evidence-based parenting skills and strategies—but also built a village of her own to support her baby's growth and development in ways that are sure to make an immeasurable impact on their life to come. As pediatricians, it is our belief that most of medicine occurs outside of the clinic. Common-sense programs like these are critical interventions to improve the well-being of the children and families that we care for.

Sincerely,

Joey Michel, MD

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