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**Testimony on H-5281, Rhode Island Child Care is Essential Act
House Finance Committee
May 22, 2025**

Good afternoon, Chairperson Gallo and members of the House Finance Committee. My name is **Jocelyn Antonio**. I am a resident of the town of Cumberland and a public health professional offering this testimony in my personal capacity.

I strongly urge your support for **H-5281 – An Act Relating to Human Services – Rhode Island Childcare is Essential Act**, sponsored by Representative Diaz and co-sponsored by Representatives Shallcross Smith, Donovan, Caldwell, Slater, Edwards, Casimiro, Tanzi, Potter, and Kislak.

This legislation would expand eligibility for the Child Care Assistance Program (CCAP) to meet national best practices, strengthen provider payment policies, and modernize reimbursement rates, especially for infant care. It also removes child support cooperation requirements that can be harmful to survivors of domestic violence. Collectively, these changes would build a more equitable and stable childcare system across Rhode Island.

Public Health Implications of Accessible Childcare

According to the **American Public Health Association**, education access and quality is a core social **influencer of health** - a non-medical factor that significantly impacts **health outcomes**. Educational attainment is the **single greatest predictor of a person's health and well-being across the life span**.¹ Quality **early childcare** plays a **critical role in health and development, supporting learning, behavior, and social-emotional skills**, while also supporting **long-term mental and physical health**.

Numerous studies have shown that access to **high-quality, affordable childcare is associated with:**

- Improved school readiness and academic achievement²
- Increased parental workforce participation and economic mobility³
- Reduced behavioral and emotional challenges for children
- Improved maternal mental health and family well-being

Maternal Health and the Child Care Crisis

The **United States is facing a maternal health crisis**, despite spending **more per capita on maternal health than any other country**.⁴ The U.S. has the **highest rate of maternal deaths among high-**

¹ CDC, "Social Determinants of Health"; American Public Health Association, "Education and Health."

² Schneider and Gibbs, "Disparities in Housing, Health Care, Child Care, and Economic Security Affect Babies for Life"; Malik, "Growing the Economy Through Affordable Child Care"; Birchfield Kennedy, JD, "Child Care and Early Education Is a Social Determinant of Health—For Children and Adults"; Foundation, "The Impact of the High Cost of Child Care."

³ Birchfield Kennedy, JD, "Child Care and Early Education Is a Social Determinant of Health—For Children and Adults"; Lieberman, "Lack of Access to Child Care Impacts Child Well-Being."

⁴ Every Mother Counts, "The United States."

income nations, and these disparities disproportionately impact **Black and Indigenous women**.⁵ Access to **affordable, high-quality childcare is a crucial component of postpartum support**.

Research has found that:

- **Access to childcare** helps protect mothers from experiencing depressive symptoms.
- **Reliable childcare reduces** the impact of sleep deprivation, lowering the risk of maternal depression.⁶
- **Children in high-quality childcare are less likely to experience the negative emotional and behavioral effects** of maternal mental health disorders and other challenging family circumstances.⁷

Yet, **childcare access remains deeply unequal**. Data indicates that **57.3% of Latino/Hispanic families live in childcare deserts—a disproportionately higher rate** than the general population (50.5%). Combined with **higher maternal mental health disorders in Latino/Hispanic** communities (40%), this underscores why passing House Bill 5281 is essential for public health and racial equity.⁸

Alignment with Federal Standards

House Bill 5281 brings Rhode Island in line with the national best practices. By expanding eligibility to 85% of the State Median Income (SMI) and allowing families to retain assistance until reaching 100% of SMI, Rhode Island would join at least 18 states in the country- including all of our New England neighbors – in meeting or exceeding the federal benchmark.

This bill ensures compliance with updated **federal equal access standards, modernizes payment practices, and increases infant care reimbursement rates by 50%** compared to toddler care—helping stabilize a workforce that is predominantly women and women of color.

Conclusion

House Bill 5281 is an **essential, equity-driven and long overdue investment** that prioritizes the **well-being of Rhode Island’s children**, families, and economy. H-5281 **is not just a human services bill—it is a public health bill**.

This legislation:

- Expands family eligibility
- Remove child support enforcement as a barrier
- Increases reimbursement rates for infants
- Aligns with federal access and payment standards
- Ensures providers can sustain quality care

I urge the committee to support and pass this critical legislation.

⁵ Gunja et al., “Insights into the U.S. Maternal Mortality Crisis.”

⁶ Armstrong et al., “Use of Child Care Attenuates the Link Between Decreased Maternal Sleep and Increased Depressive Symptoms”; Shapard, “Analyzing the Effects of Postpartum Support on Maternal and Child Outcomes.”

⁷ Seiler et al., “Long-Term Promotive and Protective Effects of Early Childcare Quality on the Social–Emotional Development in Children”; Goelman et al., “Maternal Mental Health, Child Care Quality, and Children’s Behavior”; Wilhelmsen et al., “Children’s Mental Health.”

⁸ Britt, “Childcare Access.”

Thank you for your time and consideration.

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