

House Committee on Health and Human Services.
82 Smith Street,
Providence, RI 02903
8 April 2026

Re: Testimony in Support of House bill 7626 titled **Relating to Health and Safety – The Rhode Island Maternal Health; Improvement and Equity Act of 2026.**

Dear Chairperson Donovan and members of the House Committee on Health and Human Services.

We are Lily Simon and Megan Rabe from Providence. We are two first year medical students at the Warren Alpert School of Brown University.

We support House bill 7626, titled **Relating to Health and Safety – The Rhode Island Maternal Health; Improvement and Equity Act of 2026.**

We are in favor of bill 7626 because its mission is to provide better health care for all mothers in our state. By supporting the continuation of a statewide maternal health strategic plan, this bill will ensure that RI continues a commitment to lessen health disparities in maternal health, which ultimately promotes the health well-being of mothers and their families.

While working with a community OB/GYN practice this year, we witnessed firsthand how unpredictable – and life-altering – pregnancy and childbirth can be. One patient, whom we will call Jane, a Spanish-speaking mother, delivered her first child this past July. What began as a routine pregnancy quickly became a medical emergency: during an urgent C-section, she required a hysterectomy due to unexpected complications, followed by emergency bowel surgery. Though she was ultimately able to return home with a healthy baby girl, her recovery did not end there – she has since been hospitalized twice more for serious complications.

Jane's story is not just about medical complexity; it is about what comprehensive maternal support can make possible. Because of Rhode Island's existing maternal health initiatives, she was not alone. She had access to a Spanish-speaking doula during delivery, mental health counseling to process her experience, and childcare support so she could attend critical follow-up appointments.

Her experience underscores a simple but urgent truth: maternal health does not end at delivery, and without sustained, coordinated support, even the healthiest pregnancies can become crises. Bill H7626 recognizes this gap by proposing the creation and funding of a statewide maternal health task force to coordinate care, identify disparities, and strengthen support systems across Rhode Island. Including funding for this initiative in the state budget is a critical step toward ensuring that every mother—not just those who are fortunate enough to access existing resources—receives comprehensive, culturally competent care throughout pregnancy and beyond.

Jane's story is not an isolated case. It reflects broader patterns in maternal health across Rhode Island. Each year, approximately 118.5 out of every 10,000 births in our state involve severe, life-threatening complications. While Rhode Island performs better than the national average in some measures, maternal mortality remains a real and preventable risk. These outcomes are not experienced equally: Black women face significantly higher rates of severe maternal complications than white women, underscoring persistent and unacceptable disparities in care. Additionally, more than one in eight mothers in Rhode Island report symptoms of postpartum depression, highlighting the critical need for mental health support well beyond delivery. Together, these data make clear that maternal health is not confined to the delivery room – it is an ongoing, complex process that requires coordinated, sustained investment to ensure safe and equitable outcomes for all families.

Introduced in 2023, the five-year Maternal Health Innovation (MHI) grant awarded to the Rhode Island Department of Health has responded to this nuanced reality of maternal health by funding and facilitating the development of a statewide maternal health strategic plan. So far, this grant has allowed for incredible strides in maternal health equity across several domains, from perinatal system improvement to community and behavioral health. Under the MHI grant, the maternal health task force has established the first and only certified midwifery training program. Another initiative under this grant is to bolster workforce development of community-based providers, including CHWs and perinatal doulas, and partnering with community organizations to increase accessibility to nutrition, housing, and transportation. All efforts go towards truly meet the mother where she is. Investing in this work means tending to the health of all mothers, and addressing all biological, psychological, and social, and structural factors that impact their health. In our training to become future physicians, we are becoming increasingly aware how important it is to create infrastructure that improves the health of communities. Passing this bill means more comprehensive, quality care for the maternal health population- care they deserve.

Progress initiated by the MHI grant should not end when the grant ends. We need to maintain this momentum by passing bill H7626, investing in infrastructure to improve the health of our communities and save the government money in the long run.

We urge you to vote in favor of bill H7626.

Thank you for your time and the opportunity to write in favor of bill H7626. We are happy to answer any questions you may have.

Sincerely,

Lily Simon and Megan Rabe
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