

## JOCELYN P. ANTONIO, MPH

### Testimony on Senate Bill 2369, Rhode Island Early Educator Workforce Act Senate Finance Committee June 2, 2026

Good afternoon members of the Senate Finance Committee. My name is **Jocelyn Antonio**. I live in Cumberland, Rhode Island. I am providing this testimony in my personal capacity as a public health professional.

**I strongly urge your favorable consideration and support for Senate Bill 2369 – An Act Relating to Education – Rhode Island Early Educator Workforce Act**, sponsored by Senator Urso and co-sponsored by Senators Quezada, Gallo, Zurier, Murray, DiPalma, and Bissaillon.

The proposed legislation aims to establish a new section of state law that formally recognizes the critical role of early childhood teachers. The bill codifies both the T.E.A.C.H. Early Childhood Workforce Development initiative and the RI Early Childhood Registered Apprenticeship program into state statute. These are proven, effective strategies designed to help Rhode Island's early learning and childcare centers recruit, train, and retain a skilled, dedicated workforce.

Furthermore, the legislation designates \$1 million from general revenue to sustain the national Child Care WAGE\$ program within the state. The Rhode Island Association for the Education of Young Children (RIAEYC) manages this initiative locally, providing substantial salary supplements to credentialed early educators who earn an hourly rate of \$23 or less. These bonuses currently scale from \$1,500 annually for individuals holding a Child Development Associate (CDA) credential up to \$6,000 annually for teachers with a bachelor's degree in early childhood education. The Child Care WAGE\$ model boasts a proven track record of significantly lowering employee turnover and boosting the overall quality of care that children receive.

### **Public Health Implications of Early Childhood Education**

Education is a well-established **social determinant of health**. It serves as the **single strongest predictor of lifelong health, well-being, and economic security [1], [2], [3], [4]**. The research is consistent and compelling: early childhood education (ECE) programs have long-term positive impacts on children's physical, mental, and social health outcomes—particularly for children from low-income and minority households [3], [5].

Research shows that children who attend high-quality prekindergarten programs are more likely to:

- Start kindergarten ready to learn [6], [7], [8], [9], [10], [11], [12]
- Experience long-term academic success [6], [10], [12], [13]
  - Graduate high school at a 6% higher rate
  - Attend college on time at an 18% higher rate
  - Enroll in a 4-year college at a 5% higher rate
- Close achievement gaps between income groups and dual-language learners [10], [13]

- Avoid risk behaviors such as substance misuse, smoking, and involvement in the criminal justice system
- Exhibit better mental and physical health [6], [9], [10], [13]
  - Suffer lower rates of depression
  - Demonstrate improved social-emotional development
  - Experience reduced obesity and better nutrition
  - Benefit from earlier detection of hearing and vision problems
- Secure better long-term employment outcomes and more consistent access to health insurance [6], [9], [10], [13]

Early childhood education benefits more than just children – it also supports families by:

- Increasing maternal workforce participation and income
- Reducing out-of-pocket childcare costs
- Offering a strong return in investment- ranging from **\$3 to \$6 for every dollar invested** [3], [6], [7], [9], [13]

### **The Role of Educators in Child Health and Development**

Early childhood educators lay the foundation for a successful learning journey. They guide the youngest members of our society through their first interactions with the education system while nurturing and inspiring curiosity. As the RIDE website states, “high-quality early childhood education produces substantial long-term educational, social, and economic benefit with the largest benefit for children occurring when teachers are professionally prepared and adequately compensated.”

Yet, the current compensation for early childhood educators fails to reflect the critical role they play. That is unacceptable.

### **Challenges Facing the Early Educator Workforce**

Rhode Island is experiencing an early childhood educator workforce crisis. This crisis stems largely from persistently low wages; childcare educators earn some of the lowest wages in the state, averaging about \$16.74 per hour in 2024, according to Right from the Start.

Women and people of color predominately comprise this workforce [14]:

- 75% of family childcare (FCC) educators identify as Hispanic females
  - 42% of FCC educators are between the ages of 51 and 60
- 69% of center-based educators identify as White, Non-Hispanic females
- 18.4% receive Medicaid or Medicare assistance
- 9% receive SNAP assistance

It is unjust to ask historically marginalized groups to bear the weight of our society while we continue to underpay and undervalue their labor.

### **Public Health Benefits of Supporting S-2369**

By passing S-2369, Rhode Island can:

- **Enhance child outcomes:** Stable, supported educators foster higher-quality learning environments that drive healthy development.
- **Reduce health disparities:** Quality early education mitigates the lifelong impact of poverty and systemic inequality.
- **Promote community wellness:** Education and public health intertwine inextricably; investing in early learning builds healthier, more resilient communities.

We cannot build resilient early education systems without valuing the very people who make them possible. Failing to retain the workforce that supports our infants and toddlers unfairly jeopardizes their development and education.

How can we ask our children to value education if we don't demonstrate how we value educators - the very people who carry that knowledge?

I respectfully implore **your consideration and passage S-2369**.

Thank you for your time and consideration.

Jocelyn Antonio, MPH

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