

Submitter: Matthew Richardson
On Behalf Of:
Committee: Senate Committee On Early Childhood and Behavioral Health
Measure, Appointment or Topic: SB695

Dear Chair Reynolds, Vice-Chair Anderson, and members of the Senate Committee on Early Childhood and Behavioral Health,

My name is Matthew Richardson, and I am a government affairs manager for the Nurse-Family Partnership home visiting model. As an organization that is deeply involved with supporting maternal health, I am writing to share our support for SB 695.

Nurse-Family Partnership (NFP) is an evidence-based nurse home visiting program that partners specially-trained registered nurses with expecting parents, starting early in the pregnancy and continuing through the child's second birthday. With the support of an NFP nurse, families experience better pregnancy outcomes, improved child health and development, and greater economic self-sufficiency. Parents, babies, families, and communities all benefit from these proven services.

The aims of SB 695 align with the values of Nurse-Family Partnership, as we are tightly focused on investing in upstream efforts that prevent risks from developing into high-cost needs that adversely impact families and our society. Leveraging any existing pieces of our health care system to better prioritize how we support families is key so we can make the most of what resources exist.

Focusing on stability and resources for parents during pregnancy and the postpartum period makes sense as you consider the return on investment for our systems and also fulfills our hearts' desires to come to the aid of families and children in need.

Pregnancy and the first 12 months of life are critical for social emotional and cognitive development and can affect social, educational, and health outcomes across the lifespan. Thriving children and families lead to thriving communities and a strong society. As a program committed to helping families succeed, Nurse-Family Partnership supports SB 695.