



# Maternity & Early Childhood Foundation

**Testimony to the Joint Legislative Budget Committee  
Health/Medicaid  
February 25, 2021**



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I am writing on behalf of the Maternity and Early Childhood Foundation (MECF) but more importantly...I am writing on behalf of New York's most vulnerable citizens—**babies**. *Babies do not wait for pandemics to pass or for budgets to be approved...to arrive. They come when they are ready.* These budget decisions are literally about life or death and are most certainly going to have a lasting impact on generations to come.

Much to our dismay, the Governor's 2021-22 Executive Budget eliminated all of MECF's budget funding from last year—a total of \$427,000. As you can imagine, this is devastating to all of the programs and people we serve throughout the State, especially during a pandemic when our services are needed most. On top of this cut, we have yet to execute a contract (due to end March 31, 2021) promised in last year's Enacted Budget. At the community level, where needs have exploded, these delays and cuts have slashed much-needed funding to programs that directly serve families. That means the funding we have given in the past few years—up to \$38,000/year, has *fallen dramatically to an unacceptable low of around \$3500 per program*. This—when needs have been exacerbated due to COVID impacts—is not enough. **New York children and families deserve an investment that addresses the urgency, diversity, and impact of their needs. To ensure young parents and their infants receive timely, vital services, we respectfully ask for a total appropriation of \$602,000 for the Maternity and Early Childhood Foundation.**

MECF is not the only casualty of this austerity budget. The economic pain of the pandemic has been transferred to New York nonprofits and human services, and in turn, onto New York children and families. It is essential that all maternal and childhood health service providers are able to continue to function without staffing and program cuts, or even worse—closing their doors. The mothers and babies at risk often rely on multiple resources: home visiting, housing, affordable and quality healthcare, and educational/employment to name a few. They are interconnected with MECF as collaborators working to create healthy outcomes.

Maternal, infant, and early childhood home visiting is recognized across the nation as a uniquely effective approach to family strengthening with myriad benefits to the health, well-being and economic security of children and families. Home visiting can improve birth outcomes, improve school readiness, increase caregiver workforce participation, lower rates of welfare dependency; and reduce instances of child maltreatment. Home visiting is a proven, cost-effective intervention that yields tremendous savings over the lifetime of children in the form of lower health care costs and improved earnings as adults.

**We urge the Legislature to increase State investment in home visiting to maintain existing programs and expand services to more families. Specifically, to support home visiting programs and infrastructure, we request the following investments:**

- Restore \$602,000 to the Maternity and Early Childhood Foundation (MECF) to support community-based programs serving children, families, and expectant parents across NYS.
- Invest \$2 million for ParentChild+ to support sustainability at existing sites.
- Restore the OCFS/Public Private Partnership grant to restore \$1.3M for two Parents as Teachers (PAT) sites in Rochester.
- Restore \$1 million for Nurse-Family Partnership (NFP) to provide a total of \$3.4 million to support sustainability at existing sites.
- Maintain \$26.2 million for Healthy Families New York (HFNY) to support sustainability at existing sites.

### **SUPPORTING NEW YORK FAMILIES SINCE 1983**

As a 38-year-old organization that has built strong relationships with maternal and child health community programs across the state, we believe the current NYS budget investment in maternal and child health falls dangerously short. This is a time when 325,000 children have been pushed into poverty joining the millions who were already there. This is a time when we must use our resources to promote health through prevention. The historic public health crisis of COVID-19 has amplified the longstanding inequities which MECF programs aim to address. The trauma of the pandemic and its accompanying distress will continue to be felt for generations to come if we do not invest in our youngest citizens and the parents who are trying to build healthy families.

MECF currently supports 16 community-based programs where other services are often limited, nonexistent, or overwhelmed. (See a full list of our programs attached.) These programs provide services such as:

- Outreach to parents who might not seek services
- Home-visiting services to ensure proper perinatal care
- Parent education and counseling in group and individual settings
- Crisis intervention and case management
- Assistance with health care coverage and appointments
- Emergency services and supplies
- Guidance furthering education and employment goals
- Connections to other needed services like WIC, foster care or adoption counseling, nutrition workshops, mental health care, medical care, child-care, lead testing, legal services, doula services, and so much more

These services are an essential component of building a strong community, made of thriving families, and are critical during times of crisis and recovery.

The 2019-20 Enacted Budget provided a total of \$427,000 to MECF. With those funds, MECF programs served 236 pregnant women, 750 parents, and 759 children from July 2019 to June 2020. They provided 2,617 home visits, 1,752 group support sessions, and 7,400 individualized support/counseling sessions. Program staff delivered 17,507 emergency services and supplies, and provided 752 transports. Program staff also made 3,354 referrals to other needed services. In 2019-20, **MECF programs served diverse communities: 43% of individuals served identified as white, 17% as Black, 31% as Latinx, 6% as multiracial, and 3% as another race not listed. Fifty-two percent were age 25 or younger. We need to address disparities in health outcomes by investing in supportive and preventative programs serving diverse populations.**

Our programs have been embedded in their communities – some, for decades – offering established, reliable sources of trust and support to the families they serve. Program staff in these community organizations are resourceful, creative, and ready to evolve as their communities change and grow. This has helped them weather the unexpected challenges of the pandemic, working remotely, and establishing virtual support for their clients. Many programs adapted their strategies of support to meet the pressing needs brought on by COVID—transforming quickly to face emergencies such as food shortages, the need for baby formula and diapers, transporting pregnant moms to doctor’s appointments and the list goes on. For example, one program in Brooklyn and Queens was unable to continue parenting workshops in person and many participants did not have access to virtual programs. The program recognized the impact of food insecurity on their community and began to function as a food pantry, while also handing out parenting resources to those in line waiting to get food.

One of the most important and often overlooked elements of the long-standing relationships that MECF has had with these organizations is that of trust. I do not think we can underestimate the value of such trust—of being able to work together collaboratively and tapping into so many years of institutional knowledge that allows us to know what various parts of the state look like, and need, around maternal and child health. There is also the incredible power of trust between those staff and the people who come to them for services. And for those who have been living in trauma—be that from poverty or family histories of abuse—trust is not easily built, and breaking it can unravel years’ worth of progress. Steady funding means strong retention of staff and successful outcomes for moms and babies. Steady funding means communities are transformed through consistency and strategic work, while cuts and eliminations of funding result in damage that pervades the entire community, the region and the state as a whole.

### ***NEW YORK MUST PRIORITIZE THE NEEDS OF CHILDREN AND FAMILIES***

2020 was an unprecedented year – a global pandemic and a turbulent election cycle, combined with strong progressive social movements – have demanded transformative action from all of us. COVID-19 has cast a bright light on the fragility of our strained and broken systems and has underscored the needs and inequities that have existed for far too long. For example, in New York State, black mothers are four times more likely to die during childbirth than white mothers; their babies are twice as likely to die during infancy as white babies. We must confront the health disparities present in our society with a whole-hearted investment in all New York communities. It is our collective duty to ensure that the needs of all New Yorkers are met.

There is no doubt that the formative years of early childhood are important. During the first few years of life, more than one million neural connections are formed in the brain every second. These connections form as the child interacts with others – especially their parents and caregivers – and experience their environment. A language-rich, safe, nurturing environment is essential to healthy childhood development, and establishes a strong foundation of skills needed for success in school and beyond. **We do not get a second chance with this critical groundwork. The window of opportunity to impact a child’s future and health, as well as the years ahead...is short. By cutting funds and programming, the window slams shut and the negative effects are devastating to individuals, families, and entire communities.**

**The ideal learning environment is not a reality for all New York children. The 2017-18 National Survey of Children’s Health found that almost 20% of New York children ages 0-5 had experienced at least one adverse childhood experience (ACE),** such as poverty or economic hardship, violence or abuse, food insecurity, neglect, or separation from family. The toxic stress associated with these experiences can seriously hinder brain development and create lasting barriers for the child. ACEs can impair a person’s ability to respond to stress and can make it more difficult to establish and maintain relationships. Children with one or more ACEs are more likely to demonstrate behavior issues, aggression, depression, or anxiety, and suffer long-term health problems.

Many MECF programs are alarmingly under-resourced—a condition that predates the pandemic. Even before March 2020, a lack of resources, funding, and staff resulted in families (including pregnant teenagers) being placed on wait lists. Pregnancy and early childhood are time sensitive, and pregnant women and young children do not belong on wait lists. Every missed doctor’s visit and opportunity to develop healthy habits and access the resources needed to deliver a healthy baby...result in higher risk for the mother and child. It is disheartening for staff who want to help but are unable to, and it is harmful to the families that are going through one of the most important changes of their lives without the support they need. On top of this, all programs have reported issues related to staff burnout and the impact their clients’ trauma has on them (vicarious trauma). Many are facing difficulty hiring and retaining staff to effectively serve their communities.

With additional funding, MECF programs would be able to support more staff time and serve more families. Our programs know what works best to change the trajectory for these women and their babies. They continue to inspire with their resourcefulness, their resiliency, and their passion to help create healthy families right from the start even as they are struggling with an ever-growing burden due to the pandemic. We know that program cuts and elimination of funding will push more pregnant moms onto waiting lists or even worse, into further isolation just when they need pre & post-natal and parenting services most.

Through MECF’s new Peer Sharing Network and Training Series, we aim to build capacities in the community-based programs through training, resource development, and a vibrant learning cohort comprised of programs that are located across the state. The impact of these prevention and early intervention services is lasting; reducing the risks of low birth weights and poor nutrition translates to spending less on health care overall, while focusing on nurturing early learning strengths and capacities. Prevention, rather than crisis intervention, is better for the child, the families, the community, and the state. By giving staff an opportunity to share best practices, challenges and to participate in strategic creative problem-solving...we can strengthen the overall maternal and child health program network and help inform statewide policy and program development.

### ***NEW YORK FAMILIES DESERVE TO THRIVE***

Families belong together in safe, stable homes where they can live, learn, and grow. They deserve to be and feel supported by a caring society that is invested in their success. We urge you to think of our budget as a moral document that conveys the values and priorities of our society **and those should always – and especially right now – be centered on children, families, and our society’s future.** We respectfully request your consideration to include \$602,000 in funding for the Maternity and Early Childhood Foundation in the 2021-22 Budget in order to continue essential, health-building services to young families in New York communities. Thank you for your leadership and for your commitment to New York children and families.



*Children show their artwork at CCBQ's reading workshop for families.*

## 2019-2020 MECF-FUNDED PROGRAMS

### **Catholic Charities of Brooklyn and Queens**

Through workshops and individual sessions, CCBQ's Parenting Program provides education, referrals, and support related to nutrition, prenatal care, positive parenting, and health and wellness to families in **Bay Ridge and Brownsville, Brooklyn and Astoria and Corona, Queens.**

### **Catholic Charities of Buffalo, NY**

The Young Parents Program provides group parenting classes, home-based services, and short-term supportive counseling to parents under 30 or first-time parents in the **City of Buffalo and Erie County.**

### **Catholic Charities of Franklin County**

Parenting Support: A Quilt of Services that Hold a Family Together provides home-visiting services, parent education, and legal advocacy to families in **Franklin County.**

### **Catholic Charities of Livingston County**

The Community of Caring Program provides parent education, counseling, and home-based services to women who are pregnant or parenting in **Livingston County.** The program also provides parent education to male and female inmates at **Livingston County Jail.**

### **Catholic Charities of Onondaga County**

The four-week Lullaby League course provides education regarding birthing, infant care, and parenting to pregnant and parenting women in **Onondaga County.**

### **Catholic Charities of the Diocese of Rockville Centre**

Regina Maternity Services offers housing, case management, crisis intervention, and parent education to homeless and at-risk pregnant and parenting women in **Nassau and Suffolk Counties.**

### **Community Maternity Services**

Two CMS agencies offer goal-directed case management services, advocacy, parent education, and other supportive services to pregnant women and parents with children under four living in **Schoharie, Otsego, Warren, and Washington Counties.**

### **Cornell Cooperative Extension of Jefferson County**

Strengthening Family Foundations provides home-visiting services and group parent education workshops that focus on nutrition, healthy relationships and homes, and life skills to pregnant women and parents with children under five living in **Jefferson and Lewis Counties.**

### **Delaware Opportunities, Inc.**

The Better Beginnings Program is a series of parent education classes with transportation and childcare for pregnant and parenting at-risk families in **Delaware County.**

### **Economic Opportunity Council of Suffolk, Inc.**

Teens As Parents is an innovative school-based prenatal and parent education program that offers doula support and home-visiting services to teens in **Suffolk County.**

### **LSA Family Health Service**

The Maternity Outreach Program provides in-home nursing visits, along with maternal and infant healthcare education, to high-risk new mothers and their infants in **East Harlem.**

### **MOMMAS, Inc.**

The MOMMAS House Mother-Child Transitional Housing Program provides stable and/or emergency housing, along with parent education workshops, to at-risk women and their children in the **Greater New York Area.**

### **Oswego County Opportunities, Inc.**

OPTIONS provides crisis intervention, case management, parent education, and support to pregnant and parenting teens in **Oswego County.**

### **Society for the Protection and Care of Children**

Teenage Parent Support Services: Reaching Young Parents Early provides home-based education and services, as well as connections to needed services, to pregnant women and parents up to age 22 in the **City of Rochester and Monroe County.**

### **YWCA of Jamestown**

The Teenage Education and Motherhood Program provides daily parenting classes, childcare during school, and case management to pregnant and parenting students in **Chautauqua County.**