

## **Candidate for FCAAP Pediatric Subspecialist At Large Representative, 2025-2027 Term**



Name: Randell Alexander MD PhD FAAP

Location: Jacksonville, FL

I went to medical school at Wayne State University (Detroit), did my residency in Grand Rapids (Michigan State campus), and completed my PhD at the University of Michigan. After fourteen years at the University of Iowa and six years at Morehouse School of Medicine, I came to Florida to be the Statewide Child Protection Team (CPT) Medical Director, Professor of Pediatrics at the University of Florida in Jacksonville, and Chief of the Division of Child Protection and Forensic Pediatrics.

For 35 years I have been Chair of AAP Child Abuse Committees in Iowa, Georgia and then 19 years in Florida. In Florida, our committee has been very active and effective legislatively in advocacy for children, and with extensive teaching by our members. We have initiated some landmark laws (e.g., Child Abuse Hotline must accept reports by Emergency Room physicians; DCF must investigate children from out of state who are physically being seen in Florida; holding out of state physicians responsible to the Board of Medicine if they provide outrageous testimony) and obtained millions of dollars in funding for child abuse.

Serving on national AAP Committees on Child Abuse, working with CDC and NIH, many national and international boards related to child abuse, and working with the FCAAP has been an opportunity to learn and advance our understanding of the stress faced by children who have experienced racism, health equity and access issues, mental health, and most recently Covid-19. Working with developmentally disabled children for years helps bring an insight into the challenges families face when dealing with their emotional complexities and the problems in navigating a medical system that can be difficult. As the Child Protection Team Statewide Director for 10 years, I was able to travel and work with general pediatricians throughout Florida – seeing their thoughtfulness, hard work, and concerns.

On the front line we see children hurt or killed because we didn't prevent neglect or physical abuse. An even larger pediatric audience are those parents who simply want what is best for their child, but need the advice and support that pediatricians and others in the community can provide if given the resources and financial infrastructure to do our jobs best.

As a Board member, it will be important that we build on the successes to date with shots, health care reimbursement, and legislative good will. But we also need to continue to move forward with real reforms in helping the underserved, the children with disabilities, the victims of racism, and those with mental health problems. More recently, it is important that we protect children from government intrusion in health care as we support what is best medically. We need to hold the line when laws are passed that adversely affect the education and healthcare of children. This includes advocacy for prevention and early intervention so that children can have excellent childhoods and increase their chances for optimal health and development.