WITNESS INFORMATION FORM

Date: May 28, 2019

Name: Steven R Killpack

Are you representing: Yourself __________ Organization: **OPNFF**

Organization (If Applicable): **Ohio Practitioners' Network for Fathers and Families**

Position/Title: Secretary-Treasurer

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Do you wish to be added to the committee notice email distribution list? Yes ____ No X

Business before the committee

Legislation (Bill/Resolution Number): **House Bill 11**

Specific Issue: **Family Inclusion in Prenatal Care and Education**

Are you testifying as: Proponent X ____ Opponent _______ Interested Party _______

Will you have a written statement, visual aids, or other material to distribute? Yes X ____ No____

(If yes, please send an electronic version of the documents, if possible, to the Chair’s office prior to meeting. You may also submit hard copies to the Chair’s staff prior to meeting.)

How much time will your testimony require? **written only**

Comments:

Please be advised that this form and any materials (written or otherwise) submitted or presented to this committee are records that may be requested by the public and may be published online.
Representative Derek Merrin  
Representative Janine Boyd  
Health Committee  
Ohio House of Representatives  
May 24, 2019

Chairman Merrin and Ranking Member Boyd,

I write in support of HB 11 and its important efforts to improve health outcomes tied to infant mortality rates in Ohio. I am grateful to Co-Sponsors Manning and Howse for introducing this important bill and to you for bringing the bill forward for hearings so quickly.

I am also grateful to the leadership of both caucuses for recognizing the essential nature of the work to combat infant and maternal mortality in the state. I support the comprehensive approach in HB 11 to address four elements of pre-natal health-smoking cessation, dental hygiene, lead education, and group pre-natal care.

However, I believe that the current bill could be strengthened with more family-inclusive language requiring the engagement of fathers, partners and family caregivers in the four elements of pre-natal health. As a Board Member of the Ohio Practitioners’ Network for Fathers and Families, a former Commissioner of the Ohio Commission on Fatherhood and Co-Chair of the Fatherhood Action Group of the Ohio Collaborative to Prevent Infant Mortality, I have been working for many years to promote the engagement and inclusion of fathers, partners and family members in maternal and child health programming. The theoretical framework for father/partner inclusion is provided by Princeton’s Fragile Families and Child Well Being Study. The study found that the time of pregnancy and birth is a “magic moment” for father/partner engagement AND that father/partner involvement is directly related to improved the health of both mothers and infants.

I’m attaching a brief document describing ways that educated involved fathers and partners improve maternal and infant health. The document also provides information on how pre-natal and postnatal health care providers can engage fathers/partners. I encourage you to review this information and incorporate some of this language in HB 11. Again, thank you for working on this important topic, and I look forward to continue working with you and the Health Committee on the passage of this important legislation.

Respectfully,

Steven R Killpack MS  
Executive Director, Healthy Fathering Collaborative  
Founding Board Member, Ohio Practitioners’ Network for Fathers and Families
Why Fathers and Partners in Maternal and Child Health?

Fathers and partners involved during pregnancy and at the birth of the child ("Magic Moment") tend to remain engaged throughout the life of the child.

1. Children with involved fathers/partners do better in school, have less behavior issues, are less likely to live in poverty, are less likely to be incarcerated, etc.
2. Healthy father/partner involvement can serve as a protective factor during pregnancy, birth and during the child’s first year.
   a. An informed and knowledgeable father/partner can provide support for mother’s healthy living to include: Healthy diet, healthy homes, smoking cessation, opposing drug use, prenatal appointments, decreased stress, transportation, etc.
   b. A father/partner can serve as a protective factor and safety net to increase the chances of child reaching his/her first birthday to include: Promoting and supporting breastfeeding, opposing drug use, decrease mother’s stress by sharing time and care for infant, provide economically (decrease chances of child growing up in poverty), support during well-baby check-up appointments and overall sharing in the responsibility of properly caring for his infant.
   c. A father/partner who reads to his/her infant/child (pre/post birth) enhances the development of his/her child and increases the chances of his child’s early learning development.
   d. A father/partner’s extended family support adds to the protective aspects for an infant’s safe environment to include: Additional family members to provide extended emotional, social and financial support for the child. The other half of the infant’s identity adds confidence and structure to the development during childhood.
   e. The father/partner’s financial support is as natural as breathing when there is a relationship between the father/partner and his child.

Involving Fathers/Partners in Preventing Infant Mortality

Pre and Post Natal Care Providers, Home Visiting Programs and Pediatricians have opportunities to engage and educate fathers and partners in some key ways to help prevent infant mortality:

1. Engage Fathers/Partners
   a. Proactively invite fathers and partners to appointments when they are scheduled
   b. Insure that the health care setting is father/partner-friendly and that all language is father/partner-inclusive
   c. Address fathers/partners directly during appointments/visits about the important role fathers/partners play in maternal health during pregnancy/childbirth and in infant health
2. Educate Fathers and partners on specific ways they can be involved in Infant Health
   a. Support and help mother’s scheduling, transportation to and participation in prenatal, postnatal and infant care appointments
   b. Support mothers in healthy behaviors during pregnancy: reduce or abstain from smoking, drug/alcohol use and increase healthy nutrition
   c. Model healthy behaviors around mother and children
   d. Help mother prepare safe sleep environment and routine in her (or their) home
   e. Prepare and monitor a safe sleep environment and routine in the father/partner’s home if he/she does not live with mother
   f. Prepare and monitor a safe sleep environment and routine in other locations where the child may sleep or nap
   g. Teach fathers/partners the importance of breastfeeding and how they can support the mother’s breastfeeding of their infant
   h. Develop a reproductive life plan to prevent unplanned pregnancies