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Civil Justice
Criminal Justice
Education and Career Readiness

Tavia Galonski
State Representative

Chairman Huffman, Vice Chairwoman Gavarone, Ranking Member Antonio, and my colleagues of the House Health Committee, I appreciate the opportunity to be able to offer sponsor testimony on House Bill 613.

House Bill 613 aims to protect Ohio's most vulnerable population by addressing the horrific infant mortality rate in the state of Ohio. According to the Center for Disease Control and Prevention's most recent 2016 numbers, Ohio has the 9th highest infant mortality rate in the nation¹. For Summit and Stark counties specifically, the infant mortality rate is exceptionally high at 7.5 and 9.0, respectively². Initially brought to us by the National Coalition of STD Directors, House Bill 613 tackles this issue head on by increasing screening opportunities for harmful STDs in expecting mothers. Health care professionals would be required to offer HIV, syphilis, and gonorrhea tests to a woman during her first pregnancy related appointment and again at the beginning of the third trimester. To respect the patient's bodily autonomy, the health care professional would also be required to inform the mother of her right to refuse the tests.

The reason why House Bill 613 specifies HIV, syphilis, and gonorrhea testing is because they are especially dangerous to newborns if gone untreated. Looking to HIV, infants who are infected will ultimately be subjected to the myriad of issue resulting from the virus. For example, according to the American Academy of Pediatrics, over the first 24 months of life the mean rate of development of HIV-infected infants is significantly slower than that of infants born to HIV negative mothers.³ As for infants infected with syphilis, up to 40% may be stillborn or die from the infection as a newborn⁴. Lastly, gonococcal infection in infants can cause corneal scarring, ulceration, and perforation of the globe within twenty-four hours⁵.

The key to reducing infant mortality and STD induced health problems an infant is faced with is to offer these tests early in the pregnancy so that these infections can be detected and managed before the child is born. However, this is not a fix all solution. We understand the complexities behind reducing the infant mortality rate and therefore worked with many Ohio based healthcare organizations to craft the bill language to ensure we are actively working to end infant mortality.

¹ https://www.cdc.gov/nchs/pressroom/sosmap/infant_mortality_rates/infant_mortality.htm

² <https://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/cfhs/OEI/2016-Ohio-Infant-Mortality-Report-FINAL.pdf?la=en>

³ <https://www.ncbi.nlm.nih.gov/pubmed/7491224>

⁴ <https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3828094/>

35th House District

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This bill is not just pertinent for constituents in Northeast Ohio, but for every woman and child in the state. We must do everything we can to protect these children and ensure the healthiest possible pregnancy for the mother.

Chairman Huffman, Vice Chairwoman Gavarone, Ranking Member Antonio, and the rest of the House Health Committee, again I thank you for allowing me to offer sponsor testimony for House Bill 613. Thank you for your time and I am willing to answer any questions you may have.