Congress of the United States

Washington, DC 20515

March 4, 2024

The Honorable Xavier Becerra Secretary U.S. Department of Health and Human Services 200 Independence Ave., SW Washington, D.C. 20201

Dear Secretary Becerra:

As members of the Congressional Dads Caucus and the Black Maternal Health Caucus, we write to highlight the need for data from and about fathers to inform and improve public health efforts related to maternal and infant health. As the Department continues the process of developing its budget recommendations for fiscal year 2025, we request that you include \$5 million to support a pilot program across six states for measuring the public health of fathers over a three-year period. This program is an important, logical, and needed outgrowth of the existing Pregnancy Risk Assessment Monitoring System (PRAMS) at the Centers for Disease Control and Prevention (CDC) and builds on a successful CDC pilot program.

The Pregnancy Risk Assessment Monitoring System (PRAMS) was developed in 1987 and is conducted as a partnership between the CDC's Division of Reproductive Health and state and local public health agencies, covering 81% of all live births in the United States. PRAMS is the only public health survey system that provides state-specific, population-based data from women about their pregnancy and the months after birth, with 50 participating jurisdictions. This data is critical to inform efforts to reduce infant and maternal morbidity and mortality through interventions before, during, and shortly after pregnancy.

Though PRAMS collects detailed data on maternal and infant health, minimal data is collected about fathers and their roles in their families' lives and no public health data is collected directly from fathers. To address this gap, the CDC's Division of Reproductive Health solicited assistance from Lurie Children's Hospital of Chicago to develop and pilot a similar survey of new fathers, building on the decades of successful public health monitoring through PRAMS.

The "PRAMS for Dads" pilot was developed with hospital researchers and operational support from the Georgia Department of Public Health (GDPH). The surveys include key public health questions (among others) related to a new father's mental and physical health, interaction with health care providers, employment status, substance use disorder issues, reproductive health,

involvement with their new child, relationship with their partner, and attitudes toward key child metrics such as breast feeding and safe sleep. Actionable data from the Georgia pilot demonstrated the utility of this study to informing public health efforts. For example, the PRAMS for Dads data showed that while 99% of fathers put their baby to bed, only 16% employed all 3 CDC-recommended safe sleep behaviors (on back, approved sleep surface, no soft bedding). At the same time, the data suggested mothers were much more likely to begin and continue breastfeeding by two months if fathers were supportive. Collectively, this previously unavailable public health data lays a foundation to improve maternal, infant, and family health outcomes

Unfortunately, due to a lack of resources, public health surveying of fathers has not been supported by CDC since 2019. Since then, five states (Georgia, Massachusetts, Michigan, North Dakota, and Ohio) have implemented a PRAMS for Dads survey, utilizing lessons learned, methodology, and surveys developed during the Georgia pilot. The success of the Georgia pilot and ongoing commitment from multiple states to continue this work shows the importance of measuring the public health of fathers to improving maternal morbidity and mortality as well as the welfare of their children.

We respectfully request your continued support for this vital public health data collection through the inclusion of \$5 million in funds in your FY 25 budget request, in addition to ongoing robust funding for existing maternal health programs. These funds will allow for a modest pilot program that could be conducted in six additional states over a three-year period. We appreciate your consideration of this request and thank you for your ongoing support for the health of mothers, fathers, and children.

Sincerely,

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