



A budget for everyone Fiscal Years 2022-23

Leverage our resources for recovery

Getting through the pandemic

The first order of business for the 2022-23 budget is helping Ohioans through the deepest crisis in a hundred years: the pandemic recession. Ohio's fragmented system of public health has not provided uniform services to combat COVID-19. The system is underfunded by the state and dependent on local property tax levies, which vary widely depending on local wealth. The response to the pandemic has been uneven and inadequate in some ways and some places. The recession hit Ohio's economy swiftly and harshly: Over 2 million Ohioans have filed for unemployment since the pandemic began in March,¹ more than in the last four years combined. Many have been out of work for months and are struggling to put food on the table, pay the rent, and afford the basics to support their families. Others are front line, "essential" workers who make low wages and struggle to afford child care. Illness and loss of income have disproportionately harmed Ohioans of color. In this section, we highlight investments needed to control the pandemic and limit suffering in the 2022-23 budget period.

Build a strong foundation of community health

Recommendation: Additional \$93 million for local public health

Agency: Ohio Department of Health and local health departments

Line item 440413

Public health agencies quietly protect us by tracking infections and monitoring restaurant kitchens. They keep our water clean by monitoring private water systems (usually wells) and household sewage treatment systems. Public health agencies coordinate community health improvement plans, which ensure policies and systems are in place to prevent and control illness and injury. They are behind the scenes until disaster hits.

In 2020, disaster hit. As the pandemic sent thousands to the hospital last spring, Gov. DeWine decried Ohio's fragmented public health system and outdated information technology that slowed reporting of COVID cases and coordination of response. He said Ohio lawmakers have failed to properly fund public health for far too long.² Public health is underfunded nationally but especially in Ohio, which ranks 4th lowest in the nation in state support of public health.³

In 2019 the Ohio Partnership for Public Health evaluated the funding and needs of Ohio’s public health system, made up of 113 local public health departments. The partnership found the system needs \$93 million to ensure basic capacity and capability across the state.⁴ The state should take responsibility for funding that gap.

Local health departments are working to provide a comprehensive response to the pandemic, including public health investigation, community communication and education and enforcement of the Director of Health’s orders. They will now provide mass vaccinations. The federal government should take full responsibility for providing enough funding and vaccine to Ohio and other states to successfully vaccinate all people.

Ensure everyone gets enough to eat

Recommendation: \$45 million for food banks

Agency: Ohio Department of Job and Family Services

Line items 600620, 600630, 600689 and federal pandemic aid funds

No Ohioan or Ohio family should have to worry about where their next meal comes from. Today, nearly one in five Ohioans struggle with hunger and over one in four children go to bed hungry.⁵ Need has been soaring; enrollment in SNAP (the federal food assistance program) rose in Ohio by 14% between March and August and data collected by the Pulse Survey of the U.S. Census in December, 2020 found 14% of Ohioans had difficulty getting enough to eat.⁶ Ohio is tied for the rank of 10th highest among the states in terms of household food insecurity.⁷

Ohio’s food banks need at least \$45 million per year to deliver hunger and poverty relief to over 2 million Ohioans. This funding will help build capacity for local front-line hunger relief organizations that have lost volunteer services due to the pandemic. It will give food banks the means to make emergency purchases for families in need, including food, personal care items and household cleaning supplies. With the appropriate support, the food bank network will be able meet the growing need as the pandemic recession drags on.

Prevent homelessness

Recommendation: \$25 million for TANF-funded “Housing Now for Homeless Families”; maintenance of existing youth homeless program

Agencies: Ohio Department of Job and Family Services, Department of Health

Line items: 600689, 600410, 440672 and federal pandemic aid funds

Everyone deserves health, security and a roof over their head. The pandemic recession has worsened housing insecurity: 467,000 Ohioans (19% of renters) were behind on rent and therefore in danger of eviction in December, 2020.⁸ State lawmakers must ensure the upcoming budget provides assistance for emergency rental, mortgage and utility payments to help families remain in their own homes with running water, heat and functioning electricity. The DeWine administration should allocate \$25 million annually from the surplus in Ohio’s federal Temporary Assistance for Needy Families (TANF) program for the “Housing Now for Homeless Families” program to quickly rehouse homeless children and families and provide much-needed stability. It should also protect the \$2.5 million annual appropriation within the Ohio Department of Health to prevent homelessness among youth and pregnant women.

Support Ohioans through the pandemic and recession

Recommendation: \$50 million from TANF for one-time emergency assistance

Agency: Ohio Department of Job and Family Services

Line items: 600689, 600410 and federal pandemic aid funds

The COVID-19 pandemic is very harmful to Black and brown Ohioans and families experiencing poverty. A third of adults in Ohio (33%) reported that they had difficulty covering household expenses in December, 2020.⁹ State leaders need to ensure families with low or no income can put food on the table, pay the rent, and get necessities like toilet paper and medication.¹⁰ The DeWine administration can allocate \$50 million for one-time emergency assistance through federal funds provided to the state through the Ohio Department of Job and Family Services’ TANF program. The TANF local Prevention, Retention, and Contingency Programs could provide one-time payments of \$500 to 100,000 families with immediate, emergency needs and move money directly into Ohio’s economy.

Protect all communities through vaccine education & outreach

Recommendation: Fund and deliver culturally appropriate education and outreach to encourage more Ohioans to take the COVID-19 vaccine

Agencies: Ohio Departments of Health, Medicaid, Mental Health and Addiction services and others providing health and human services; Ohio Bureau of Workers Compensation.

Line items: Federal pandemic aid funds

Cincinnati, Cleveland and Columbus — along with many other locations in the United States — failed to meet demand for COVID testing in communities of color and/or made people from those communities travel longer distances than other population groups to get tested.¹¹ Access to vaccines must be better. Federal relief funds must be used to correct this inequity and improve access to both testing and vaccine sites in communities of color across Ohio.

Many people are deeply distrustful of the vaccine. Hesitation to take vaccines is not restricted to one community — only 49% of white people took the flu vaccine in the 2018-19 flu season (39% of Black people, 38% of Latino people and 37% of Native Americans got vaccinated.)¹² State policymakers and health care providers should embrace the moment to improve the understanding and participation of all Ohioans in all vaccinations, to improve public health for all.

Distrust of medical professionals in the Black community is rooted in a history of abuse and exploitation as well as discriminatory practices that still cause sub-standard health care for people of color.¹³ Studies show the way to counter this is through full transparency. The Ohio Department of Health, in coordination with providers, should provide to all groups a full and complete explanation of the careful science of vaccines. It should also address specific cultural hesitations, including acknowledgement of the harm past medical practices have done to people of color and corrective action taken by providers.¹⁴ The DeWine administration could use federal relief funds for this outreach and education effort to boost trust in the COVID vaccines.

Notes

1 “Ohio Jobless Claims for Sunday, December 6, through Saturday, December 12, 2020,” e-mailed communication from the Ohio Department of Job and Family Services, December 17, 2020.

2 Filby, Max, “Ohio spends less per capita on public health than nearly every other state,” Columbus Dispatch, April 2, 2020 at <https://bit.ly/2LuigXV>.

3 Bishoff, Laura A., “Ohio near the bottom for public health spending per person. Should we spend more?” Dayton Daily News, April 12, 2020 at <https://bit.ly/2JWBQr5>.

4 Singh, Simone, PhD, and Jonathon P. Leider, PhD, “Costing The Foundational Public Health Services In Ohio Final Report,” Prepared for the Ohio Public Health Partnership, October 31, 2019 at <https://bit.ly/3gHQRJl>.

5 “The Impact of Coronavirus on Food Insecurity,” State Dashboard, based on 2020 Projected Overall Food Insecurity Rate and 2020 Projected Child Food Insecurity Rate, Feeding America, accessed on December 2, 2020, <https://bit.ly/39COGY0>.

6 “Tracking the COVID-19 Recession’s Effects on Food, Housing, and Employment Hardships,” Center on Budget and Policy Priorities, January 8, 2021 at <https://bit.ly/39iKQ2n>. Note: ‘SNAP’ stands for “Supplemental Nutrition Assistance Program,” the federal program of food assistance administered by the U.S. Department of Agriculture.

7 The Impact of COVID 19 on Hunger, Ohio Association of Foodbanks at <https://ohiofoodbanks.org/coronavirus/>

8 “Tracking the COVID-19 Recession’s Effects on Food, Housing, and Employment Hardships,” Op. Cit.; see also, “Analysis of Current and Expected Rental Shortfall and Potential Evictions in the U.S.,” prepared for the National Council of State Housing Agencies by research firm Stout Risius Ross, LLC, September 28, 2020, <https://bit.ly/3gfT4LR>.

9 “Tracking the COVID-19 Recession’s Effects on Food, Housing, and Employment Hardships,” Op. Cit.

10 Petrik, Will, “Now is the time to stabilize families in crisis,” Policy Matters Ohio, April 2020, <https://bit.ly/2W3Mr5X>.

11 Vann, Matthew, Soo Rin Kim, and Laura Bronner, “White neighborhoods have more access to COVID-19 testing sites: The disease is hitting Black and Latino communities hardest,” Five Thirty Eight, July 22, 2020 at <https://abcn.ws/2WBzEYN>. See also Rader, Benjamin, MPH, Christina M Astley, MD, ScD, Karla Therese L Sy, MS, Kara Sewalk, MPH, Yulin Hswen, ScD, MPH, John S Brownstein, PhD, PHIL Moritz, PhD and U. G. Kraemer, “Geographic access to United States SARS-CoV-2 testing sites highlights health care disparities and may bias transmission estimates,” Journal of Travel Medicine, Volume 27, Issue 7, October 2020 at <https://doi.org/10.1093/jtm/taaa076>.

12 Artiga, Samantha, Josh Michaud, Jennifer Kates, and Kendal Orgera, “Racial Disparities in Flu Vaccination: Implications for COVID-19 Vaccination Efforts,” Kaiser Family Foundation, September 15, 2020 at <https://bit.ly/3pgju3B>.

13 Royles, Dan, “Years of medical abuse make Black Americans less likely to trust the coronavirus vaccine, Washington Post, December 15 2020 at <https://wapo.st/3nFW1lr>; see also McPherson, Sterling, Weintraub Austin, Erica and Borah, Porismita, “Why scientists and public health officials need to address vaccine mistrust instead of dismissing it,” The Conversation at <https://bit.ly/3h82Xvy>

14 Systemic Racism & Health Care, COVID & Treatment, NIHCM Foundation at <https://bit.ly/2Ww52bk>; See also, United States Department of Health and Human Services, “HHS Initiatives to Address the Disparate Impact of COVID-19 on African Americans and Other Racial and Ethnic Minorities” at <https://bit.ly/2J7ylha>