



# Press Release

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## COVID-19 is hitting communities of color hardest Community based measures can help explain why

Tomorrow, the Minority Health Strike Force assembled by Gov. DeWine will release recommendations for addressing the outsized share of COVID-19 cases in Ohio's Black and Brown communities. Ahead of that announcement, Jasmine Ayres from Policy Matters Ohio releases the following statement and a set of recommendations to the task force:

"COVID-19 has shown Ohioans that everyone's health and wellbeing is connected. Our leaders must ensure that each of us, no matter where we live or what we look like, have what we need to stay healthy and get the care we need if we get sick.

"The COVID-19 pandemic is shining a light on what has always been true: Public policy choices, for years, have denied Black and Brown Ohioans the care and treatment we all deserve. Black Ohioans make up 14.3% of the state population. They represent about 20% of all positive COVID-19 patients despite the fact that Black Ohioans represent only 5% of those tested in the state. Ohio's leaders must address the root causes of this disparity and enact policies to correct course.

"This crisis exacerbates existing roadblocks to health created by policies that reinforce poverty, segregation and racism. In the short run, Ohioans must demand our leaders forcefully acknowledge and address the coronavirus's disproportionate health and economic impacts on people of color. They also must begin the long-run work of permanently knocking down the racial barriers built into our health, social, transportation and economic systems – barriers that existed long before COVID-19.

"Gov. Mike DeWine's formation of the Minority Health Strike Force is an encouraging start. The recommendations they release tomorrow will show how serious our state leaders are about tackling the root causes behind these disparities."

### Policy Matters made the following short-term recommendations to the taskforce:

- **Prioritize funding to expand testing in low-income communities of color.** Ohio should take a page from other communities (Charlotte, North Carolina and Baltimore, Maryland) and utilize mobile clinics that serve neighborhoods with testing and fund community-based testing sites with trusted community partners. Low-income communities of color are often health care deserts and lack health facilities. This is compounded with historical health injustices that have fostered suspicion of the health care system. Working with respected community partners to bring testing directly into communities will facilitate increased COVID-19 testing in a way that recognizes existing transportation barriers.
- **Provide public health and safety supplies and resources to communities of color.** Use trusted community partners to distribute masks, hand sanitizer, home cleaning and personal hygiene supplies in low-income communities of color. Local businesses, faith, and other community-based organizations are already hubs for activities in communities of color and are best equipped to distribute much needed supplies and disseminate factual health information.

**Recommendations to address root causes of the disparities exposed by the COVID-19 pandemic:**

- **Surge resources for public transit in urban areas.** Additional funding to increase the capacity of our public transit systems will help facilitate a physically distanced ride to work in neighborhoods where people rely on public transit. [Ohio's public transit is woefully underfunded by state lawmakers.](#)
- **Make health equity assessments a standard part of Ohio's policymaking process.** Good policies can promote better health, while ill-considered policies can create barriers to good health for people of color. A health equity impact analysis measures the effect of proposed public policies and programs on health, paying particularly close attention to income levels and race. These analyses can help advocates and lawmakers gain a better understanding of the holistic impact of programs, from education to public transit. By understanding the health impacts of economic policies, we can proactively and deliberately develop a policy agenda that counteracts barriers to health from poverty and race.