



Transit

Testimony on House Bill 74 before Senate Transportation Committee

Amanda K. Woodrum

Chairwoman Kunze, Ranking member Antonio, members of the committee, thank you for the opportunity to submit testimony. I am Amanda Woodrum, Senior Researcher for Policy Matters Ohio, a nonprofit, nonpartisan research institute that is building a more sustainable, equitable, inclusive and vibrant Ohio. Policy Matters Ohio is also a partner to MOVE Ohio,¹ a diverse, state-wide coalition of advocates who represent everyday transportation users. We envision a well-funded multi-modal transportation network in Ohio that prioritizes a complete network of affordable and accessible transportation options, including public transit, passenger and freight rail, and walkable, bikeable streets.

MORE TRANSPORTATION OPTIONS WILL MAKE OHIO HEALTHIER

The freedom to get where we need to go, safely, is a critical part of achieving health and well-being. Streets designed to be safe for people who walk and bike, and for those with disabilities, can reduce car-related serious injuries and deaths. They can also reduce obesity rates by promoting physical activity and cut transportation-related air pollutants that cause asthma in children.² Safe, affordable and reliable public transit makes it easier for working people to get to work, school, the doctor's office, grocery store and other important facets of life. For too long, Ohio policymakers have directed public funding to roads and highways at expense of other modes of transportation.³ As a result, Ohio's transportation system promotes cars while discouraging walking, biking, and public transit. This has harmed our health, particularly the health of Ohioans with low incomes who cannot afford to own and operate a vehicle or are unable to drive a car. This not only reduces quality of life for the people directly affected there are also health and economic costs.⁴

RECOMMENDATIONS

The Ohio General Assembly can provide healthier transportation options for Ohioans while supporting the economy by increasing funding for transit and rail to \$150 million per year for the 2022-23 state budget, as recommended by the Ohio Department of Transportation's Transit Needs Study.⁵ Lawmakers should establish a multi-modal transportation fund within the state's transportation budget and fund it with a dedicated revenue source.

¹ <https://www.moveohio.io/home>

² Health Impact Project, Transportation Access and Quality Affect Health (2018) at <https://bit.ly/2RaYVFE>.

³ Urban Design 4 Health, Inc. & APHA, The Hidden Health Costs of Transportation (2010) at <https://bit.ly/38qqOrN>

⁴ See footnote 2, above.

⁵ Ohio Statewide Transit Needs Study (2015)

OHIO NEEDS A MORE BALANCED TRANSPORTATION BUDGET

Each year, state policymakers direct billions of public dollars to our transportation system, nearly all to roads and highways. We implore this committee to start considering the health impacts of the way the administration and General Assembly choose to allocate these public expenditures. Going forward, it is imperative that the General Assembly start prioritizing active transportation, such as walking and biking —versus passive modes of transportation like driving — with transportation infrastructure that promotes the health of residents. States with healthier built environments have better health outcomes, including fewer motor vehicle injuries and fatalities and lower rates of obesity.⁶ Historically, the State of Ohio routinely dedicates less than 2% of Ohio’s multi-billion transportation budget for public transportation. We can and should do better. State policy should more closely mirror federal policy: 20% of all transportation dollars should go toward healthy transportation choices such as public transit, rail, electric vehicle infrastructure and safe, healthy routes to school and work. The chart below details the share of funding for public transit between 2013 and 2023.

Transit accounts for less than 2% of Ohio’s overall transportation budget			
Federal policymakers allocate 20% of transportation revenues for public transit			
Budget Year	State appropriations for public transit (in millions)	Ohio transportation budget (in millions)	% of overall budget spent on public transit
House 2023	\$56.0**	4,029.0	1.4%
House 2022	\$56.0**	\$4,309.0	1.3%
2021*	\$70.0	\$4,120.8	1.7%
2020*	\$70.0	\$4,266.7	1.6%
2019	\$39.5	\$4,235.0	0.9%
2018	\$40.3	\$3,763.8	1.1%
2017	\$30.3	\$3,920.4	0.8%
2016	\$30.3	\$4,016.4	0.8%
2015	\$30.3	\$3,897.9	0.8%
2014	\$27.3	\$3,651.4	0.7%
2013	\$27.3	\$3,653.6	0.7%

Source: Policy Matters Ohio, based on data from the Ohio Legislative Service Commission

*While the General Assembly appropriated \$70 million in GRF funds for public transit in FY 2020 and FY 2021, the Ohio Dept. of Transportation did not fully spend to appropriated levels despite transit agencies being in crisis during the

pandemic. There are no clear answers as to why that is the case. ** Recent accounts in the media have suggested a larger number (\$193 million) that includes numbers not included here. These are federal pass-through funds for rural transit where the state maintains no discretion, but simply serves as a vehicle for distribution of those federal funds.

⁶ Center on Society and Health, VCU & Urban Institute, The Health of the States: How U.S. States Compare in Health Status and the Factors that Shape Health (October 2016).

Please see the table below for a more detailed explanation of how increased state spending on public transit can make Ohio a healthier, prosperous state. Thank you for your time and consideration.

More transportation options would make Ohioans healthier			
Our increasingly car-centric transportation system is bad for health			
Factor	Impact	How Hurts Health	Solution
Driving more increases motor vehicle incidents.	Medical costs, lost productivity, travel delay, insurance and legal costs	One of leading causes of serious injuries and fatalities	Promote complete streets that promote safer modes of transportation.
Promotes passive versus active transportation.	Lack of physical activity	Higher levels of obesity, diabetes, heart disease.	Invest in healthy and safe routes to school and work.
Traffic-related air pollution. Worse in predominantly Black, high-traffic, neighborhoods.	Medical costs related to asthma, including ER visits, as well as missed school and workdays.	Linked to asthma. Car exhaust penetrates lung tissue, gets in bloodstream. Children & older adults more vulnerable.	Reduce vehicles on road. Increase use of electric vehicles and buses. Invest in tree canopies and other natural barriers.
Barriers to health and opportunity.	More than 8% of Ohio households do not have a car.	Transportation barriers to health care, pharmacies, healthy foods and job-related opportunities.	Invest to create a robust system of public transportation.
<i>Source: Policy Matters Ohio, based on U.S. Dept. of Transportation, National Highway Traffic Safety Administration, The Economic and Societal Impact of Motor Vehicle Crashes (Rev. May 2015).</i>			