



House Finance Subcommittee on Health & Human Services
Interested Party Testimony on Senate Bill 332

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Chairman Sprague, members of the House Finance Subcommittee on Health & Human Services, thank you for the opportunity to share our perspective on Senate Bill 332.

I'm the executive director of the Coalition on Homelessness and Housing in Ohio, an organization that works with more than 600 local organizations and partners throughout the state to reduce homelessness and expand access to safe, decent, fair, affordable housing.

Like you, we are concerned about Ohio's shamefully high rate of infant mortality and we're pleased to see the legislature taking action on this issue. As housing advocates, we share the sponsors' goal of alleviating housing instability, particularly for pregnant women who are at high risk of infant mortality.

We advocated for replacing some of the originally proposed housing-related provisions to make the bill more effective. The Senate adopted our suggestions, however some of the original language was inadvertently left in place.

We recommended the following amendments that were included in the Senate version:

- Language authorizing the Ohio Housing Finance Agency to establish a rental assistance pilot program for extremely low-income pregnant women and new mothers with an evaluation component will enable the state to determine its effectiveness.
- Members of the Commission on Infant Mortality will work with the Ohio Housing and Homelessness Collaborative established by Gov. Kasich in 2012 to develop a rental assistance program for particularly vulnerable low-income households that include pregnant women or new mothers.
- A requirement for OHFA to include infant mortality as a priority housing need in the agency's annual planning process to address the state's housing needs in order to inform OHFA's decision-making.

While these positive changes were included in the Senate version of the bill, so was some of the original language that we believe could have unintended consequences for the state or for local agencies that provide housing and homeless services.

For example, the bill contains language directing OHFA to “include pregnancy as a priority in its housing assistance programs and local emergency shelter programs” and to determine whether its programs for middle- and low-income home buyers should be recalibrated.

We believe this provision will not impact Ohio’s infant mortality crisis for two reasons. First, OHFA has no purview over emergency shelter programs. Second, most women with the highest risk of infant mortality are extremely low-income and are simply struggling to find rental housing they can afford. They are in no position to take advantage of OHFA’s homebuyer programs, even if these programs were substantially changed.

Another requirement for homeless shelter staff to question women about their pregnancy status and report this information to the state is problematic. Emergency shelters already track certain limited data through the federally mandated Homeless Management Information System (HMIS), including information regarding number of children in a family to determine appropriate housing placement.

Another requirement for pregnant women without children to be offered placement in family shelters could inadvertently create a situation where someone who’s pregnant actually displaces a family with children from family shelters, many of which already lack capacity.

Rather than specifying how emergency shelter providers place their clients, a better approach would be to focus on rapid rehousing for homeless pregnant women to ensure that their babies are born in secure housing.

For these reasons we respectfully request the House remove lines 26-49 from the Senate-passed version of Substitute Senate Bill 332. Without these provisions, and with the positive improvements the Senate already included, we believe this legislation will make a positive impact on Ohio’s high rate of infant mortality.

Thank you. I would be happy to answer any questions you may have.