

Thank you Chairman Burke, Vice Chair Huffman, Ranking Member Antonio, and members of the Ohio Senate Health, Human Services and Medicaid Committee. My name is Jack Hedberg, and I'm here to testify in support of Senate Concurrent Resolution 14 (SCR 14) declaring that racism is a public health crisis.

I'm an MD/PhD student at The Ohio State University College of Medicine – a program intended to produce physician scientists who are able to translate between scientific investigation and the health of patients. As a scientist, I am astounded by the magnitude of evidence and concrete scientific demonstration of the public health crisis that is racism. I could not sit back and not speak on this important issue, acting as a voice for my current and future patients.

While nearly every disease shows signs of the racism plaguing our society, today I am going to focus on one example – patients with HIV. The Ohio Department of Health's HIV Surveillance Annual Report in 2018 provides numerous data implicating racism as a public health crisis, with devastating manifestations for patients at risk for and diagnosed with HIV.¹ Although Black individuals represented 12.6 percent of Ohio's population in 2018, 47 percent of new diagnoses of HIV in Ohio that year were in Black patients. This equates to a rate of new HIV infections in Black individuals nearly 7 times greater than the rate in White individuals, an astounding health crisis on its own

In addition to disparities in the rate of new diagnoses, data regarding the total prevalence of individuals living with HIV in Ohio also demonstrate the impact of racism. The total rate of Black males with HIV in Ohio is 5 times that of White males. For Black females, it is even starker at 11 times higher than the rate for White females.

When HIV initially emerged as a disease, it was a death sentence. Now, if a patient has access to adequate support and treatment, one can live a long life and manage it as a chronic disease. Unfortunately, the rate of deaths due to HIV show concrete disparities in access to treatment. In 2018, 44 percent of people with HIV who died were Black. This is a clear manifestation of one of the many, many deadly manifestations that occur as horrific endpoints in the public health crisis of racism.

How can we know from data like this – and the data that my colleagues and fellow citizens will present – that racism is truly the cause of what we see? These data clearly demonstrate enormous differences in the health and safety of Black vs. White patients regarding HIV care in Ohio. To start, we know that race is a social construction and not biological, we know as a fact that differences observed when examining data sorted by race stem from society. Although these data do not identify one specific process

causing worse outcomes for Black patients, they unequivocally show that all of the interactions, variables, processes, and patterns people experience in society, when summed together, harmfully discriminate against Black people and cost lives. This is racism. This beckons much more attention, study, and effort for us as a society and state.

Please hear the cries that these data are making: Racism is a catastrophe in Ohio. We need more resources, more recognition, more work being done to address the public health crisis of racism in Ohio. Acknowledging its existence is a critical first step. To not acknowledge this public health crisis is to fall silent and be detached from the oppression and suffering of countless people. This is not a partisan issue. At its very core, acknowledging what widespread health data in Ohio are saying about racism is recognizing what many objective data demonstrate. Beyond this, it is a moral obligation and a patriotic duty to care about the experiences and health of all people, and to manifest that care through recognizing when specific groups of people are being harmed.

In closing I'd like to thank the committee for their time and for being brave enough to move forward on this critical issue. I would also like to thank Sen. Sandra Williams and Sen. Hearcel Craig for sponsoring this resolution. Thank you.

With respect,

Jack Hedberg, B.S.
MD/PhD Trainee
The Ohio State University College of Medicine

References

1. "HIV Surveillance Annual Report." Ohio Department of Health (2018)
<https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/hiv-aids-surveillance-program/resources/ohio-hiv-surveillance-annual-report>