



**House Bill 110
Interested Party Testimony**

Gary Dougherty
Director, State Government Affairs
American Diabetes Association®
Senate Health Committee
April 28, 2021

Chairman Huffman and Members of the Senate Health Committee:

My name is Gary Dougherty and I am the Director of State Government Affairs for the American Diabetes Association® (ADA), the nation's leading voluntary health organization fighting to bend the curve on the diabetes epidemic. On behalf of the nearly 4.3 million Ohioans with or at risk for diabetes, I want to share with you our position on a number of budget items.

Healthy Food Financing Initiative (HFFI)

An amendment is expected to be drafted to restore funding to GRF appropriation item 600546 (Healthy Food Financing Initiative) in the amount of \$250,000 in both FY 2022 and FY 2023. Created in 2015 and funded with \$2.5 million over six fiscal years to date, HFFI has generated as much as a 5:1 match in private funds to finance several projects to increase access to healthy foods in underserved areas throughout Ohio.

According to Feeding America's annual report¹ on local food insecurity, Ohio ranks 40th among the states with a 13.9% food insecurity rate. This represents the percentage of the population that experienced limited or uncertain access to adequate food at some point during the year.

COVID-19 has led many more Ohioans to become newly food insecure resulting in our state's 2020 projected food insecurity rate to increase dramatically to 18.1%.²

These people have limited access to nutritious foods - like that available at full-service grocery stores, farmers markets, or smaller retailers. Individuals and families living in these areas are often left without the ability or the means to purchase nutritious foods to prepare healthy meals, due to factors such as lack of transportation and high prices.

¹ <https://map.feedingamerica.org/>

² https://www.feedingamerica.org/sites/default/files/2020-10/Brief_Local%20Impact_10.2020_0.pdf



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As you know, a healthy diet can help decrease risk for obesity and chronic diseases like diabetes. According to the ADA's Statement on Socioecological Determinants of Diabetes and Prediabetes, those with severe food insecurity have an approximately twofold risk of diabetes compared with those without food insecurity.³

A continued investment in the Healthy Food Financing Initiative will build on the program's track record of success – 41 projects in 18 counties serving more than 416,000 people.

To allow more Ohioans to benefit from access to fresh and healthy foods and experience better health outcomes as a result, the American Diabetes Association® urges your support for an appropriation of at least \$250,000 in each fiscal year for the Healthy Food Financing Initiative.

Produce Perks

Every community in the state is home to families who struggle with food insecurity, including rural and suburban communities. One economic setback can be enough to plunge a household into food insecurity.

Whereas several states have enacted legislation to increase the purchasing power of their residents with limited access to fresh fruits and vegetables, Ohio is home to a model program administered by Produce Perks Midwest.

The American Diabetes Association® is proud to be part of a coalition urging support for an appropriation of \$500,000 in each fiscal year within the Department of Job and Family Services' TANF Block Grant. This appropriation will enable Produce Perks to expand its highly successful nutrition incentive program to double the purchasing power of SNAP and P-EBT participants. The dollar-for-dollar match allows these folks to double the value of their fresh and healthy food obtained from Ohio farmers, farm markets, and small business retailers.

A state investment of \$250,000 in each year of the previous budget generated more than \$2.2 million in healthy food purchases by SNAP, P-EBT, and TANF households in 2020. This performance justifies the request for an increased appropriation of \$500,000 in each year to continue, expand, and further develop the Produce Perks program to serve even more Ohioans in need of fresh and healthy food. Furthermore, these dollars are going directly back into local economies.

³ <http://care.diabetesjournals.org/content/diacare/36/8/2430.full.pdf>



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Produce Prescription Program

The American Diabetes Association® also supports an appropriation request of \$350,000 in each fiscal year from the Infant Vitality line item (440474) to be provided to Produce Perks Midwest for the Produce Prescription Program.

This is to build upon a successful program, first funded through the FY 2020-21 budget, whereby the Ohio Department of Health partnered with Produce Perks Midwest to implement a program to increase affordable access to healthy food for new and expecting mothers in order to improve health outcomes for both mother and babies.

Patients, after being recruited by a healthcare provider to participate in the program, visit their provider on a monthly basis to obtain nutrition education and receive prescriptions for fruits and vegetables at participating Produce Perks sites. Thus far, 95% of the babies born within the program reached their optimal birth goals (e.g. gestational age, weight, etc.).

The ADA encourages eating well as an important way to prevent and manage type 2 diabetes. By increasing access to healthy fruits and vegetables, the Produce Prescription Program will continue to be of tremendous benefit to those new and expectant mothers who may have limited access to fresh, healthy, and nutritious foods.

Water Bottle Filling Stations

The current, House-passed version of the budget contains language that complements the water bottle filling station policy enacted last session through SB 259. It requires that water bottle filling stations in school buildings must be in compliance with the Americans with Disabilities Act and clarifies that a water bottle filling station may be integrated into a drinking fountain as a combination unit.

Thus, each newly-constructed building or major renovation would be required to have at least one water bottle filling station or combination unit on each floor and each wing of each building, at least one for every 100 students, and at least one in or near each cafeteria, gymnasium, outdoor recreation space, and other high-traffic areas.

Furthermore, within certain parameters, students, teachers, and staff would be permitted to use and carry water bottles on the school grounds.

As became clear during the COVID-19 pandemic, water bottle filling stations are more sanitary than traditional drinking fountains and allow students to keep hydrated without having to purchase individual bottles of water. The inclusion of these stations will be a much-needed upgrade for schools in the post-pandemic era.

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Thank you for your careful consideration of these important budget provisions that would have a positive impact on many of your constituents who have or are at risk for diabetes. Because I am unable to testify in person, please direct any questions you might have to me at gdougherty@diabetes.org and I will do my best to answer them for you.

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