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 Youn Ju, or Chris, Shin and I am here to testify in support of Senate Concurrent Resolution 14 (SCR-14) declaring that racism is a public health crisis.

I am a third year medical student at The Ohio State University College of Medicine. Prior to this, I graduated with my Bachelor's degree from OSU, and from high school in the Dublin area. As a long time resident of central Ohio, I chose to continue my education in Columbus for the many ways I am able to contribute to the care of patients of diverse backgrounds. Through my experiences as a student and as a former Referrals Coordinator for the Columbus Free Clinic, I have seen first hand how racial disparities impact access to care and widen existing health disparities.

The Columbus Free Clinic provides care free of charge to any adult that walks through its doors - regardless of race, insurance status, residency, socioeconomic status, or religion. The clinic runs once per week and is staffed by volunteer students from the OSU College of Medicine, OSU College of Pharmacy, OSU College of Social Work, and Ohio Dominican University Physician Assistant Program. These students are overseen by social workers, nurses, pharmacists, residents, and practicing physicians from all around Central Ohio, including OSU and OhioHealth. We see patients for a variety of issues, ranging from primary care concerns, such as maintaining their blood pressure or blood sugar, to acute symptoms, including the term of 463 patient encounters with 265 individual patients. Of these patients, 24% were Black and 26% were white, disproportionate to the 12.6% of the population of the state of Ohio that are black. In contrast, 81.9% of the population of the state of Ohio is reported to be white (1).

At CFC, we accept and are happy to see any and all patients. However, most often our patients are those without insurance. Some do not have stable shelter, or phone or internet access, making it even harder to make appointments, follow up with providers, refill medications, and so on. In addition to this barrier, patients are sometimes referred for more specialized care, most often to OSU Wexner Medical Center. This often requires fees that we, as a clinic, cannot cover, and that patients, who are already seeking free care, are unable to pay for. Although there is a financial aid system, the process is lengthy, daunting, confusing, and at the end of the day often does not cover the full costs of the visit.

What this data indicates is that disproportionately, Black citizens of Ohio are having greater difficulty accessing care and finding primary or acute care resources, leading to worse health outcomes and possibly more serious complications in the future. Even when they are able to seek care, they have increasing obstacles to maintaining contact with their providers or continue onto the next level of service, among other difficulties. While this data does not directly demonstrate

the mechanism that is causing greater difficulties for Black people seeking health care, it clearly highlights the difference. And that difference is racism - a systematic, societal pattern that is hurting Black people. Racism is keeping Black people from securing a healthcare home that can insure positive health outcomes, follow up, and trust with the medical community. Racism is continuing to exacerbate the wide health disparities between Black and White individuals in Ohio. Racism is a public health crisis in Ohio to which we must stop turning a blind eye.

I would 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.

References:

1. "Quick Facts: Ohio." United States Census Bureau (2019) https://www.census.gov/quickfacts/fact/table/OH/PST045219