

SARA GLEASON - SB 22 PROPONENT TESTIMONY
HOUSE STATE AND LOCAL GOVERNMENT COMMITTEE

March 8, 2021

Chairman Wiggam, Vice Chair John, Ranking Member Kelly, and honorable members of the State and Local Government Committee,

My name is Sara Gleason. I am a resident and constituent of the great state of Ohio, a college educated social scientist, a business owner, mother and military spouse, and **I am writing to share my support for SB 22.**

Thank you for the opportunity to provide written testimony regarding SB 22.

As a family that has lived in support of this nation through military service for over twenty years, I know what it means to sacrifice for our country and for others. I have seen too many friends make the ultimate sacrifice for freedom and have seen too many folded flags handed to friends to ever take this lightly. And I think it's because of this that I feel so moved to speak truth to power in the face of crisis right now.

For nearly a year now, Ohioans have been asked to sacrifice for the greater good and for their neighbors. And we have done so, often to our own detriment. We have been asked to forgo connection. We have been asked to give up activities. We have been asked to distance and we have been asked to isolate. We have been asked to give up the ability to advocate for loved ones in hospital and care facilities. We have been asked to further isolate our most vulnerable and watch their health decline with every moment spent apart from those who love them. We have been asked to give up the ability to gather for in-person support groups for our own mental health and recoveries. We have been asked to settle for inferior remote learning modalities for our children. We have been asked not to worship together in fellowship as freely as we would like. We have been asked to cover our faces at all times when around other humans. Essentially all Ohioans, even when healthy, have been asked to behave as though we are unwell and to treat all others as though they are unwell too.

We are weary of arbitrary guidance and decisions from an executive branch bolstered by unelected officials. What has been decided in the name of public health has all too often disregarded the voices of the very public it claims to protect and any voices of science and health that run contrary to their narrative. These unilateral decisions have continued unabated and unchallenged despite new data and science that may call for adjustments to the approach or that may ameliorate the negative impacts of measures already taken.

Over these many months, what has become abundantly clear is that while the infection itself is serious, the decisions made in the name of “safety” and “emergency” are also contributing to the un-wellness and un-safety of Ohioans.

Last spring, decisions made in the name of safety inhibited Ohioans' access and right to a fair and free election. Over time, decisions made in the name of safety have led to the voices of the general assembly becoming largely irrelevant or impotent. Continuously, decisions in the name of safety threaten personal sovereignty with mandates and have led to increased social shaming for those who cannot meet them for legitimate reasons. And there is no doubt that all of these decisions have had disproportionate impacts on impoverished and disenfranchised persons.

And what I know most of all is how these decisions have impacted our family personally. We have two children, who having lived their lives as military children, are pretty resilient. Because of military moves, my oldest has been to six different schools in her 14 years. And yet, it wasn't until last year, that she was unable to weather changes outside of her control. Her resiliency crumbled. She carried a weight that didn't belong to her. The weight of being responsible for the health of others. The weight of being isolated from her peers. The weight of receiving a substandard educational experience, no matter how well intentioned. She has suffered deeply with depression and anxiety in the face of the reality of her landscape, one that is entirely as it is because of the decisions of a governor who thinks he knows what is best for her. Her once stellar grades as a gifted student faltered and she found herself unable to find joy or hope in her days. We have had to seek out professional mental health support for her to help her navigate this new normal and to help her cope with her suicidal ideation. And she is not alone. (1, 2, 3) It didn't have to be this way.

My youngest child has a speech and hearing deficit and is unable to wear a mask. She struggles to understand others under normal circumstances. She benefits from seeing facial expressions and mouth movements in her day-to-day and yet, for a year all she sees is masked faces and her development is set back because of it. It didn't have to be this way.

Throughout all of this it was alarming that instead of re-assessing and re-evaluating and changing course, the governor seemed to double down on his recommendations. When mission planning he did not develop contingency plans for when new data suggested that old modeling was over-reactionary and/or incorrect. What's more, and what's worse, is they were too slow to effectively address the problem right in front of us, and that is: nearly 50% of all COVID deaths in our state have occurred in long term or nursing home facilities (from the outset this number was as high as 70%). (3, 4). Instead, effort was focused on mitigating threats from the general population which is neither at-risk or much of a risk themselves. (6, 7).

The measures failed to protect the public health of our most vulnerable and they *hurt* the public health of those least vulnerable. To include my children and family.

It is so clear that it is time to address the landscape that allowed this to happen. Because while Ohioans have been feeling the weight of uncertainty and fear during this crisis, we still value the legislative process and the distinct checks and balances that are in place to allow for due diligence on important issues. In fact, the value of the legislative process, due process and checks and balances are *more* important than ever in times like these. We cannot let fear continue to drive us to a place where the executive guides and charts the course of Ohioan lives with arbitrary and unilateral decisions without input from the legislative, the judiciary, or the people. We cannot let fear continue to hinder the facts that this crisis is more manageable than we are led to believe. That there are real treatments for illness, real preventatives and immune supports, and that there is real danger in policies of isolation. And that the voices and experiences of Ohio citizens need to be considered with appropriate weight in all decisions.

It is past time to rebalance.

In my support of SB 22, I appreciate the specific codification of the terms “isolation” and “quarantine” as it will be applied in response to infection as opposed to how these terms have so far been used nebulously upon the whole of the population. Most importantly, I support measures to re-balance the power of our state as outlined in SB22: to allow for the general assembly to rightly play a role in the discussion and reaction to health orders and governor’s actions in the face of any public health crisis. This allows for more seats at the table and more voices to be considered and helps to restore the role of the electorate. It gives me hope for a better future for my children in a world where life with a virus is the reality.

Thank you for your time and consideration.

Sincerely,

Sara Gleason

Warren County, OH

¹ <https://adc.bmj.com/content/early/2020/11/26/archdischild-2020-320372>

² <https://www.cincinnati.com/story/news/2020/11/17/mason-city-schools-superintendent-addresses-teen-suicide/6322572002/>

³ <https://www.mlive.com/highschoolsports/2021/01/michigan-family-mourns-death-of-son-they-say-was-pushed-to-the-breaking-point-by-stop-in-high-school-sports.html?say-was-pushed-to-the-breaking-point-by-stop-in-high-school-sports.html>

⁴ <https://coronavirus.ohio.gov/wps/portal/gov/covid-19/dashboards/long-term-care-facilities/mortality>

⁵ <https://www.cleveland.com/coronavirus/2020/05/at-least-1247-ohio-nursing-home-patients-have-died-with-coronavirus-70-of-total-covid-19-deaths-state-reports.html>

⁶ <https://www.heritage.org/data-visualizations/public-health/covid-19-deaths-by-age/>

⁷ <https://www.nature.com/articles/d41586-020-02973-3>

