Senate Finance Committee Ohio Commission on Minority Health May 17, 2021

Good afternoon Chairman Dolan, Ranking Minority Member Sykes, and esteemed members of the Senate Finance Committee. My name is Angela Dawson. I am the Executive Director of the Ohio Commission on Minority Health where I am honored to serve. I appreciate the opportunity to provide proponent testimony in support of the amendment to HB110 that would fund an Asian American and Pacific Islanders Commission in Ohio.

The Ohio Commission on Minority Health is dedicated to eliminating disparities in minority health through innovative strategies and financial opportunities, public health promotion, legislative action, public policy, and systems change.

This amendment proposes the creation of an Ohio Asian-American Pacific Islander (AAPI) Affairs Commission. This Commission would:

- advise the governor, general assembly and state departments and agencies on, and assist in the development and implementation of, comprehensive and coordinated policies, programs, and procedures focusing on the special problems and needs of AAPI's in the fields of education, employment, energy, health, housing, welfare, and recreation.
- gather and disseminate information and conduct hearings, conferences, investigations, and special studies on problems and programs concerning AAPI's,

- stimulate public awareness by conducting a program of public education,
- develop, coordinate, and assist other public and private organizations that serve AAPI's to include the provision of training,
- Propose new programs and evaluate programs and provide input to prospective legislation,
- secure appropriate recognition of the accomplishments and contributions of AAPI's to this state as well as other activities focused on AAPI's.

The Commission commends Senator Maharath and her cosponsors for their support of this important amendment which can provide the needed groundwork to improve the educational, economic and health and well-being of AAPIs in Ohio.

The HPIO 2021 Health Value Dashboard demonstrated that racial and ethnic populations in Ohio face multiple barriers to being healthy and as a result they have much poorer health outcomes. This report further highlighted that Ohio is ranked 47th in the nation for health value.

During FY20 and FY21 the world experienced the emergence of the COVID-19 pandemic. The pandemic has caused an insurmountable loss of human life worldwide and presents an unprecedented challenge to public health. The economic and social disruption caused by the pandemic is devastating and will most likely reverberate for some time. Among this impact is the significant increase stigma and violence toward AAPI communities which is unacceptable. The Commission provided stigma reduction recommendations to local health

departments during the Governor's COVID-19 Summit in early 2020 in the effort to address this issue. The creation of an AAPI Commission can assist the state in developing comprehensive responses to address stigma and the related behavioral health and economic impacts.

According to the National Healthcare Disparities Report for 2008, Americans are living longer, healthier lives than ever before because of social, public health and medical technology advances. However, not every community benefits equally from these improvements. Good health is elusive for far too many racial and ethnic minorities in the United States, since appropriate care is often associated with an individual's economic status, race, and gender.

Persistent and well-documented health disparities exist between various racial and ethnic populations, even when accounting for economic status and access to health care according to the National Research Council.

According to the Center from Disease Control and Prevention, many factors contribute to disparities including inadequate access to care, quality of care and personal behaviors. However, there are other factors that can harm one's health as well.

Examples include living in an area that has poor environmental conditions such as poverty, inadequate access to healthy foods, inadequate personal support systems, limited access to preventative services, as well as illiteracy or limited English proficiency.

These differences are caused by a complex array of factors known as social determinants of health. These determinants make it necessary for states to devise actions plans that have cross cutting policy solutions.

According to the Ohio Department of Health's - 2015 Impact of Chronic Disease Report, most healthcare costs in Ohio and in the nation are associated with chronic disease and related health behaviors. In Ohio, medical costs associated with chronic disease was expected to rise from \$25 billion in 2010 to \$44 billion in 2020. The report further stated that even if Ohioans achieve a modest improvement in chronic disease prevention and early detection services, the state could save billions of dollars in healthcare spending and prevent multiple cases of chronic disease."

This budget amendment will support Ohio's efforts to address racial and ethnic health disparities and the specific needs of the AAPI community in the creation of the AAPI Commission.

The Ohio Commission on Minority Health has worked over the years to highlight the concerns related to AAPI health disparities in its funding support to:

- seed fund the Ohio Asian American Health Coalition,
- funding of organizations to provide programming to prevent chronic diseases with state and federal resources,
- funding to raise the visibility of the contributions and needs of the AAPI communities in Ohio,
- support policy recommendations to ensure the disaggregation of state level data and oversampling of data

 support of the legislative initiatives such as "Test at 23" to ensure diabetes prevention

The Commission has enjoyed a collaborative relationship with the Ohio Asian American Pacific Islander Advisory Council since the inception in 2007 and supported their efforts to bring awareness and address a broad array of AAPI needs in Ohio.

Effective state action plans to address racial and ethnic populations are ones that are comprehensive with a holistic approach that identifies health disparities within population groups, shifts healthcare and preventative strategies to populations most in need, requires disaggregated data by racial and ethnic populations and targets multiple social determinants of health.

The AAPI Commission can provide meaningful support and partnership to Ohio's efforts to meet the needs of the AAPI communities.

The Commission on Minority Health extends our willing partnership to support this effort and commits to work with the AAPI Commission as we collaborate to improve the health and overall wellbeing of racial and ethnic populations in Ohio.