November 16, 2020

Mayor Lori Lightfoot
121 North LaSalle St
Chicago City Hall 4th Floor
Chicago, IL 60602

Submitted via email to public_comments@cityofchicago.org.

RE: Public Comment on Proposed City Budget

Dear Mayor Lightfoot and Chicago City Council,

Thank you for the opportunity to provide comment on the proposed city budget for 2021 on behalf of Howard Brown. Howard Brown is the largest LGBTQ health center in the Midwest, serving over 38,000 patients across twelve clinic locations in Chicago. As a federally qualified health center, Howard Brown provides comprehensive, high quality and affordable care—including primary care, behavioral health, mental health services, HIV/STI prevention, elder services and community outreach initiatives—to all of our patients, regardless of ability to pay. As we experience a new surge in the COVID-19 pandemic in Chicago, the services that we provide for low-income and underserved communities—those that are hardest hit by the pandemic—are more critical than ever.

At Howard Brown, we’ve implemented multiple COVID testing strategies, including walk-up testing sites, community care stations, mobile van testing, mobile psychiatry, and contact tracing. To date, we’ve administered 43,362 total tests, which is 2.8% of all COVID tests across Chicago. From our testing efforts, we’ve identified 4.1% of all positive patients across Chicago. We’ve also shifted many of our services to telehealth so that we can continue to provide affirming and high quality healthcare to all of our patients safely. As the pandemic continues, we will need resources to ensure that we can continue to provide our robust COVID testing and care services.

We understand that the pandemic has caused financial strain, resulting in a very tight budget and a projected $1.2 billion shortfall. With a new surge in COVID cases, uncertainty around new federal financial aid, and Governor Pritzker indicating that “painful” budget cuts to healthcare and social services may be on the horizon, we urge the Chicago City Council to ensure that funding for safety net healthcare is secure amidst financial uncertainty. In order to avoid possible budget cuts to these critical services in an already tight budget, we recommend reallocating funds from the proposed police budget, which is nearly $1.7 billion for 2021.
Safety net healthcare and other publicly funded social service and benefits programs are critically important for ensuring that the most vulnerable among us are cared for and have access to basic needs for survival. In the 2020 city budget, $1.41 billion was allocated to community services. In the 2021 proposed budget, the amount allocated toward these community services is increased very slightly to $1.42 billion. The overall amount of funding for the five departments that comprise community services is about $300 million less than what is allocated for the police department alone. Especially amidst the pandemic, additional resources should be devoted to the community services and safety net healthcare providers that provide critical and life-saving care and support.

This is supported by the vast majority of the 38,000 Chicagoans who participated in the Mayor’s city budget survey, who overwhelmingly responded that community services and public health should be prioritized highest for receiving additional funds in the 2021 budget. That same survey showed that 90% of respondents believe that the city should reallocate funds within the budget to increase funding for public health, and of those who said that the city should reallocate funds to meet additional needs, 87% said that those funds should come from the police budget.¹

Reallocating funds from the police budget to support safety net healthcare and community services not only helps to address the public health crisis of COVID-19, but also helps to address another public health crisis: law enforcement violence against marginalized communities. The American Public Health Association (APHA) has released several statements acknowledging law enforcement violence² and mass incarceration³ as public health crises disproportionately burdening people of color and other marginalized communities, including LGBTQ people. A 2015 report by the Williams Institute found that discrimination and violence against LGBTQ people is still common in law enforcement, and LGBTQ people are overrepresented among incarcerated populations.⁴

In order to address the LGBTQ disparities and racial inequities in the public health crisis of police violence, APHA recommends “divesting from carceral systems and investing in the societal determinants of health (e.g., housing, employment)” and “implement[ing] community-based alternatives to addressing harms and preventing trauma.” At Howard

³ APHA. (2020). Advancing Public Health Interventions to Address the Harms of the Carceral System. Available online at: https://www.endingpoliceviolence.com/
Brown, we similarly support investing in Black communities through community services and alternatives to policing such as restorative justice and unarmed mediation. Following guidance from our nation’s public health experts, we urge the City Council to reallocate from the 2021 police budget to instead ensure adequate funding for public health and social services that address the social determinants of health and aid in our city’s pandemic response. If you have any questions, please feel free to reach out to Tim Wang, Director of Policy and Advocacy, at timothyw@howardbrown.org.

Sincerely,

[Signature]

David Ernesto Munar
President and CEO