

Congress of the United States
Washington, DC 20515

May 4, 2020

The Honorable Chad Wolf
Acting Secretary
Department of Homeland Security
300 7th St SW
Washington, DC 20024

The Honorable Peter Gaynor
Administrator
Federal Emergency Management Agency
500 C Street SW
Washington, DC 20472

Dear Acting Secretary Wolf and Administrator Gaynor:

We are writing to express our support for ensuring that FEMA's assistance programs help the most vulnerable communities and to ask how FEMA is accounting for racial and socioeconomic disparities in the impact of COVID-19 when allocating funding through its various emergency and disaster assistance programs. We share the apprehensions of other Members who have previously written you to express concern with racial disparities in previous FEMA response efforts and it is our hope that such a pattern is not repeated in your response to this disease. Indeed, in Wisconsin, where the African American and Latino populations have disproportionately been impacted by this disease, these concerns are very real and the failure of FEMA to accurately take the concerns of these communities into consideration will have real adverse effects on efforts to stop the spread of Coronavirus.

Our state has struggled to keep up with the growing demand for the resources necessary to respond to this virus. Despite early action to prevent the spread of COVID-19, the number of active cases in Wisconsin have nearly quadrupled since the Governor submitted his request for a Major Disaster Declaration on March 31. Just as concerning are the disparate rates at which this virus has taken hold of minority communities throughout Wisconsin.

In Milwaukee County, where racism has been declared a public health crisis by the County,¹ health care disparities between African American and white communities have been evident for decades. The risks posed by the COVID-19 pandemic have shed light on these disparities and it is disproportionately hurting communities of color.

As of April 8, 2020, African Americans accounted for 45 percent of confirmed cases of Coronavirus in Milwaukee County, despite only making up 27 percent of the population. In a

¹ <https://www.jsonline.com/story/news/politics/2019/04/04/milwaukee-county-leaders-proclaim-racism-public-health-crisis/3362685002/>

report produced by the University of Wisconsin – Milwaukee, researchers connected the geographic distribution of Coronavirus Cases to census tracts that are more than 75 percent African American.² Only 13 percent of the county’s population lives within the 53 census tracts that fit this criterion; however, these tracts account for 26 percent of confirmed cases.

Within these majority African American communities, occurrences of Coronavirus complicating medical conditions such as hypertension, diabetes, heart disease, and obesity, are also much more prevalent due to lack of access to health care, health insurance, a healthy environment, and healthy food.³ We believe these disparities can also be attributed to historical incidences of housing, employment, and other forms of harmful discrimination.

Racial trends for COVID-19 infections have continued in recent weeks. According to the Milwaukee County COVID-19 Dashboard,⁴ as of April 24, 2020, African Americans still account for 1,080 of 2,436 cases (44 percent) in Milwaukee, while whites only account for 579 (24 percent). African Americans also account for 79 of 145 deaths (54 percent). This trend has held in Wisconsin more broadly as well, with 14.5 percent of non-white citizens making up more than 33 percent of confirmed cases.⁵ Wisconsin is not alone in seeing this disproportionate impact. Similar numbers have been reported from Illinois to Louisiana.

FEMA has been charged with providing direct support to state and local governments on the frontlines of this epidemic. It is critical, therefore, that as your agency makes decisions about how to distribute desperately needed commodities and direct funding through Public Assistance and other programs, you fully consider and account for the clear racial and socioeconomic impacts of this disease.

Unfortunately, we are concerned that this may not be the case, especially given FEMA’s history in this matter. After Hurricane Katrina in 2005, homeowners in communities impacted by historically racist housing policies did not receive the same federal buyout options typically offered to homeowners after disasters. Additionally, these same homeowners were left without the ability to access federal assistance for land that was informally passed down from generation to generation. In the case of Hurricane Harvey, the damage disproportionately impacted Black and Hispanic residents and those with lower incomes, yet these groups were less likely to qualify for FEMA aid to rebuild their homes, further amplifying inequality in the recovery process.⁶ This same pattern was evident following Hurricane Maria in Puerto Rico, where an inadequate federal response that failed to understand both the historical needs and unique circumstances of the country’s crisis led to needless hurdles to receiving aid.

² <https://uwm.edu/ced/wp-content/uploads/sites/431/2020/04/COVID-report-final-version.pdf>

³ <https://www.propublica.org/article/early-data-shows-african-americans-have-contracted-and-died-of-coronavirus-at-an-alarming-rate>

⁴ <https://mcoem.maps.arcgis.com/apps/opsdashboard/index.html#/018eedbe075046779b8062b5fe1055bf>

⁵ <https://www.dhs.wisconsin.gov/covid-19/cases.htm>

⁶ <https://www.facing south.org/2018/09/recent-disasters-reveal-racial-discrimination-fema-aid-process>

Expanded access to testing has been identified by health experts as the best way to slow and prevent the spread of COVID-19. That being the case, we have been concerned to hear that the additional testing supplies requested by Governor Tony Evers in his letters on March 26 and March 28, 2020, (a request supported by the entire Wisconsin congressional delegation) have still not been delivered in full.

In April, FEMA released a Civil Rights Bulletin,⁷ outlining efforts to ensure that FEMA's Civil Rights obligations are met during the agency's response and recovery to COVID-19. The bulletin stated that FEMA intends to lead a disaster assistance process that is "equitable and impartial" and without discrimination regarding a number of attributes, including race, age, and socioeconomic status – each of which have experienced disproportionately high rates of COVID-19 infection and unfavorable health outcomes – including death.⁸ We urge you to help ensure that your allocation of resources, both supplies and funding, made available under the President's Stafford Act declaration, lives up to those ideals.

Again, especially given the unique historical circumstances surrounding racial inequality in our nation and in the city of Milwaukee and the ferocity with which this disease has impacted our minority communities, Milwaukee County, and Wisconsin more broadly, require FEMA to make decisions accordingly to respond effectively to COVID-19 and provide sufficient support to state and local partners.

With those data and historical factors in mind, we request you address the following additional questions:

1. Is FEMA tracking whether and how entities receiving aid through its emergency response programs, as well as critical public health supplies, are disbursing resources within their communities based on race, income, and rates of COVID-19 infection?
2. How is FEMA accounting for the impact of COVID-19 on certain people of color and income levels in how it prioritizes and distributes funding and resources as part of its COVID-19 response? What data sources is FEMA utilizing to help it make these decisions, and how does it incorporate those factors when data may not be publicly available.
3. What steps has FEMA taken to identify historically vulnerable communities that may be in more immediate need of PPE, testing kits, and other supplies?
4. What is FEMA proactively doing to ensure that minority communities and low-income communities that are being disproportionately affected by this disease do not also

⁷ <https://www.fema.gov/media-library-data/1586893628400-f21a380f3db223e6075eeb3be67d50a6/EnsuringCivilRightsDuringtheCOVID19Response.pdf>

⁸ <https://www.npr.org/2020/04/15/834746342/how-covid-19-patients-are-affected-by-health-and-other-disparities>

experience a disparate response (and get slighted) in the allocation of public assistance funding? Are you requiring state and local governments applying for these funds to identify impact by racial or socioeconomic status?

5. Is FEMA providing, or planning to provide, guidance to local and state entities regarding the delivery of testing and personal protective equipment (PPE) to communities at the greatest risk of COVID-19 related complications due to underlying health problems, lack of access to health care, and/or heightened exposure due to the nature of their work? For example, we know a disproportionate number of non-white individuals work in “essential jobs,” including in the health care sector.
6. Can you confirm receipt of Governor Evers’ letters dated March 26 and March 28 requesting both PPE and supplies needed for testing? Please provide an update regarding the status of supplies requested, a specific timeline of all supplies delivered thus far, and further information on any unfulfilled requests.
7. We understand that FEMA is using a proprietary model to identify hotspots for the distribution of resources. How are race, age, socioeconomic status, and historic need incorporated into this model and any subsequent decisions that are made using this model?
8. How does FEMA intend to ensure meaningful involvement of minority communities and low-income populations in the development and implementation of policy decisions during the COVID-19 response and recovery? What practical steps in this regard has your agency taken such as public awareness campaigns, public meetings, meetings with key organizations representing communities of color or health workers of color?

- a. How does FEMA plan to do this and what specific steps have been taken to date?

Thank you for your consideration of this request and your timely and informative response.

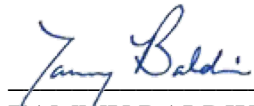
Sincerely,



GWEN S. MOORE
Member of Congress



MARK POCAN
Member of Congress



TAMMY BALDWIN
U.S. Senator



RON KIND
Member of Congress