



MEMORANDUM

June 5, 2020

To: Subcommittee on Environment and Climate Change Members and Staff

Fr: Committee on Energy and Commerce Staff

Re: Hearing on “Pollution and Pandemics: COVID-19’s Disproportionate Impact on Environmental Justice Communities”

On **Tuesday, June 9, 2020, at 12 p.m. (EDT) via Cisco Webex online video conferencing**, the Subcommittee on Environment and Climate Change will hold a hearing entitled, “Pollution and Pandemics: COVID-19’s Disproportionate Impact on Environmental Justice Communities.” The hearing will examine the relationship between disproportionate exposures to environmental pollution and disproportionate effects of the 2019 coronavirus (COVID-19) pandemic.

I. BACKGROUND

The U.S. Environmental Protection Agency (EPA) defines environmental justice as “the fair treatment and meaningful involvement of all people regardless of race, color, national origin, or income, with respect to the development, implementation, and enforcement of environmental laws, regulations, and policies.”¹ According to EPA, achieving environmental justice requires equal protection from environmental health hazards and equal access to environmental decisions.²

A. COVID-19 and Demographic Disparities

According to a recent Centers for Disease Control and Prevention (CDC) report on demographic breakdowns in COVID-19 hospitalizations, black patients represented 33 percent of hospitalized patients, despite only comprising 18 percent of the community.³ In contrast,

¹ U.S. Environmental Protection Agency, *Environmental Justice* (epa.gov/environmentaljustice) (May 8, 2020).

² *Id.*

³ Shikha Garg, et al., *Hospitalization Rates and Characteristics of Patients Hospitalized with Laboratory-Confirmed Coronavirus Disease 2019 — COVID-NET, 14 States, March 1–30, 2020*, U.S. Department of Health and Human Services Morbidity and Mortality Weekly Report (Apr. 8, 2020).

white patients represented 45 percent of hospitalizations while comprising 59 percent of the communities included in the study. The most recent CDC analysis of provisional death counts for COVID-19, published on June 3, 2020, shows that 23 percent of those who died from COVID-19 were black, compared to 17.7 percent of the weighted population.⁴ In some jurisdictions, this disparity is much higher. For example, according to that same CDC dataset, 75.7 percent of the people who died from COVID-19 in the Washington, DC, area were black, despite representing 44.9 percent of the weighted population.⁵

Death rates in New York City also demonstrated this disparity. According to the New York City Department of Health, the death rate for black New Yorkers has been 92.3 deaths per 100,000 people. The death rate for Latino New Yorkers was 74.3 for the same population and 45.2 for white New Yorkers.⁶

B. Environmental Factors in COVID-19 Disparities

The impacts of COVID-19 are also closely associated with environmental pollution. New research has shown that local air pollution directly correlates with the COVID-19 death rate.⁷ That research focused on fine inhalable particulate matter with diameters that are generally 2.5 micrometers and smaller, commonly called PM2.5.⁸ The researchers found that an increase of one microgram per cubic meter of PM 2.5 is associated with an eight percent increase in the COVID-19 death rate. EPA has documented a body of evidence finding that non-white people are at higher risk from PM2.5 because of higher exposures.⁹ That evidence is corroborated by findings of the American Lung Association that “Due to decades of residential segregation, African Americans tend to live where there is greater exposure to air pollution.”¹⁰

⁴ Centers for Disease Control and Prevention, *Weekly Updates by Select Demographic and Geographic Characteristics* (cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#Race_Hispanic%20Table%20a) (June 3, 2020). According to the CDC, weighted population distributions provide the most accurate comparison to identify disparities.

⁵ *Id.*

⁶ New York City Department of Health and Mental Hygiene, *Age-adjusted rates of lab confirmed COVID-19 non hospitalized cases, estimated non-fatal hospitalized cases, and patients known to have died 100,000 by race/ethnicity group as of April 16, 2020* (Apr. 16, 2020) (nyc.gov/assets/doh/downloads/pdf/imm/covid-19-deaths-race-ethnicity-04162020-1.pdf).

⁷ Xiao Wu, et al., *Exposure to air pollution and COVID-19 mortality in the United States: A nationwide cross-sectional study*, Harvard University (Apr. 24, 2020).

⁸ U.S. Environmental Protection Agency, *Particulate Matter PM2.5 Trends* (epa.gov/air-trends/particulate-matter-pm25-trends) (July 3, 2019).

⁹ U.S. Environmental Protection Agency, *Integrated Science Assessment (ISA) for Particulate Matter (Final Report)* (Dec. 2019 (EPA/600/R-19/188)).

¹⁰ American Lung Association, *State of the Air 2020* (Apr. 21, 2020).

One reason for the correlation between PM2.5 exposure and COVID-19 mortality is likely the long term effects of particulate matter and other air pollutants on respiratory health. For instance, several air pollutants, including ozone and particulate matter, have been associated with the exacerbation and onset of asthma.¹¹ A study in New York City found that asthma emergency department visits attributable to PM2.5 were 4.5 times higher in neighborhoods with high poverty than in neighborhoods with low poverty.¹²

Another recent study also identified air pollution concentrations as a factor in the transmission of viruses including COVID-19, since air pollution particles can act as vectors for the virus in the air.¹³ This research produced findings of significant associations between particulate matter and ozone and increases in the transmission rate of COVID-19.¹⁴ Such studies indicate that transmission of COVID-19 may occur more easily in environmental justice communities.

C. Additional Environmental Justice Concerns During the COVID-19 Pandemic

The COVID-19 pandemic also has the potential to exacerbate environmental justice disparities by increasing pollution exposures for environmental justice communities. Potential concerns include:

- Increased exposure to indoor air pollution resulting from orders and recommendations to remain at home;
- Increased potential for air pollution exceedances due to short staffing at emitting facilities and decreased enforcement;
- Increased exposure to disinfectants and chemicals used for sterilization which can have deleterious side effects;
- Shortages of personal protective equipment (PPE) for essential workers facing workplace toxic exposures, including farmworkers;
- Increased disposal of medical waste and PPE at facilities located in or near environmental justice communities; and
- Increased exposure to air pollution from refrigerated trucks idling in neighborhoods as temporary morgues.

¹¹ Michael Guarnieri and John R. Balmes, *Outdoor air pollution and asthma*, *Lancet* (May 3, 2014).

¹² *See* note 7.

¹³ Ran Xu, et al., *The Modest Impact of Weather and Air Pollution on COVID-19 Transmission* (May 23, 2020) (projects.iq.harvard.edu/files/covid19/files/weather_and_covid-19_preprint.pdf).

¹⁴ *Id.*

II. WITNESSES

The following witnesses have been invited to testify:

Mustafa Santiago Ali

Vice President, Environmental Justice, Climate, and Community Revitalization
National Advocacy Center at the National Wildlife Federation

Jacqueline Patterson

Senior Director, Environmental and Climate Justice Program
National Association for the Advancement of Colored People (NAACP)

Shay Hawkins

President
Opportunity Funds Association