

Congress of the United States
House of Representatives
Washington, DC 20515

January 26, 2021

Governor Charlie Baker
Massachusetts State House
Office of the Governor, Room 280
24 Beacon Street Boston, MA 02133

Dear Governor Baker,

I write to implore you to act with urgency and put the health and safety of our Black and brown communities at the center of the Commonwealth's COVID-19 response and ongoing vaccination deployment plans. Since the onset of this unprecedented pandemic, more than 480,000 of our neighbors have contracted COVID-19 and more than 13,800 lives have been tragically lost.¹ Despite the fact that we continue to see record spikes in cases across the Commonwealth, I remain gravely concerned that your administration's vaccination and response plans continue to fall short of serving the needs of the communities most impacted, including those in my Congressional district.

Public health experts warned of the devastating impact that COVID-19 would have on our most vulnerable communities.² We knew early on that this virus would only exacerbate the generations of deeply embedded systemic racism and inequality that have resulted in unequal access to affordable and accessible health care, safe and stable housing, and quality schools and employment. These inequities have resulted in the stark health disparities that have made Black and brown communities predisposed to underlying conditions like diabetes, asthma and hypertension—all factors that heighten the risk of COVID-19 hospitalization and death.

Nowhere in the Commonwealth has this reality been clearer than across the Massachusetts 7th Congressional District, which includes cities like Boston and Chelsea—communities that have been the epicenter of this crisis. In Boston, Black and Latinx residents make up nearly 60 percent of COVID-19 infections, despite accounting for just 25 and 20 percent of the city's population.³ Over the summer, the city of Chelsea—a predominately Latinx and immigrant community, had a COVID-19 positivity rate that was more than 6 times the state average and continues to be one of the hardest hit cities in the entire Commonwealth.⁴ Other cities across my district like Everett and Randolph continue to be listed as dangerous hot spots for the virus.⁵

¹ Commonwealth of Massachusetts, "COVID-19 Interactive Data Dashboard," January, 25, 2021, [COVID-19 Response Reporting | Mass.gov](#).

² The New Yorker, "The Interwoven Threads of Inequality and Health," Isaac Chotnier and Nancy Krieger, April 14, 2020, <https://www.newyorker.com/news/q-and-a/the-coronavirus-and-the-interwoven-threads-of-inequality-and-health>.

³ City of Boston COVID-19 Health Inequities Task Force, "Racial Data on Boston Resident COVID-19 Cases," January 25, 2021, <https://www.boston.gov/departments/mayors-office/racial-data-boston-resident-covid-19-cases>.

⁴ City of Chelsea, "COVID-19 Cases Report Among Chelsea Residents from March to August, 2020," October 28, 2020, <https://www.chelseama.gov/covid-19-cases-report>.

⁵ NBC Boston, "Massachusetts COVID Hot Spots: Record Number of Towns, Cities in High-Risk Red Zone," Asher Klein and Mike Pescaro, December 11, 2020, <https://www.nbcboston.com/news/coronavirus/mass-covid-hot-spots-record-number-of-towns-cities-in-high-risk-red-zone/2254194/>.

Over the last month, the Commonwealth has begun to implement Phase 1 of its COVID-19 vaccination deployment plans. Unfortunately, current vaccination data already show stark racial disparities among those who have been able to access the vaccine thus far. According to data released by the CDC, the Commonwealth ranks 29th in the nation for vaccine deployment. According to data released by the Massachusetts Department of Public Health, Black and Latinx residents make up less than 3% and 4% respectively of those who have been vaccinated thus far, whereas White residents make up nearly 60% of those fully vaccinated.⁶ These trends are incredibly troubling and are not easily explained by racial demographics among COVID-facing health care workers and first responders. There is an urgent need to update the deployment plan to address these inequities and potential hesitancy among many professionals and patients in these early populations.

These troubling trends also reflect research that shows the medical community's past breaches of trust with Black and brown communities are impacting the vaccine rollout process. Across the Commonwealth, nearly one-third of Black residents and nearly one-quarter of Latinx residents do not have plans to take the COVID-19 vaccine at all.⁷ Furthermore, a recent analysis conducted by Northeastern and UMass Boston found that nearly half of Black respondents and one in four Latinx residents living in Boston did not plan to take the vaccine. It is on all of us to work deliberately to shift these statistics. It is clear that much more must be done to build trust and ensure that the Black and Latinx communities that have borne the disproportionate brunt of this crisis are able to access the vaccine and feel safe doing so.

Last week, hundreds of medical experts sent a letter urging your administration to prioritize the Black and brown communities hardest hit by the pandemic in the vaccination deployment process and pointed to Rhode Island's work to provide vaccinations to hardest hit communities in the state's first phase of deployment.⁸ While I recognize that your administration has pledged to set aside 20% of vaccines for hard-hit communities across the Commonwealth once the state enters Phases 2 and 3⁹, there remains very little information publicly available on how these vaccines will be set aside and how they will be allocated and distributed. Our communities simply cannot afford to wait.

Within days of being sworn into office, President Biden signed an Executive Order on Ensuring an Equitable Pandemic Response and Recovery, calling for comprehensive data collection on racial disparities and the establishment of a COVID-19 Health Equity Task Force dedicated to providing states with recommendations and guidance on how to best allocate resources to the most impacted communities. This Executive Order reflects the calls that I have been pushing for through my Equitable Data Collection

⁶ Massachusetts Department of Public Health, "Weekly COVID-19 Vaccination Report," January 14, 2021, <https://www.mass.gov/doc/weekly-covid-19-vaccination-report-january-14-2021/download>.

⁷ The Boston Globe, "Will you take the vaccine as soon as you can? Only about half of residents say yes, new poll finds," Victoria McGrane and Stephanie Ebbert, December 13, 2020, <https://www.bostonglobe.com/2020/12/13/metro/weary-crisis-some-wary-vaccine-mass-residents-still-optimistic-new-poll-finds/?p1=Article Inline Text Link>.

⁸ The Boston Globe, "Hundreds of medical professionals call on Baker to prioritize vaccine access for Black and immigrant communities," Hanna Krueger, January 18, 2021, https://www.bostonglobe.com/2021/01/19/metro/hundreds-medical-professionals-call-baker-prioritize-vaccine-access-black-immigrant-communities/?camp=bg:brief:rss:feedly&rss_id=feedly_rss_brief.

⁹ The Boston Globe, "Vaccine rollout earmarks additional doses for hard-hit Mass. Communities. But delivering on that could be a challenge," Deanna Pan, December 22, 2020, <https://www.bostonglobe.com/2020/12/22/nation/vaccine-rollout-earmarks-additional-doses-hard-hit-mass-communities-delivering-that-could-be-challenge/?p1=Article Inline Text Link&p1=Article Inline Text Link>.

and Disclosure Act.¹⁰ I stand ready to continue pushing for States and local municipalities to have the resources necessary to equitably combat this pandemic.

In the meantime, it is absolutely critical that we expedite the prioritization of hardest hit communities as soon as possible. Therefore, I urge you to consider take the following actions:

- **Commit to prioritizing hot spot communities in early phases of vaccine deployment.** States including Rhode Island have found ways to target vaccines to hot spot communities and other high-density zip codes that are particularly vulnerable to the spread of COVID-19. The Commonwealth should consider adopting these innovative models to ensure that both vulnerable individuals and hotspot communities are able to access vaccinations quickly and efficiently. I strongly encourage the Commonwealth to provide additional flexibility to hospitals and Community Health Centers in order to allow them to move into Phase 2 of the plan and utilize any remaining vaccine doses for high-risk populations. This flexibility can make a big difference for those actively seeking the vaccine in hard hit communities.
- **Begin building out robust, community-centered programs to begin delivering and administering vaccines in hot spot communities.** Many of the hardest hit communities are also home to community-based organizations that have stepped up and stood in the gap to ensure residents are able to access resources to survive this pandemic. These organizations can serve as critical partners in any community-centered efforts to deploy vaccines in communities that have historically experienced breaches of trust with the medical community. I strongly urge your administration to deploy resources to those organizations that are already responding to so many of the challenges of this pandemic and have done so with limited financial resources and an overextended workforce. These groups are the trusted voices within our most impacted communities and have expertise in the most culturally competent and linguistically diverse ways to deliver information and resources.
- **Partner with and invest in Community Health Centers throughout the Commonwealth to ensure that vaccination sites and culturally competent care is accessible in the hardest to reach communities.** Currently, Community Health Centers have administered less than 3% of the total vaccinations across the Commonwealth.¹¹ The Commonwealth should look at increasing capacity and partnerships with our network of stellar Community Health Centers that already provide community-centered and culturally competent care to our highest need communities. This will require dedicated resources to build and strengthen vaccine infrastructure for Community Health Centers and ensure there is adequate staffing and other resources in order to provide vaccinations and other critical care in hard to reach communities. President Biden’s recently released COVID-19 vaccination plan specifically notes the importance of supporting the capacity and workforce of Community Health Centers in deploying vaccines. I strongly urge your administration to publicly release your plans to invest in and scale the capacity of Community Health Centers throughout the Commonwealth and how you plan to deploy vaccinations to these providers in a timely and efficient manner.

¹⁰ Office of U.S. Representative Ayanna Pressley, “Pressley, Warren Applaud Biden’s Swift Action on their Calls for Equitable Data Collection and Response,” January 22, 2021, <https://pressley.house.gov/media/press-releases/pressley-warren-applaud-biden-s-swift-action-their-calls-equitable-data>.

¹¹ Massachusetts Department of Public Health, “Weekly COVID-19 Vaccination Report,” January 21, 2021, <https://www.mass.gov/doc/weekly-covid-19-vaccination-report-january-21-2021/download>

- **Launch a public awareness campaign in partnership with trusted medical professionals and community voices to dispel misinformation about the vaccine and build trust in Black and brown communities.** It is incumbent on policymakers and our public health institutions to do the work to build trust in Black and brown communities that for too long have been neglected, mistreated and underserved by the systemic racism deeply embedded in our medical system. As the Commonwealth begins to vaccinate individuals living in congregate settings, including homeless shelters, jails, and prisons, it is absolutely crucial to urgently prioritize ways to assuage fears and build trust in these particularly vulnerable communities. Building this trust will require intentional financial investments in culturally competent outreach, information sharing and partnerships with community based organizations, religious organizations, schools, businesses, and civic groups in order to dispel misinformation and build trust in the safety, efficacy and necessity of the vaccine.

It is absolutely vital that policymakers at all levels of government heed the calls of the communities most impacted by this pandemic and the public health experts that are fighting this virus on the frontlines. Thank you for your consideration of this urgent matter, and I stand ready to partner in any way to ensure our hardest hit communities are able to access the lifesaving resources and vaccinations necessary to combat this unprecedented pandemic.

Sincerely,

A handwritten signature in blue ink that reads "Ayanna S. Pressley". The signature is fluid and cursive, with a long horizontal stroke at the end.

Ayanna Pressley

Member of Congress