

Congress of the United States
Washington, DC 20515

October 22, 2020

The Honorable Mitch McConnell
Senate Majority Leader
United States Senate
S-230 U.S. Capitol
Washington, D.C. 20510

The Honorable Charles Schumer
Senate Minority Leader
United States Senate
S-221 U.S. Capitol
Washington, D.C. 20510

The Honorable Nancy Pelosi
Speaker of the House
U.S. House of Representatives
H-232, U.S. Capitol
Washington, D.C. 20515

The Honorable Kevin McCarthy
House Minority Leader
U.S. House of Representatives
H-204, U.S. Capitol
Washington, D.C. 20515

Dear Majority Leader McConnell, Minority Leader Schumer, Speaker Pelosi, and Minority Leader McCarthy:

As the United States continues to weather the disastrous coronavirus disease 2019 (COVID-19) pandemic, we write to ask that Congress take action to learn from the mistakes of our nation's preparation and response and lay the groundwork to prevent and mitigate future pandemics. The current Administration's response has exposed serious flaws in the country's ability to combat large scale public health challenges. In addition to passing a robust package to address the current crisis, we must take bold and comprehensive steps now to ensure the nation is better prepared for the next pandemic.

The COVID-19 pandemic has wreaked havoc on communities across the country and devastated the nation's economy. The United States (U.S.) leads the world with more than eight million confirmed cases and 220,000 dead, out of over one million worldwide.¹ Millions are out of work and struggling to make ends meet.² Despite the passage of *The Heroes Act* by the House of Representatives in May 2020 and an updated version in October 2020, the Senate has yet to pass a comprehensive COVID-19 relief bill. Congress must immediately act to provide meaningful support to the American people.

Even as Congress works to put an end to the current COVID-19 pandemic, it must also take steps, now, to prevent future pandemics from occurring. Our nation's bungled response to COVID-19 revealed significant weaknesses in the country's ability to rapidly respond to emerging global disease threats. As the U.S. confirmed its first cases, the Trump Administration

¹ Johns Hopkins University, "COVID-19 Dashboard," <https://coronavirus.jhu.edu/map.html>.

² Pew Research Center, "Unemployment rose higher in three months of COVID-19 than it did in two years of the Great Recession," Rakesh Kochhar, June 11 2020, <https://www.pewresearch.org/fact-tank/2020/06/11/unemployment-rose-higher-in-three-months-of-covid-19-than-it-did-in-two-years-of-the-great-recession/>.

failed to establish a robust testing strategy to adequately track and help contain the disease.³ As the virus continued to spread—disrupting schools, workplaces, places of worship, the economy, and most other aspects of life—it became evident the country was not at all prepared for such challenges to public health. It is clear that pandemics are already rapidly accelerating: animal-to-human outbreak prevalence grew six-fold from 1980 to 2010,⁴ and experts predict they will become even more common in the future.⁵ It is imperative Congress take bold and comprehensive steps now to prevent and mitigate future pandemics.

First, Congress must invest in domestic programs, systems, and supply chains that will help improve Americans’ health outcomes, combat the spread of new disease, and ramp up public health capacity during global health emergencies. The U.S. systemically underfunds public health. In 2017, public health spending accounted for just 2.5 percent of all health spending in the U.S.⁶ To boost our public health infrastructure, Congress must invest billions of dollars in state, local, territorial, and tribal health programs and commit to upgrading the data systems necessary to provide public health officials with the real-time, comprehensive information they need to guide public health responses. It must replenish and reform the Strategic National Stockpile so that it is prepared to handle the demand of a true national crisis, provide enhanced funding for state stockpiles, and invest in our domestic drug and device supply chains to ensure resilience and flexibility during global emergencies. It must provide more funding to the Indian Health Service and urban Indian health organizations. It must ensure the President seriously engages the advice of public health professionals by elevating the role of pandemic preparedness experts in the Executive Branch. Finally, it must invest in the support systems—such as safe, affordable housing—that are critical to boosting Americans’ health outcomes, reducing the incidence of chronic diseases and mental health disorders, and ensuring that communities can withstand the economic shocks of future pandemics.⁷

Second, Congress must support global public health efforts to identify and mitigate the spread of new diseases before they become global pandemics. Infectious diseases with the potential for global spread can emerge anywhere, with multiple recent pandemics arising on the continents of Asia and Africa.⁸ Despite the global nature of pandemics, the Trump Administration has backed away from an international agreement between 172 other countries to

³ Washington Post, “Trump administration pushing to block new money for testing, tracing and CDC in upcoming coronavirus relief bill,” Erica Werner and Jeff Stein, July 18, 2020, <https://www.washingtonpost.com/us-policy/2020/07/18/white-house-testing-budget-cdc-coronavirus/>; New York Times, “Trump Suggests Lack of Testing is No Longer a Problem,” Jonathan Martin, Maggie Haberman, and Mike Baker, March 30, 2020, <https://www.nytimes.com/2020/03/30/us/politics/trump-governors-coronavirus-testing.html>.

⁴ Wall Street Journal, “A Deadly Coronavirus Was Inevitable. Why Was No One Ready?” Betsy McKay and Phred Dvorak, August 13, 2020, <https://www.wsj.com/articles/a-deadly-coronavirus-was-inevitable-why-was-no-one-ready-for-covid-11597325213>.

⁵ ProPublica, “How Climate Change Is Contributing to Skyrocket Rates of Infectious Disease,” Abrahm Lustgarten, May 7, 2020, <https://www.propublica.org/article/climate-infectious-diseases>.

⁶ Trust for America’s Health, “The Impact of Chronic Underfunding of America’s Public Health System: Trends, Risks, and Recommendations, 2019,” <https://www.tfah.org/report-details/2019-funding-report/>.

⁷ Brookings Institution, “Strategies for increasing affordable housing amid the COVID-19 economic crisis,” Ingird Ellen, Erin Graves, Katherine O’Regan, and Jenny Schuetz, June 8, 2020, <https://www.brookings.edu/research/strategies-for-increasing-affordable-housing-amid-the-covid-19-economic-crisis/>.

⁸ US News, “Why So Many Epidemics Originate in Asia and Africa,” Suresh V. Kuchipudi, March 4, 2020, <https://www.usnews.com/news/best-countries/articles/2020-03-04/why-so-many-epidemics-originate-in-asia-and-africa>.

cooperatively develop vaccines and therapeutics for COVID-19,⁹ putting Americans at risk to be last-in-line for vaccines invented elsewhere.¹⁰ COVID-19 will not be stopped anywhere until it is stopped everywhere, and ensuring universal, speedy access to effective vaccines is essential. Moving forward, Congress must ensure the Administration protects the public by collaborating with the World Health Organization (WHO) and Gavi's global cooperative COVAX effort¹¹ and the Medicines Patent Pool, first supported by the Obama Administration.¹² Congress should also boost the U.S. government's financial commitments to international health organizations, including the WHO; increase and improve efficiency of U.S. global health investments; re-open and support federal public health offices abroad; provide financial support and training to partner countries to help improve emerging disease surveillance; and work with global partners to ensure countries across the world can adequately respond to public health emergencies like pandemics. It is imperative we develop and strengthen both health care systems and robust early warning systems that can identify, respond to, and stop diseases with pandemic potential before they spread. Congress must support reforms to U.S. global health programs to improve their effectiveness, efficiency and equity by supporting countries to strengthen health systems, which are required to defend against pandemics. Congress must also invest in robust data collection and inspections in the livestock and human medical sectors; support research and drug development; and boost antimicrobial stewardship to prevent the unnecessary use of antibiotics and combat antimicrobial resistance. Antibiotic-resistant superbugs are turning preventable diseases into incurable infections.¹³

Third, Congress must create at least 250,000 permanent, high-paying public health jobs to rebuild our depleted public health workforce and ensure the rapid deployment of contact tracers and other support workers during future pandemics. The U.S. is facing an estimated deficit of over 250,000 public health workers,¹⁴ and nearly 80 percent of U.S. counties with high rates of COVID-19 do not have an infectious disease physician.¹⁵ In advance of future pandemics, Congress must rebuild our public health, laboratory, and patient care workforce. These workers should execute key public health initiatives, such as contact tracing, testing

⁹Washington Post, "U.S. says it won't join WHO-linked effort to develop, distribute coronavirus vaccine," Emily Rauhala and Yasmeen Abutaleb, September 1, 2020, https://www.washingtonpost.com/world/coronavirus-vaccine-trump/2020/09/01/b44b42be-e965-11ea-bf44-0d31c85838a5_story.html; World Health Organization, "172 countries and multiple candidate vaccines engaged in COVID-19 vaccine Global Access Facility," August 24, 2020, <https://www.who.int/news/item/24-08-2020-172-countries-and-multiple-candidate-vaccines-engaged-in-covid-19-vaccine-global-access-facility>.

¹⁰ Washington Post, "U.S. says it won't join WHO-linked effort to develop, distribute coronavirus vaccine," Emily Rauhala and Yasmeen Abutaleb, September 1, 2020, https://www.washingtonpost.com/world/coronavirus-vaccine-trump/2020/09/01/b44b42be-e965-11ea-bf44-0d31c85838a5_story.html.

¹¹ World Health Organization, "172 countries and multiple candidate vaccines engaged in COVID-19 vaccine Global Access Facility," August 24, 2020, <https://www.who.int/news-room/detail/24-08-2020-172-countries-and-multiple-candidate-vaccines-engaged-in-covid-19-vaccine-global-access-facility>.

¹² The White House of President Barack Obama, "US Government First to Share Patents with Medicines Patent Pool," September 30, 2010, <https://obamawhitehouse.archives.gov/blog/2010/09/30/us-government-first-share-patents-with-medicines-patent-pool>.

¹³ Stat News, "Antibiotic resistance: the hidden threat lurking behind Covid-19," Julie L. Gerberding, March 23, 2020, <https://www.statnews.com/2020/03/23/antibiotic-resistance-hidden-threat-lurking-behind-covid-19/>.

¹⁴ Stat News, "A deficit of more than 250,000 public health workers is no way to fight Covid-19 (opinion)," Robin Taylor Wilson, Catherine L. Troisi, and Tiffany L. Gary-Webb, April 5, 2020, <https://www.statnews.com/2020/04/05/deficit-public-health-workers-no-way-to-fight-covid-19/>.

¹⁵ Annals of Internal Medicine, "Where is the ID in COVID-19" Rochelle P. Walensky, MD, MPH, Daniel P. McQuillen, MD, Sara Shahbazi, PhD, and John Do. Goodson, MD, October 6, 2020, <https://www.acpjournals.org/doi/10.7326/M20-2684>.

strategies, vaccine distribution, and disease surveillance, and should be prepared to deploy to support their communities with social support systems in public health emergencies. When the pandemic eases, this public health workforce should continue to work to reduce health disparities, improve health messages among their communities, and address the social determinants of health. Workers can be recruited from and serve their home communities, and they should be trained in alignment with best practices and consultation with state, territorial, tribal (including the Indian Health Service, tribal nations, tribal organizations, and urban Indian organizations), unions, community-based organizing groups, and local public health officials to ensure this workforce suits the needs of each community. Congress must ensure these workers have access to health and safety protections, can unionize, receive universal paid sick leave and family leave, and have access to health insurance and childcare services. Furthermore, Congress must take steps to mitigate the challenges—such as high rates of student loan debt and low job compensation¹⁶—that keep qualified individuals from seeking careers in public health.

Fourth, Congress must address the systemic racism and discrimination embedded in our health care system and pass legislation ensuring that health care treatments, pandemic countermeasures, vaccines, and primary disease prevention measures are accessible for all.

The COVID-19 pandemic has highlighted the devastating impact of systemic racism and discrimination on the health of the American people. In this country, Black and Latino people are nearly three times more likely to contract COVID-19 than white Americans and nearly five times more likely to be hospitalized.¹⁷ Most importantly, people of color are more likely to die from the virus.¹⁸ COVID-19 has also had a disproportionate impact on American Indians, Alaska Natives, and Native Hawaiians and Pacific Islanders.¹⁹ The economic crisis has also caused millions to lose their health insurance,²⁰ and many others with coverage still cannot afford care.²¹ This inequity is unconscionable, and Congress must take steps to mitigate health disparities and the socioeconomic disparities that undergird them. This includes ensuring that everyone in America has access to high-quality health care, mental health and substance use disorder treatment, and primary disease prevention measures, such as running water. It also means addressing the social determinants of health, like income inequality and unemployment, that affect millions of Americans and disproportionately impact communities of color.²² Congress

¹⁶ Stat News, “Public service loan forgiveness can help fix the shortage of primary care and rural physicians,” Marshall S. Runge, August 11, 2017, <https://www.statnews.com/2017/08/11/loan-forgiveness-primary-care-physician-shortage/>.

¹⁷ Centers for Disease Control and Prevention, “COVID-19 Cases, Hospitalization, and Death by Race/Ethnicity,” August 6, 2020, <https://www.cdc.gov/coronavirus/2019-ncov/downloads/covid-data/hospitalization-death-by-race-ethnicity.pdf>.

¹⁸ CNN, “These variables affect whether you live, die, or get help during the pandemic,” August 20, 2020, <https://www.cnn.com/2020/08/20/us/systemic-racism-coronavirus-pandemic-trnd/index.html>.

¹⁹ Centers for Disease Control and Prevention, “CDC data show disproportionate COVID-19 impact in American Indian/Alaska Native populations,” August 19, 2020, <https://www.cdc.gov/media/releases/2020/p0819-covid-19-impact-american-indian-alaska-native.html>.

²⁰ New York Times, “Millions Have Lost Health Insurance in Pandemic-Driven Recession,” Sheryl Gay Stolberg, July 13, 2020, <https://www.nytimes.com/2020/07/13/us/politics/coronavirus-health-insurance-trump.html>.

²¹ The Philadelphia Inquirer, “COVID-19 could make health care even more unaffordable for Americans, study finds,” Sarah Gantz, August 19, 2020, <https://fusion.inquirer.com/health/coronavirus/coronavirus-covid-19-health-care-insurance-affordability-20200819.html>.

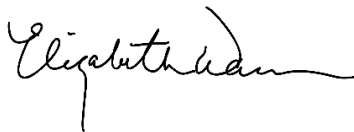
²² Economic Policy Institute, “Black workers face two of the most lethal preexisting conditions for coronavirus—racism and economic inequality,” Elise Gould and Valerie Wilson, June 1, 2020, <https://www.epi.org/publication/black-workers-covid/>; Economic Policy Institute, “Latinx workers—particularly women—face devastating job losses in the COVID-19 recession,” August 20, 2020, <https://www.epi.org/publication/latinx-workers-covid/>.

should also require companies developing or producing future pandemic countermeasures, therapeutics, and vaccines with federal funding to adhere to reasonable pricing requirements. It must also rebuild the public's trust in the health care system through efforts to boost vaccine confidence among communities skeptical of public health authorities.

Fifth, Congress must halt the environmental degradation that increases the likelihood of global pandemics. According to the CDC, three out of four new or emerging infectious diseases in people come from animals.²³ Environmental devastation, including “rampant deforestation, uncontrolled expansion of agriculture, intensive farming, mining and infrastructure development, as well as the exploitation of wild species,” is a key contributor to the problem, and has created “a ‘perfect storm’” for the accelerating rise of global pandemics.²⁴ This environmental degradation has a disproportionate impact on communities of color and Indigenous communities across the globe. In the United States, studies have shown that “racial disparities in exposure to environmental pollutants are greater factors that remain even after controlling for income” and that middle-class Black Americans “are exposed to much higher levels of industrial chemicals, air pollution and poisonous heavy metals, as well as pathogens, than are profoundly poor white people” across urban and rural areas.²⁵ The COVID-19 pandemic has demonstrated this exposure can increase these communities' vulnerability to future pandemics. Congress must act to end wildlife trafficking, prohibit the import of commodities linked to illegal deforestation, and provide funding to protect forests around the world. Doing so is one of the biggest steps²⁶ the United States can take to prevent zoonotic transmission of disease that is one of the root causes of pandemics. These actions can also create a level playing field for companies that follow the rules. Put simply, we must take advantage of win-win opportunities like these to combat climate change, eliminate race and socioeconomic disparities, partner with Indigenous People and local communities in the U.S. and abroad to protect and restore land and water resources, and prevent dangerous practices—including deforestation—contributing to the spread of zoonotic diseases with pandemic potential.

Taking these bold steps will ensure the U.S. is better prepared for any future pandemic and can avert the devastation caused by COVID-19. We look forward to working with you to develop, introduce, and pass meaningful legislation to improve the nation's response to global pandemics and reduce the likelihood that they will occur.

Sincerely,



Elizabeth Warren
United States Senator



Ro Khanna
Member of Congress

²³ Centers for Disease Control and Prevention, “Zoonotic Diseases,” <https://www.cdc.gov/onehealth/basics/zoonotic-diseases.html>.

²⁴ The Guardian, “Halt destruction of nature or suffer even worse pandemics, say world's top scientists,” April 27, 2020, <https://www.theguardian.com/world/2020/apr/27/halt-destruction-nature-worse-pandemics-top-scientists>.

²⁵ Nature, “How environmental racism is fueling the coronavirus pandemic,” Harriet A. Washington, May 19, 2020, <https://www.nature.com/articles/d41586-020-01453-y>.

²⁶ Scientific American, “Stopping Deforestation Can Prevent Pandemics,” June 1, 2020, <https://www.scientificamerican.com/article/stopping-deforestation-can-prevent-pandemics/>.

Senate Cosigners

Sen. Jeff Merkley
Sen. Angus King
Sen. Edward J. Markey
Sen. Richard Blumenthal
Sen. Michael F. Bennet
Sen. Tammy Baldwin
Sen. Cory A. Booker
Sen. Chris Van Hollen
Sen. Bernard Sanders
Sen. Kirsten Gillibrand
Sen. Ben Cardin
Sen. Tina Smith
Sen. Diane Feinstein
Sen. Christopher S. Murphy
Sen. Ron Wyden
Sen. Sherrod Brown
Sen. Mazie Hirono

House Cosigners

Rep. Barbara Lee
Rep. Max Rose
Rep. Katie Porter
Rep. Wm. Lacy Clay
Rep. Raúl M. Grijalva
Rep. Rashida Tlaib
Rep. Andy Levin
Rep. Lloyd Doggett
Rep. David N. Cicilline
Rep. Adriano Espaillat
Rep. Steve Cohen
Rep. Paul Tonko
Rep. Eleanor Holmes Norton
Rep. Jerrold Nadler
Rep. Dwight Evans
Rep. Mark Takano
Rep. Mark DeSaulnier
Rep. Earl Blumenauer
Rep. Daniel T. Kildee
Rep. Jim Cooper
Rep. Pramila Jayapal
Rep. Ayanna Pressley
Rep. Susan Davis
Rep. Judy Chu
Rep. Madeleine Dean
Rep. Grace F. Napolitano
Rep. Mary Gay Scanlon

Rep. Mark Pocan
Rep. Donna Shalala
Rep. Marcy Kaptur
Rep. Joe Courtney
Rep. Gregory Meeks
Rep. Joe Neguse
Rep. Alan Lowenthal
Rep. Grace Meng
Rep. Nydia M. Velázquez
Rep. Susan Wild
Rep. Julia Brownley
Rep. James P. McGovern
Rep. Ted Deutch
Rep. Peter Welch
Rep. Joseph D. Morelle
Rep. Mike Doyle
Rep. Henry C. “Hank” Johnson, Jr.
Rep. Brendan F. Boyle
Rep. William R. Keating
Rep. Yvette D. Clarke
Rep. Brenda L. Lawrence
Rep. Jamie Raskin
Rep. Debbie Dingell
Rep. John Larson
Rep. Joseph P. Kennedy, III
Rep. Darren Soto
Rep. Juan Vargas
Rep. Gerald E. Connolly
Rep. Jackie Speier
Rep. Joyce Beatty
Rep. Jan Schakowsky
Rep. Suzanne Bonamici
Rep. Bennie G. Thompson
Rep. Stephen F. Lynch
Rep. Carolyn B. Maloney
Rep. Sheila Jackson Lee
Rep. Denny Heck
Rep. André Carson
Rep. Chellie Pingree
Rep. Danny K. Davis
Rep. Henry Cuellar
Rep. Bonnie Watson Coleman
Rep. Betty McCollum
Rep. Deb Haaland
Rep. Andy Kim
Rep. Bill Foster
Rep. Lori Trahan

Rep. Jerry McNerney
Rep. Nanette Diaz Barragán
Rep. Al Green
Rep. Bobby Rush
Rep. Tim Ryan
Rep. Joaquin Castro
Rep. Donald M. Payne, Jr.
Rep. Jesús G. "Chuy" García
Rep. Karen Bass
Rep. Raja Krishnamoorthi
Rep. Adam Smith
Rep. David E. Price
Rep. Peter A. Defazio
Rep. Albio Sires
Rep. Val B. Demings
Rep. Emanuel Cleaver, II
Rep. Mike Thompson
Rep. Eric Swalwell
Rep. Robin L. Kelly
Rep. C.A. Dutch Ruppersberger
Rep. Alma S. Adams. Ph.D
Rep. José E. Serrano
Rep. Seth Moulton
Rep. Bradley S. Schneider
Rep. Mike Quigley
Rep. Katherine Clark
Rep. Cedric Richmond
Rep. J. Luis Correa
Rep. Alcee L. Hastings
Rep. Ruben Gallego
Rep. Linda Sanchez
Rep. Alexandria Ocasio-Cortez
Rep. Donald S. Beyer Jr.
Rep. Jared Huffman
Rep. Jimmy Panetta
Rep. Derek Kilmer
Rep. Ami Bera, M.D.
Rep. Jahana Hayes
Rep. Veronica Escobar
Rep. Ted W. Lieu
Rep. Ann Kirkpatrick
Rep. Gregorio Kilili Camacho Sablan
Rep. Vicente Gonzalez
Rep. Tom Malinowski
Rep. Scott Peters
Rep. Hakeem Jeffries
Rep. Brad Sherman
Rep. TJ Cox