March 3, 2022

Director Rochelle Walensky
Centers for Disease Control and Prevention

Dear Director Walensky:

The undersigned individuals and organizations write in response to the February 25, 2022 changes to the masking guidelines put forth by the Centers for Disease Control and Prevention (CDC). As you are aware, tens of millions of disabled, chronically ill, immunocompromised, people of color, and older people in the United States have been disproportionately impacted by COVID-19 and still face substantially elevated risk of severe illness or death. We urge the CDC to revise the new guidance to address the needs of high risk people and recommend that everyone wear N-95s or the highest quality masks available in indoor public settings including schools.

The CDC's new guidance no longer recommends that the general public wear masks indoors, including unvaccinated people and people who have not received boosters, if they live in newly defined “Low” or “Medium” COVID-19 Community Level areas, and only recommends masks in schools in counties with “High” COVID-19 Community Levels. The new criteria for community risk levels reflect admissions and hospital capacity, but deprioritize case counts and do not look at transmission rates or other factors that would quickly register changes in risk. Despite acknowledging that some disabled, chronically ill, immunocompromised, people of color, and older people require additional protections, the new guidance does not address the needs of disabled people and older adults–as well as children with and without disabilities under five who are still not eligible for vaccines. This new guidance will not work for these communities and places us, and our friends and families in danger.

While we share the country’s relief as COVID cases and deaths drop from the peak of the latest wave, we have seen this pattern before. When protections that are key to lowering transmission, such as universal masking, are removed too soon after a peak and before low transmission is demonstrably sustained, new variants emerge, causing cases to spike and putting the lives of all Americans – particularly disabled, chronically ill, immunocompromised, people of color, and older people – at greater risk once again. Pandemic policy must recognize that the most effective way to protect the general public is to prioritize those most at risk in all aspects of policy and guidance. Without that focus, it will be impossible to get ahead of the virus in the long-term, end the pandemic, and stabilize the economy. And Long COVID cases resulting from even “mild” infections will continue to rise, with life-altering consequences for hundreds of thousands of people and strain on our health and long-term services and support systems that are not equipped to handle this mass-disabling event. Bureau of Labor Statistics (BLS) data already shows that in 2021 alone, we added around 1.2 million more disabled adults to our communities. This is more than any other time on record for BLS and does not even take into account the children who have become disabled. Only once case counts and transmission rates have dropped and universal vaccines are available will the pandemic end.
Until that time, all individuals, including people with disabilities, have a right to fully participate in their communities without putting their health and lives at risk. As young children remain ineligible to receive vaccines, people with disabilities and people of color face continuing barriers in accessing vaccines, and millions of immunocompromised individuals are unable to access COVID treatments due to inadequate supply, universal indoor masking remains necessary for the public health of our nation. The new guidance which will drastically reduce indoor masking at this time is contrary to the White House and the CDC’s stated goal to protect our community and will exacerbate inequities that lead to our further segregation and cause an even higher risk of severe disease and death.

Masking provides crucial protection for many people with disabilities, including those who may not be able to mount a robust immune response to vaccination and those who may be unable to receive the vaccine or boosters because of medical contraindication or young age. For the small number of people with disabilities who cannot wear a mask due to their disability, consistent indoor masking by the general public provides an additional layer of protection. While the relaxed guidance does not apply to health care or congregate living settings, as we have conveyed repeatedly to the CDC and White House, the current masking guidance for health care settings is insufficient and has left many disabled, chronically ill, immunocompromised, people of color, and older people unable to safely go to medical professionals’ offices and unsafe in congregate settings. We support universal indoor masking with the most protective masks as a necessary protection to prevent and reduce spread and ensure that people with disabilities and high-risk health conditions can be fully included in their communities, attend school and access health facilities, as is their civil right. This is particularly the case for people with disabilities who rely on direct support workers who come in and out of their homes from the community and for those living in congregate settings.

As you said in a meeting with some of our organizations on January 21, 2022, “I no longer want a report on inequities, I want to do something about them.” In order to enact an equitable vision of pandemic recovery that centers communities most at risk, we ask the CDC to recommend that everyone wear N-95s or the highest quality masks available in indoor public settings including schools.

Sincerely,

American Association of People with Disabilities
Autistic Self Advocacy Network
Be A Hero
Disability Rights Education & Defense Fund
Justice in Aging
Little Lobbyists
The Arc of the United States
Mia Ives-Rublee, Disability Justice Advocate
Matthew Cortland, Disability Justice Advocate
504 Democratic Club
A Better Balance
Advancing Health Equity
American Council of the Blind
American Foundation for the Blind
American Geriatrics Society
Association of People Supporting Employment First (APSE)
Association of Programs for Rural Independent Living
Association of University Centers on Disabilities
Autistic Women & Nonbinary Network
Bazelon Center for Mental Health Law
Body Politic
Brain Injury Association of America
Californians for Safe Schools
Caring Ambassadors Program
Center for Public Representation
Chinese-American Planning Council (CPC)
Christopher & Dana Reeve Foundation
CommunicationFIRST
Council of Parent Attorneys and Advocates
Count US IN
COVID Survivors for Change
COVID-19 Longhauler Advocacy Project
Davis Phinney Foundation for Parkinson's
Detroit Disability Power
Disability Policy Consortium
Disability Rights California
Disability Rights Center of Kansas
Disability Rights Florida
Disability Rights Maine
Disability Rights Michigan
Disability Rights New York
Disability Rights North Carolina
Disability Rights Wisconsin
Doctors for America
EndCoronavirus
Family Voices
Family Voices NJ
Family Voices of ND
Federation for Children with Special Needs
Freedom from Covid Facebook Group
Fund for Community Reparations for Autistic People of Color's Interdependence, Survival, & Empowerment
Health Care Voices
Health Justice
HUNE
Independent Living Resource Center San Francisco
Indiana Protection & Advocacy Services Commission / Indiana Disability Rights
Indiana Statewide Independent Living Council (INSILC)
Justice James Consulting / The World Health Network
Maine Parent Federation
Marked By Covid
Metropolitan Parent Center, Sinergia Inc
Michigan Parent Alliance for Safe Schools
National Academy of Elder Law Attorneys
National Action Network Disabilities Committee New York Chapter
National Association of Councils on Developmental Disabilities
National Association of Social Workers (NASW)
National Center for Parent Leadership, Advocacy, and Community Empowerment (National PLACE)
National Center on Deaf-Blindness
National Coalition for Latinxs with Disabilities (CNLD)
National Council on Independent Living
National Disability Rights Network (NDRN)
National Disabled Law Students Association (NDLSA)
National Down Syndrome Congress
National Health Law Program
National Network for Long COVID Justice
NC Alliance for School Equity and Safety
Neighborhood Access
New England Complex Systems Institute
Not Dead Yet
Organic Acidemia Association
Partnership for Inclusive Disaster Strategies
Patient-Led Research Collaborative
PAVE
Progress Center for Independent Living
Progressive Doctors
RespectAbility
Restore Unto Holiness Ministries
Robin Cogan
Safe Schools for Everyone
San Diegans for Safe Schools
Santee Parents for Immunocompromised Children
Senior and Disability Action
SPAN Parent Advocacy Network (SPAN)
The 145th Street Alliance
The Coelho Center for Disability Law, Policy and Innovation
The Myalgic Encephalomyelitis Action Network (#MEAction)
The Parents' Place of MD
Torrey Pines Elementary School Foundation
True North Research
United Cerebral Palsy
Vermont Family Network
We All Rise
Well Spouse Association
World Health Network / Covid Action Group
World Institute on Disability

CC: Jeffery Zients, White House Coronavirus Response Coordinator; Xavier Becerra, Secretary of the Department of Health and Human Services

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