

EXPERIENCES OF VULNERABLE POPULATIONS DURING DISASTER

(116-62)

REMOTE HEARING

BEFORE THE
SUBCOMMITTEE ON
ECONOMIC DEVELOPMENT, PUBLIC BUILDINGS, AND
EMERGENCY MANAGEMENT

OF THE
COMMITTEE ON
TRANSPORTATION AND
INFRASTRUCTURE
HOUSE OF REPRESENTATIVES

ONE HUNDRED SIXTEENTH CONGRESS

SECOND SESSION

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JULY 28, 2020
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U.S. House of Representatives
Washington, DC 20515

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JULY 24, 2020

SUMMARY OF SUBJECT MATTER

TO: Members, Subcommittee on Economic Development, Public Buildings, and Emergency Management
FROM: Staff, Subcommittee on Economic Development, Public Buildings, and Emergency Management
RE: Subcommittee Hearing on “Experiences of Vulnerable Populations During Disaster”

PURPOSE

The Subcommittee on Economic Development, Public Buildings, and Emergency Management will meet on Tuesday, July 28, 2020, at 10:00 a.m. in 2167 Rayburn House Office Building and via Cisco Webex, to receive testimony on “Experiences of Vulnerable Populations During Disaster.” At the hearing, Members will receive testimony directly from witnesses who work to address hardships of several populations disproportionately impacted during disaster. The Subcommittee will hear from the Partnership for Inclusive Disaster Strategies, the National Low Income Housing Coalition, the Institute for Diversity and Inclusion in Emergency Management, and the Second Harvest Community Food Bank. This hearing will serve as a venue for this Subcommittee to hear from groups working on behalf of some of the larger vulnerable communities in the United States on how they are impacted during disasters, but it is not meant to be an exhaustive group speaking on behalf of all vulnerable communities.

BACKGROUND

Disasters of varying forms and intensities strike this Nation randomly and without prejudice to the people impacted. Disaster survivors may experience varying degrees of impact and assistance as a result of their race, creed, color, ethnicity, physical or mental ability, and socio-economic standing.¹ Federal agencies providing disaster relief are subject to a clear nondiscrimination clause in the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act, P.L. 93–288, as amended).² Further, Title VI of the Civil Rights Act (P.L. 88–352) and the subsequent

¹ Wilson, Charley E., Phillip M. Singer, Melissa S. Creary, and Scott L. Greer. “Quantifying inequities in US federal response to hurricane disaster in Texas and Florida compared with Puerto Rico,” *available at* <https://gh.bmj.com/content/4/1/e001191>; Hamel, Liz, Bryan Wu, and Mollyann Brody. “An Early Assessment of Hurricane Harvey’s Impact on Vulnerable Texans in the Gulf Coast Region: Their Voices and Priorities to Inform Rebuilding Efforts,” Kaiser Family Foundation, December 5, 2017, *available at* <https://www.kff.org/other/report/an-early-assessment-of-hurricane-harveys-impact-on-vulnerable-texans-in-the-gulf-coast-region-their-voices-and-priorities-to-inform-rebuilding-efforts/>.

² 42 U.S.C. 5151.

Americans With Disabilities Act (ADA, P.L. 101–336) provide additional assurances that should eliminate disparities in assistance, but there are many examples where varying types of assistance are delayed, denied, or simply not disbursed equitably to disaster-impacted populations.³

Hurricane Katrina in August 2005 was a perfect storm with respect to its outside impacts on vulnerable communities. In a November 2005 report shortly following the storm, the Congressional Research Service (CRS) wrote the following regarding social impacts of the storm:

“Hurricane Katrina likely made one of the poorest areas of the country even poorer. Among those displaced by the storm, many lost their homes, material possessions, and jobs. Some had insurance to replace their material property losses, received help from FEMA or Small Business loans to get by on an emergency basis or replace property, or received unemployment insurance or disaster unemployment insurance to replace lost wages. However, some who lived in the areas most impacted by the storm may now be destitute; while having financially gotten by before the storm, in the storm’s aftermath they may have joined the ranks of the poor. Further, the socio-economic profile of the areas hardest hit by Katrina indicates that these newly poor would join a population that was already disproportionately poor and disadvantaged. Before the storm, the 700,000 people acutely affected by Katrina were more likely than Americans overall to be poor; minority (most often African-American); less likely to be connected to the workforce; and more likely to be educationally disadvantaged (i.e., not having completed a high school education). Both those who were poor before the storm, and those who have become poor following the storm, are likely to face a particularly difficult time in reestablishing their lives, having few if any financial resources upon which to draw.”⁴

While Stafford Act Section 308 was in effect at the time of Hurricane Katrina, the 2005 hurricane season brought to light some of the discrepancies in Federal disaster planning and assistance for vulnerable communities, including disproportionate death and adverse impacts for many.⁵

Statutory changes in the Post-Katrina Emergency Management Reform Act (P.L. 109–295, Title VI) led to the re-establishment of the Federal Emergency Management Agency (FEMA) as an agency focused on the total cycle of preparedness, prevention, response, recovery, and mitigation. Additionally, the legislation specifically called for the establishment of the Office of Disability Integration and Coordination at FEMA to work to ensure that communities with access and/or functional needs were incorporated into planning assumptions for hazard events.⁶

During the next several years, emergency management significantly transformed at the Federal level to improve upon the very public response and recovery shortcomings from the 2005 storms. Perhaps the most significant foundational development was the issuance of Presidential Policy Directive-8 (PPD–8) and its focus on bolstering national preparedness.⁷ PPD–8 led to the National Response Framework, the Recovery Framework, as well as a formal FEMA-led shift to a whole-of-community approach to emergency management, intended to ensure that emergency managers and planners were not only working in concert with other organizations that play key roles during the response and recovery phases of an event, but also to ensure that there was an almost “universal design” to the programs and policies being reviewed, updated, or developed.⁸ Such an approach would ensure that disaster survivors would not necessarily need to seek special accommodations if they required them during an evacuation, seeking shelter, or seeking other assistance; the whole-of-community approach would take these needs into consideration as planning or op-

³ See footnotes 1, 5, 18, 21, and 31.

⁴ Congressional Research Service, “Hurricane Katrina: Social-Demographic Characteristics of Impacted Areas”, November 4, 2005. Available at <https://crsreports.congress.gov/product/pdf/RL/RL33141>.

⁵ Barnshaw, John, Joseph Trainor. Race, Class, and Capital Amidst the Hurricane Katrina Diaspora, 2007; Farber, Daniel A. “Disaster Law and Inequality,” *Law & Inequality: A Journal of Theory and Practice*, 2007, available at <https://scholarship.law.umn.edu/cgi/viewcontent.cgi?article=1122&context=lawineq>.

⁶ P.L. 109–295, Subtitle A, Sec. 611.

⁷ Presidential Policy Directive 8—National Preparedness. <https://www.dhs.gov/presidential-policy-directive-8-national-preparedness>.

⁸ Federal Emergency Management Agency, “A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action”, December 2011. Available at https://www.fema.gov/media-library-data/20130726-1813-25045-0649/whole_community_dec2011_2.pdf.

erations were underway so the survivor’s experience would be as seamless as possible.⁹

In 2016, there was a clear focus on a whole-of-community construct to emergency planning and management, including joint guidance released in August by the U.S. Departments of Justice, Health and Human Services, Housing and Urban Development, Homeland Security, and Transportation, as well as follow-up from DHS specifically to FEMA grantees in December.¹⁰ Unfortunately, there were examples during Hurricanes Harvey, Irma, Maria, and the ongoing COVID–19 pandemic that have highlighted areas where the Federal government, as well as state, local, tribal, and territorial governments, could improve support for vulnerable communities before, during, and after disasters.¹¹

EMERGENCY MANAGEMENT WORKFORCE DOES NOT REFLECT SOCIETY

Significant research and thought has focused on the impacts and costs of disasters, as these events have increased in number and severity, and have had greater societal impact. This includes work to identify inequities of disaster assistance for vulnerable populations—people and communities of color, of lower socio-economic standing, of differing levels of physical or mental ability or access, of limited English proficiency, and Native Americans.¹²

Self-examinations of the emergency management workforce at most levels of government—Federal, State, and local—have identified a relatively homogenous workforce and a need to recruit a more representative set of individuals into the emergency management workforce to better serve the needs of the whole community during the entirety of the emergency management cycle.¹³

SELECT CHALLENGES FACED BY VULNERABLE POPULATIONS BEFORE, DURING, AND AFTER DISASTER

As noted above, vulnerable populations often face additional hurdles in obtaining Federal disaster assistance, but there are also hurdles for these populations before, during, and after a disaster.

Before Disaster

Advocates for various vulnerable populations—notably the National Association for the Advancement of Colored People (NAACP),¹⁴ National Council on Disability,¹⁵ Partnership for Inclusive Disaster Strategies¹⁶—have stressed the importance of the whole-of-community approach to pre-disaster planning and resilience-building. Unfortunately, in countless disasters in the years since Katrina, shortcomings in response and recovery for these populations have cited failures in meaningful engagement and planning, or abandonment or waiving pre-disaster plans due to the sever-

⁹Id.

¹⁰U.S. Department of Justice, “Federal Agencies Issue Joint Guidance to Help Emergency Preparedness, Response and Recovery Providers Comply with Title VI of the Civil Rights Act”, August 16, 2016. Available at <https://www.justice.gov/opa/pr/federal-agencies-issue-joint-guidance-help-emergency-preparedness-response-and-recovery>; U.S. Department of Homeland Security, “Notice to Recipients on Nondiscrimination During Disasters”, December 5, 2016. Available at <https://www.dhs.gov/publication/notice-recipients-nondiscrimination-during-disasters>.

¹¹U.S. Government Accountability Office, “FEMA Action Needed to Better Support Individuals Who Are Older or Have Disabilities”, June 5, 2019. Available at <https://www.gao.gov/products/GAO-19-318>.

¹²See footnotes 1, 5, 18, 21, and 31; Urban Institute. “Improving the Disaster Recovery of Low-Income Families,” available at <https://www.urban.org/debates/improving-disaster-recovery-low-income-families>.

¹³Trotter, Brittany. “Diversity in Emergency Management and the New Normal,” March 18, 2016, available at www.fema.gov/blog/2016-03-18/diversity-emergency-management-and-new-normal; Holdeman, Eric. “More Diversity Is Needed in Emergency Management.” *Government Technology—Emergency Management*, September 19, 2014, available at www.govtech.com/em/training/More-Diversity-Needed-Emergency-Management-Opinion.html; Laine, John, and Ellis Stanley. “Diversity and Emergency Management.” International Association of Emergency Managers, October 2013. Available at <https://www.iaem.org/portals/25/documents/Diversity-and-EM-2013.pdf>.

¹⁴NAACP, “In the Eye of the Storm: A People’s Guide to Transforming Crisis and Advancing Equity in the Disaster Continuum,” September 2018, available at https://live-naacp-site.pantheonsite.io/wp-content/uploads/2018/09/NAACP_InTheEyeOfTheStorm.pdf.

¹⁵NCD, “Effective Emergency Management: Making Improvements for Communities and People with Disabilities.” August 12, 2009. Available at <https://ncd.gov/publications/2009/Aug122009>.

¹⁶Roth, Marcie, June Isaacson Kailes, and Melissa Marshall, J.D. “Getting It Wrong: An Indictment with a Blueprint for Getting It Right,” Partnership for Inclusive Disaster Strategies, May 2018, available at https://disasterstrategies.org/wp-content/uploads/2018/08/5-23-18_After_Action_Report_-_May_2018.pdf.

ity of events, resulting in ongoing frustrations with whether and how pre-disaster planning is executed during an actual hazard event.¹⁷

Beyond the scope of this Subcommittee’s jurisdiction, yet still within Congress’ purview given the Federal nexus, research has questioned whether inadequate regulations and procedures before and after storms contribute to disproportionate harms to low-income communities and communities of color in the wake of natural disasters, demonstrating clear discrepancies in the wake of Hurricane Harvey between communities of vulnerable people and non-vulnerable populations.¹⁸

During Disaster

Given that roughly 26% of American adults are classified as having a disability, one of the most impacted vulnerable populations during disaster are those with disabilities and other access and functional needs.¹⁹ Failure to accommodate for basic needs of this population—including things like ensuring shelters have accessible bathrooms, accessible entrances, access to a refrigerator for medications, and backup power for powering any medical devices—has often led to these individuals being placed into medical environments such as rehabilitation centers, nursing homes, psychiatric institutions, assisted living facilities, or other long-term care facilities.²⁰ This creates inconvenience and inequity.

More broadly, vulnerable populations in the path of disaster—including the disabled—may lack the resources to evacuate. This could be due to a suspension of public transportation or a lack of funds to pay for fuel; more than 100,000 residents of New Orleans did not evacuate from the path of Katrina for many of these reasons.²¹ Being forced to ride out a hazard event because there are inadequate resources exponentially increases the likelihood that there may be a need for greater resources after disaster strikes.

After Disaster

In 2017 and 2018, Americans witnessed shortfalls in disaster assistance for vulnerable communities impacted by catastrophic hurricanes and wildfires, particularly FEMA’s Individuals and Households Program (IHP), or Individual Assistance (IA). An antiquated land-titling infrastructure and non-traditional system of passing home ownership in Puerto Rico shed light on some of these inequities, which persists during recovery from the 2020 earthquakes on the island.²² Unable to demonstrate ownership, survivors were denied Federal assistance or received less than they would have were they able to prove ownership.²³ In wildfire-ravaged communities in California, people already experiencing homelessness, subject to choking air quality and stifling heat, were denied FEMA assistance because, “[u]nless people are made homeless by a declared disaster, assistance for pre-disaster homelessness does not fall within the rules, policies, and guidance for eligibility to receive Stafford Act assistance,” a FEMA spokesperson wrote to Jefferson Public Radio in southwest Oregon.²⁴

As part of its work examining issues requested by this Committee and others during the supplemental appropriation process to provide additional relief for powerful

¹⁷Perry, David M. “America Is Not Ready for Disability Disaster Response in the Coming Hurricane Season,” June 1, 2018, *available at* <https://psmag.com/environment/disability-disaster-response-in-2018-hurricane-season>.

¹⁸Sherwin, Brie. “After the Storm: The Importance of Acknowledging Environmental Justice in Sustainable Development and Disaster Preparedness,” Spring 2019, *available at* <https://scholarship.law.duke.edu/cgi/viewcontent.cgi?article=1362&context=delpf>.

¹⁹“Disability Impacts All of Us,” September 9, 2019, *available at* <https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html>.

²⁰McKay, Jim. “People with Disabilities Often Face ‘Institutionalization’ During Disasters,” May 31, 2019, *available at* <https://www.govtech.com/em/preparedness/People-with-Disabilities-Often-Face-Institutionalization-During-Disasters.html>.

²¹Barnshaw, John, Joseph Trainor. *Race, Class, and Capital Amidst the Hurricane Katrina Diaspora*, 2007; Farber, Daniel A. “Disaster Law and Inequality,” *Law & Inequality: A Journal of Theory and Practice*, 2007, *available at* <https://scholarship.law.umn.edu/cgi/viewcontent.cgi?article=1122&context=lawineq>.

²²Garci, Ivis. “The Lack of Proof of Ownership in Puerto Rico Is Crippling Repairs in the Aftermath of Hurricane Maria,” American Bar Association, February 21, 2020, *available at* https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/vol-44-no-2-housing/the-lack-of-proof-of-ownership-in-puerto-rico-is-crippling-repair/.

²³Vigliucci, Andres. “They Lost Homes During Hurricane Maria, But Didn’t Have Deeds. FEMA Rejected Their Claims,” Miami Herald, September 20, 2018, *available at* <https://www.miamiherald.com/news/nation-world/national/article217935625.html>.

²⁴Erllich, April. “After Wildfires, Homeless People Left Out Of Federal Disaster Aid Programs,” September 24, 2019, *available at* <https://www.opb.org/news/article/fema-disaster-aid-wildfires-homeless-people/>.

2017 hurricane and wildfire seasons, the Government Accountability Office released its findings that:

“aspects of the process to apply for assistance from FEMA after the 2017 hurricanes were challenging for older individuals and those with disabilities . . . disability-related questions in the registration materials are confusing and easily misinterpreted. For example, FEMA’s registration process does not include an initial question that directly asks individuals if they have a disability or if they would like to request an accommodation for completing the application process . . . While FEMA has made efforts to help registrants interpret the questions, it has not yet changed the language of the questions to improve clarity. As a result, individuals with disabilities may not have requested accommodations or reported having disabilities, which may have hindered FEMA’s ability to identify and assist them.”²⁵

This is particularly troubling given that the Centers for Disease Control and Prevention (CDC) reports that 61 million adult Americans—or 26%—live with at least one disability.²⁶

The Subcommittee has met with the Disaster Housing Research Consortium—researchers from several public universities who conduct significant research utilizing Federal datasets, primarily from the Census Bureau—frustrated with FEMA’s willingness to share disaster survivor registrant data with them for research purposes.²⁷ What disaster survivor data has been released by FEMA regarding its Individual Assistance program, has been limited in scope compared to the total universe of disaster survivors who have sought Federal assistance from the Agency. The National Council on Disability has expressed similar concerns in a letter to former FEMA Administrator Brock Long.²⁸ That said, there is limited yet repeated, evidence over several years and geographically disparate disaster-impacted communities to inform some social science research and analysis into access to FEMA assistance and recoveries of individuals and communities.²⁹

While there may be Federal statute, regulation, and policy crafted to prevent discrimination in emergency management, the construct of locally-executed, state-managed, and Federally-supported emergency management experiences discussed above show that some communities are more attuned to addressing the needs of vulnerable populations than others as a result of practice, resources, awareness, or past experience.

CONCLUSION

When examining the disparities of assistance in disaster-impacted communities, salaried, home-owning, insured disaster survivors are more likely to have an easier time applying for FEMA disaster assistance and often also qualify for tax rebates and Small Business Administration assistance above and beyond initial FEMA grants.³⁰

The disparities touched upon above may also contribute to widening wealth inequality following disasters for these vulnerable communities. One study, conducted by researchers at Rice University and the University of Pittsburgh, found significant correlation of increasing wealth inequality in counties receiving FEMA-administered disaster assistance in times before and after disaster struck along the lines of race, education, and homeownership.³¹ This exacerbates a widening gap in family wealth

²⁵ U.S. Government Accountability Office, “FEMA Action Needed to Better Support Individuals Who Are Older or Have Disabilities”, June 5, 2019. *Available at* <https://www.gao.gov/products/GAO-19-318>.

²⁶ CDC, “Disability Impacts All of Us”, September 9, 2019. *Available at* <https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html>.

²⁷ T&I EDPB&EM staff-level meetings with Disaster Housing Research Consortium. February 12, 2019 and March 2, 2020.

²⁸ National Council on Disability, Letter to FEMA Administrator Long Regarding Disaster Management, April 10, 2018, *available at* <https://ncd.gov/publications/2018/ncd-letter-fema-administrator-long-regarding-disaster-management>.

²⁹ See footnotes 1, 5, 18, 21, and 31.

³⁰ Hersher, Rebecca, and Robert Benincasa. “How Federal Disaster Money Favors The Rich.” National Public Radio, March 5, 2019. *Available at* www.npr.org/2019/03/05/688786177/how-federal-disaster-money-favors-the-rich; Frazee, Gretchen. “How Natural Disasters Can Increase Inequality.” Public Broadcasting Service, April 11, 2019. *Available at* www.pbs.org/newshour/economy/making-sense/how-natural-disasters-can-increase-inequality.

³¹ Howell, J. & Elliott, J.R. “Damages Done: The Longitudinal Impacts of Natural Hazards on Wealth Inequality in the United States.” August 14, 2018. *Available at* <https://doi.org/10.1093/socpro/spy016>.

while the United States is concurrently experiencing more and costlier natural disasters.³²

This Subcommittee hearing will explore where there may be room for further congressional guidance to FEMA and reforms to Stafford Act to address these challenges so that vulnerable populations—before, during, and after disaster—are treated with equity and receive proper assistance commensurate to address their needs.

WITNESS LIST

- Curtis Brown, State Coordinator of Emergency Management, Virginia Department of Emergency Management, Testifying on Behalf of the Institute for Diversity and Inclusion in Emergency Management
- Chad Higdon, CEO, Second Harvest Community Food Bank
- Marcie Roth, Executive Director and CEO, World Institute on Disability
- Diane Yentel, President and CEO, National Low Income Housing Coalition

³²Congressional Budget Office, “Trends in Family Wealth, 1989 to 2013.” August 18, 2016. Available at www.cbo.gov/publication/51846; Congressional Budget Office, “Expected Costs of Damage from Hurricane Winds and Storm-Related Flooding,” April 10, 2019, available at <http://www.cbo.gov/publication/55019>.

EXPERIENCES OF VULNERABLE POPULATIONS DURING DISASTER

TUESDAY, JULY 28, 2020

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON ECONOMIC DEVELOPMENT, PUBLIC
BUILDINGS, AND EMERGENCY MANAGEMENT,
COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE,
Washington, DC.

The subcommittee met, pursuant to call, at 10:07 a.m., in room 2167 Rayburn House Office Building and via Webex, Hon. Dina Titus (Chairwoman of the subcommittee) presiding.

Ms. TITUS. The subcommittee will come to order. Thank you to our tech folks for getting us all connected. I ask unanimous consent that the chair be authorized to declare recess at any time during today's hearing. Without objection, so ordered. I also ask unanimous consent that Members not on the subcommittee be permitted to sit with the subcommittee at today's hearing and ask questions. Without objection, so ordered.

Since this is a hybrid meeting, I want to remind Members of key regulations of the House Committee on Rules to ensure that the hearing goes smoothly. Members must be visible on screen for purposes of identification when joining the hearing. Members must also continue to use the video function of today's software platform, Cisco Webex, for the remainder of the time they are attending this hearing unless they're experiencing connectivity issues or some other technical problems.

If a Member is experiencing any kind of technical problems, please inform the committee's staff as soon as possible so you can receive assistance. A chat function is available for Members on the Cisco Webex platform for this purpose, or you can call the committee's main phone line at 202-225-4472 for technical assistance by phone.

Members may not participate remotely in any other proceeding that may be occurring simultaneously. It's the responsibility of each Member seeking recognition to unmute their microphone prior to speaking. To avoid any inadvertent background noise like dogs barking or babies crying, I request that every Member keep their microphone muted when not seeking recognition to speak. Should I hear any inadvertent background noise, I will respectfully request that the Member please mute the microphone.

Finally, despite this being a hybrid hearing, I want to emphasize that all the standard rules of decorum apply. As the chair of today's hearing, I will make a good faith effort to provide every Member experiencing these connectivity issues an opportunity to fully

participate in the proceedings. Members will have the standard 5 minutes to ask questions. To insert a document into the record, please have your staff email it to the committee's clerk, Mike Twinchek. This hearing is also being livestreamed for the public to view.

Before we get started today, I want to recognize the loss of our friend and colleague, Congressman John Lewis. John Lewis dedicated his life to service to this Nation and to the goal of a more perfect union. He famously said, "When we see something that is not right, not fair, not just, you have to speak up. You have to say something; you have to do something."

It's in that spirit that we hold today's hearing, which focuses on the experiences of vulnerable and underserved populations during disasters. Disaster survivors experience varying degrees of both impact and assistance as a result of factors such as race, ethnicity, gender identity or expression, immigration status, physical or mental ability, and socioeconomic status.

As is often the case in this country, the most vulnerable among us are the most adversely affected during times of hardship. We are certainly seeing this play out in communities across the country with respect to ongoing disaster recovery and the coronavirus pandemic. The continued failures by our emergency preparedness apparatus at every level of Government to account for the well-being of certain communities prior to, during, and in the wake of disasters, and right now, these are just unacceptable and must be addressed.

Take several examples of the problem. Whether it's due to underfunded public transportation or insufficient means to pay for a personal vehicle, fuel, or alternate means of shelter, vulnerable populations in the path of disaster often lack the resources to evacuate. Second problem, while taking refuge in congregate sheltering during a storm, individuals with disabilities or mobility issues frequently face accessibility challenges due to a lack of proper accommodations.

Third, some of our most vulnerable populations continue to be overlooked or neglected by existing FEMA programs. For instance, in the wildfire ravaged communities in California, people experiencing homelessness were told by FEMA that they were not eligible for sheltering assistance to escape heat and smoke under the Stafford Act, because their homelessness was a pre-existing condition.

During this subcommittee's hearing back in March with FEMA Administrator Gaynor, we raised some of these concerns. I noted then that FEMA's Office of Disability Integration and Coordination was established over a decade ago during the post-Katrina Emergency Management Reform Act. We thought this would address some of the issues.

But the current administration's attention to and engagement with people with disabilities is lackluster to say the least. It is appropriate that we have this hearing today, because just this past Sunday marked the 30th anniversary of the enactment of the Americans with Disabilities Act.

We have done a good job when it comes to improving conditions for those with disabilities. I'm proud of the U.S. when I travel internationally. Much has been accomplished, but much needs to be

accomplished, and it's troubling when we consider how far we need to go to live up to the intent of this landmark legislation.

I'd like to conclude by saying that the spectrum of vulnerable communities represented by witnesses today is by no means exhaustive, but we hope that they can provide some perspective so that we might take a step towards making disaster response efforts and assistance more inclusive, more just, more fair, and more right.

[Ms. Titus' prepared statement follows:]

Prepared Statement of Hon. Dina Titus, a Representative in Congress from the State of Nevada, and Chairwoman, Subcommittee on Economic Development, Public Buildings, and Emergency Management

Before we get started today, I want to recognize the loss of our friend and colleague, Congressman John Lewis.

Congressman Lewis dedicated his life in service to this nation and to the goal of a more perfect union.

He famously said, "When you see something that is not right, not fair, not just, you have to speak up. You have to say something; you have to do something."

It is in that spirit that we hold today's hearing, which focuses on the experiences of vulnerable and underserved populations during disasters.

Disaster survivors experience varying degrees of impact and assistance as a result of factors such as race, ethnicity, gender identity or expression, immigration status, physical or mental ability, and socio-economic status.

As is the case too often in this country, the most vulnerable among us are the most adversely affected during times of hardship. We're seeing this play out in communities across the United States with respect to ongoing disaster recovery and the coronavirus pandemic.

The continued failures by our emergency preparedness apparatus at every level of government, to account for the well-being of certain communities prior to, during, and in the wake of disasters is unacceptable and must be addressed.

Whether it's due to underfunded public transportation; or insufficient means to pay for a personal vehicle, fuel, and alternative means for shelter; vulnerable populations in the path of disaster often lack the resources to evacuate.

While taking refuge in congregate sheltering during a storm, individuals with disabilities or mobility issues frequently face accessibility challenges due to a lack of proper accommodations.

For instance, in wildfire-ravaged communities in California, people experiencing homelessness were told by FEMA that they were not eligible for sheltering assistance to escape heat and smoke under the Stafford Act because their homelessness was a pre-existing condition.

Some of our most vulnerable populations continue to be overlooked or neglected by existing FEMA programs.

During this Subcommittee's hearing back in March with FEMA Administrator Gaynor, we raised some of these concerns.

I noted then that FEMA's Office of Disability Integration and Coordination was established over a decade ago by the Post-Katrina Emergency Management Reform Act, but the Trump Administration's attention to and engagement with people with disabilities is lackluster to say the least.

Just this past Sunday we recognized the 30th anniversary of enactment of the Americans With Disabilities Act.

Yet, it is troubling when you consider how far the federal government still has to go to live up to the intent of this landmark legislation and do right by people with disabilities.

I'd like to conclude by saying that the spectrum of communities represented by our witnesses today is by no means exhaustive, but we hope they can provide some perspective so that we might take a step forward in making disaster response efforts and assistance more inclusive, more right, more fair, and more just.

Ms. TITUS. With that, I thank you, and I would yield to the minority leader.

Mr. KATKO. Thank you, Madam Chair.

Thank you today for the witnesses that are joining us remotely. Before I start my comments, I wanted to just take a brief second to honor the life and the legacy of John Lewis.

John and I became friendly at my first State of the Union Address where I showed up 10 minutes beforehand thinking I was going to have a seat. And remarkably, the seat right next to him was open, so I sat down, and we started talking, and became friends. And one time, a reverend came down from Syracuse. I said, John, would you just say hello to him? He idolizes you. And John said, yeah, sure. Of course. He then said, come on back to my office. Brought us back to his office, canceled his appointments, and spent 1½ hours with the reverend, just showing him everything in his office and talking about the history and what he's been through in his life, and he couldn't have been more gracious and humble and he impacted that individual—that pastor's life immensely, and it's just a small example of the kind of person he was, and the gentle spirit he was, and the great leader he was.

So, I commend him to the afterlife here, but I also commend him for a life well lived, and an example that we can all follow, and I miss him already.

I'd like to begin by bringing specific attention to important work that is being done in my district to support vulnerable populations amid the COVID-19 pandemic. Organizations like Vera House, AccessCNY, the Food Bank of Central New York, and so many others are working hard to maintain services in our community during this disaster. These organizations provide critical services to vulnerable members of our community, including our seniors, survivors of domestic violence and sexual assault, individuals with disabilities, and families struggling with mental health issues.

To provide a snapshot of the historic challenges these organizations face, the Food Bank of Central New York saw a 20-percent increase in households utilizing their services in the month of March alone. This translates to the distribution of 1.9 million pounds of food, 500,000 additional pounds compared to the food bank's typical monthly distribution.

This increased demand persists, and is indicative of the unprecedented nature of this crisis. Unfortunately, these conditions are being felt all across the United States. Americans are responding to the COVID-19 pandemic, as well as flooding, storms, and wildfires across the country. In many cases, these challenges are on top of ongoing recovery efforts from prior disasters. In all of this, it is critically important that all communities are prepared for and recover from disasters.

To be successful, lawmakers must work to plan for and address the needs of the most vulnerable among us. These efforts are not only essential to saving lives, but to helping impacted areas put the pieces back together quickly. To this end, Congress has enacted significant reform over the years, including the post-Katrina Act, the Sandy Recovery Improvement Act, and more recently, the Disaster Recovery Reform Act.

Each of these bills and others included provisions intended to help the most vulnerable. In DRRRA, for example, we ensured those

with disabilities could be eligible for additional assistance to ensure the repaired homes are accessible.

We expanded FEMA's flexibility for temporary housing solutions, and we clarified eligibility for food banks. We also worked to update and improve the agency's public alerting system, IPAWS, to ensure capabilities are in place to reach persons with disabilities and those with limited English proficiency.

And we continued examining ways where FEMA's process can be simplified and streamlined to reduce administrative hurdles for eligible applicants. Ultimately, we must ensure our emergency management system works for everyone. Today, I look forward to hearing from our witnesses on what is working, and where we still need improvement. I also want to welcome for the first time Mr. Garcia of California to our subcommittee, and I look forward to working with him on these and other issues.

[Mr. Katko's prepared statement follows:]

Prepared Statement of Hon. John Katko, a Representative in Congress from the State of New York, and Ranking Member, Subcommittee on Economic Development, Public Buildings, and Emergency Management

I would like to begin by bringing specific attention to important work that is being done in my district to support vulnerable populations amid the COVID-19 pandemic. Organizations like Vera House, ACCESS CNY, the Foodbank of Central New York, and so many others are working hard to maintain services in our community during this disaster.

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To this end, Congress has enacted significant reforms over the years—including the Post-Katrina Act, the Sandy Recovery Improvement Act, and more recently the Disaster Recovery Reform Act (DRRA). Each of these bills and others included provisions intended to help the most vulnerable.

In DRRA, for example, we ensured those with disabilities could be eligible for additional assistance to ensure their repaired homes are accessible, we expanded FEMA's flexibility for temporary housing solutions, and we clarified eligibility for food banks. We also worked to update and improve the nation's public alerting system—IPAWS—to ensure capabilities are in place to reach persons with disabilities and those with limited English proficiency. And, we continue to examine ways where FEMA's process can be simplified and streamlined to reduce administrative hurdles for eligible applicants.

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I also want to welcome Mr. Garcia of California to our subcommittee and look forward to working with him on these and other issues.

Mr. KATKO. And in that, Madam Chair, I yield back.

Ms. TITUS. Thank you, Ranking Member Katko. I don't believe that our chairman of the full committee, Mr. DeFazio, is here, nor Mr. Sam Graves who is the ranking member, so we'll go straight to our witnesses' testimony.

I'd like to now welcome the witnesses on our panel. They represent great expertise, and we're looking forward to hearing from them. Mr. Curtis Brown, who is the State coordinator of emergency management with the Virginia Department of Emergency Management; he's going to be testifying on behalf of the Institute for Diversity and Inclusion in Emergency Management.

Mr. Chad Higdon, who is the CEO of Second Harvest Community Food Bank, and I know he's had an association with Three Square in Las Vegas. Ms. Marcie Roth, executive director and CEO of the World Institute on Disability, and Ms. Diane Yentel, president and CEO of the National Low Income Housing Coalition.

We want to thank you for participating today. We look forward to your testimony. Without objection, our witnesses' full statements will be included in the record. Since your written testimony has been made a part of the record, the subcommittee requests that you limit your oral testimony to 5 minutes. So, we'll proceed with the testimonies.

Mr. Brown, we look forward to hearing from you first.

TESTIMONY OF CURTIS BROWN, STATE COORDINATOR OF EMERGENCY MANAGEMENT, VIRGINIA DEPARTMENT OF EMERGENCY MANAGEMENT, TESTIFYING ON BEHALF OF THE INSTITUTE FOR DIVERSITY AND INCLUSION IN EMERGENCY MANAGEMENT; CHAD HIGDON, CHIEF EXECUTIVE OFFICER, SECOND HARVEST COMMUNITY FOOD BANK; MARCIE ROTH, EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER, WORLD INSTITUTE ON DISABILITY; AND DIANE YENTEL, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NATIONAL LOW INCOME HOUSING COALITION

Mr. BROWN. Thank you. Good morning, Chairwoman Titus, Ranking Member Katko, and members of the subcommittee. I appreciate the opportunity to discuss the disproportionate impacts on at-risk communities, and solutions for addressing systemic and structural inequities in disaster management. My name is Curtis Brown, and I am an emergency manager and cofounder of the Institute for Diversity and Inclusion in Emergency Management.

I-DIEM was created to increase diversity in the profession, and to promote the integration of equity for at-risk and marginalized people and communities, and to all aspects of emergency management practices. My approach to providing testimony and recommendations today is based on research data with a keen understanding that the equitable implementation of disaster policies would address the continuous losses currently left unaddressed after each disaster.

Political leaders, policymakers, and emergency managers can no longer turn a blind eye to the recurring disproportionate impact of disasters on vulnerable populations. FEMA and the entire emergency management enterprise—Federal, State, local, nonprofit, and private—must drastically improve. The COVID-19 disaster once

again brings to light the glaring disparities that continue to entrap far too many communities of color in continuous cycles of tragedy and loss. COVID-19 is disproportionately affecting black, indigenous, Hispanic, Latino, and other people of color the most.

What are the experiences of vulnerable populations during disasters? Unfortunately, the answer to that question is the same as it has been for quite some time. With examples of mass fatalities and economic loss throughout the 20th century, and the first 20 years of this one, there are numerous documented examples of disaster inequities resulting in negative impacts for communities of color, underserved communities, and people with disabilities whose needs have not been consistently integrated in disaster preparedness mitigation response and recovery efforts. Whether the disaster is a pandemic or an extreme weather event, one thing is consistently true.

The most vulnerable individuals of communities will disproportionately suffer disaster impacts, fatalities, injuries both physical and psychological, infrastructure damage and loss, and economic decline which contributes to widening wealth inequality. Nationwide, black people are dying of COVID-19 at 2.5 times the rate of white people.

Considering flooding risks, research has found that a higher share of the population living in the combined flood plain identified as Hispanic and Latino. The fatality rate of people with disabilities has been found to be two to four times higher than the general population. Unaddressed systemic and structural racism and inequitable discriminatory economic policies are the root causes for creating and enhancing vulnerability faced by at-risk and marginalized communities.

Environmental injustices have located toxic facilities in and around communities of color contributing to the concentration of black and brown people with the same underlying health conditions that make COVID-19 so fatal. Integrating equity into emergency management and prioritizing the needs of the most vulnerable will produce numerous benefits, including limiting fatalities and injuries, reducing disaster costs, and improving the effectiveness and efficiency of emergency management operations. We have to commit to disaster equity, and prioritize the needs of the most vulnerable in legislation, policies, practices, plans, and funding programs.

We must commit to dismantling systemic and structural inequities in disaster preparedness mitigation response and recovery to reverse the current trend of disproportionate impacts. Unfortunately, these numerous disaster events in lives lost have not prompted a major change in existing emergency management approaches. It has become painfully clear that effective emergency management practices require a new equitable approach that prioritizes those most in need.

As we celebrate the life and significant contributions to civil rights of Congressman John Lewis, let his legacy serve as a motivation to promote efforts to finally and fundamentally address the systemic and structural inequities that continue to negatively impact marginalized people and communities by integrating equity into emergency management. Thank you, Chairwoman Titus, and

I look forward to offering recommendations and answering any questions from the committee.

[Mr. Brown's prepared statement follows:]

Prepared Statement of Curtis Brown, State Coordinator of Emergency Management, Virginia Department of Emergency Management, testifying on behalf of the Institute for Diversity and Inclusion in Emergency Management

Good morning, Committee Chairman Peter A. DeFazio, Committee Ranking Member Sam Graves, Subcommittee Chairman Dina Titus, Subcommittee Ranking Member John Katko and members of the Subcommittee. My name is Curtis Brown; and I am the co-founder of the Institute for Diversity and Inclusion in Emergency Management (I-DIEM). I-DIEM was created to diversify the profession of emergency management and to promote the integration of equity into all aspects of emergency management practices to improve disaster outcomes for those most vulnerable. Last month, Governor Ralph Northam appointed me State Coordinator of Emergency Management at the Virginia Department of Emergency Management. Throughout my career, I have worked closely on issues related to emergency management, resilience-building and diversity, equity and inclusion. I appreciate the opportunity to provide testimony on the experiences of vulnerable populations before, during, and after disasters and the responsibility for lawmakers, public policy leaders, and emergency managers on all levels of government to make changes in order to fundamentally address the systemic and structural inequities that continue to negatively impact marginalized people and communities.

I-DIEM's mission is to serve as a resource and an advocate for the value of diversity and inclusion in emergency management (EM). I-DIEM leads efforts to increase representation of women and people of color in the field of emergency management, including in positions of leadership, through awareness and education. I-DIEM serves as the conduit for research on diversity and inclusion (D&I), social equity, and the practical application of equitable EM practices to improve outcomes and build resilience. Our approach to providing our comments and recommendations is based on data with a keen understanding of equitable implementation within disaster policies to support individuals and communities disproportionately impacted by disasters. Long-term change can only occur by educating and training the emergency management enterprise on diversity, inclusion and equity issues as it relates to women, people of color, people with disabilities, LGBTQ, various religious beliefs, rural, low-income, disadvantaged communities, and other underrepresented groups within each phase of emergency management (preparedness, mitigation, response, recovery). I-DIEM believes that leveraging and integrating diversity, inclusion, and equity will produce numerous benefits including limiting fatalities and injuries, increasing trust in government, building response and recovery capacity, reducing disaster costs, improving the effectiveness and efficiency of disaster operations, and building long-term resilience.

LONG STRUGGLE FOR SOCIAL JUSTICE AND EQUITY CONTINUES

Last week America lost two great leaders of the Civil Rights movement. Congressman John Lewis and Reverend C.T. Vivian each dedicated their lives to the work of social justice and the fight against racism. Both men risked their lives in order to end discriminatory laws and practices that terrorized African Americans. Their resolve along with many other civil rights leaders during a critical time in our nation's history led to dramatic changes that resulted in the expansion of rights for African Americans that were long delayed due to sanctioned and legal discrimination such as Jim Crow laws. All Americans benefit from their work because we live in a more just society, but more work remains. The fight for civil rights during that pivotal time provides a great roadmap for today's efforts to address systemic and structural racism that remains deeply embedded in every public policy area, including in emergency management. The ongoing impact of the COVID-19 disaster has demonstrated, once again, that disasters disproportionately impact Black, Indigenous, People of Color (BIPOC), low-income, and people with disabilities. Both primary impacts such as fatalities and COVID-19 cases and the numerous secondary negative economic (i.e. unemployment) and health impacts have ravaged marginalized individuals and communities. Sadly, this disproportionate impact of disasters on vulnerable populations is no surprise. It is consistent theme with a long narrative that requires urgent and intentional action. The 20th and 21st centuries

have numerous examples of disaster inequities resulting in the loss of life to BIPOC, low-income, and people with disabilities who have consistently not benefitted from disaster preparedness, mitigation, response, and recovery efforts. The recent murder of George Floyd has awakened a new sense of activism across the country intended to dismantle both the symbols and the systemic policies and practices of inequities that continue to entrap marginalized communities of color, people with disabilities, low income and marginalized individuals and communities.

THE ISSUE: DISPROPORTIONATE IMPACT OF DISASTERS ON MARGINALIZED INDIVIDUALS AND COMMUNITIES

Whether the disaster is a pandemic or natural, one thing is consistently true, the most vulnerable individuals and communities will be disproportionately impacted due to existing inequities. Numerous natural disasters indiscriminately have impacted large swaths of the United States over the last decade but the resulting impacts continue to reveal inequities. These disasters continue to demonstrate the need for emergency planners and key decision-makers to understand how historical and existing exclusionary and discriminatory practices increase the risks and impact of disasters on specific individuals and communities. Those most vulnerable are consistently not prioritized in disaster planning or allocated sufficient resources during recovery. Years of biased “community development” segregated communities of color to higher risk areas have contributed to creating distrust in government. Emergency management officials have a responsibility to integrate equity into preparedness and response to disasters by understanding the unique vulnerabilities and limitations of communities. There should be a clear recognition that the vulnerability of the community was heightened due to discriminatory policies and these communities will need the more support during a disaster.

Preparedness efforts directed to at-risk BIPOC communities prior to COVID-19’s onslaught in the United States were slow and disjointed. Clear and accurate emergency information regarding the seriousness of the threat was lacking. Black and Brown communities represented a large percentage of the essential workforce but access to essential personal protective equipment was unavailable. Public awareness messaging regarding social distancing failed to take into consideration cultural differences and living conditions of diversity communities. Data regarding the disproportionate impact of the pandemic on people of color was not regularly collected further delaying mitigation efforts. Consistent fumbled response efforts reaffirm the belief that systemic and structural issues exist within emergency management.

“*Social Equity*” is defined as the fair, just and equitable management of all institutions serving the public directly or by contract, and the fair and equitable distribution of public services, and implementation of public policy, and the commitment to promote fairness, justice, and equity in the formation of public policy (Standing Panel on Social Equity in Governance of the National Academy of Public Administration). Inequitable policies have led to the congregation of marginalized individuals in communities across the country. Equitable emergency planning is required due to the rising frequency of extreme weather caused by climate change and disproportionate impacts based on systemic biases.

Emergency planning must understand the historic and existing barriers that create and enhance vulnerability. Disasters act as “shocks” to communities amplifying and exacerbating the existing inequities experienced by those lacking resources and excluded from “mainstream” disaster planning. Further contributing to the issue is the lack of diversity within the profession of emergency management from a racial and gender perspective. This lack of diversity combined by a failure to integrate cultural competence and fully understanding and respecting the unique attributes of communities has resulted in a disconnect leading to non-inclusive and inequitable emergency plans. The negative impact on emergency management results in preparedness, mitigation, prevention, response, and recovery plans consistently falling short of meeting the needs of those individuals and communities requiring the most support. As noted in FEMA’s 2019 *Building Cultures of Preparedness: Report of the Emergency Management Higher Education Community*, “to meet the challenge, professionals in the field of emergency management must better understand the communities, peoples, and varied populations that they hope will become “better prepared.” The report also states that, “these households are not at risk simply due to their exposure when disaster threatens; they live in a state of permanent emergency resulting from socio-economic conditions and marginality that make each day precarious.” Recognition of the causality of vulnerability and intentional inclusion of diverse stakeholders is required in order to improve emergency planning and outcomes.

In recent years, numerous research findings have identified inequity as the root cause for vulnerability which results in disproportionate and sometimes fatal impacts for marginalized people include:

- *“Communities of color and other frontline communities tend to live in the most at-risk environments and are more vulnerable to the negative impacts of these kinds of events due to a range of preexisting factors.”* (Source: NAACP In the Eye of the Storm: A People’s Guide to Transforming Crisis & Advancing Equity in the Disaster Continuum, Page 9, 2019)
- *“These households are not at risk simply due to their exposure when disaster threatens; they live in a state of permanent emergency resulting from socio-economic conditions and marginality that make each day precarious.”* (Source: FEMA Building Cultures of Preparedness: Report of the Emergency Management Higher Education Community, Page 8, 2019)
- Researchers found “a consistent pattern over a 30-year period of placing hazardous waste facilities in neighborhoods where poor people and people of color live”. (Source: 2016 University of Michigan and University of Montana)
- 3 out of 4 neighborhoods “redlined” on government maps 80 years ago continuing to struggle economically. (Source: 2018 National Community Reinvestment Coalition)
- The vast majority of neighborhoods marked “hazardous” in red ink on maps drawn by the federal Home Owners’ Loan Corp. from 1935 to 1939 are today much more likely than other areas to comprise lower-income, minority residents. (Source: 2018 National Community Reinvestment Coalition)
- People in lower income brackets often live in the most vulnerable housing and lack the resources to undertake recommended loss-reduction or evacuation measures. (Source: Insurance Institute for Business & Home Safety)
- *“People with disabilities may be unable to undertake self-protective actions before, during or after disasters”.* According to a 2006 Census Bureau report commissioned by the National Institute on Aging, almost 20% of the U.S. population age 65 and older report some level of disability.” (Source: Insurance Institute for Business & Home Safety)
- *“Low-income individuals and families often live in lower cost homes that are less able to withstand disasters.”* (Source: Insurance Institute for Business & Home Safety)
- *“As sea levels rise, each of the 23 coastal states in the contiguous US faces the loss of residential and commercial properties and frequent flooding of populated areas, posing new challenges for all communities and adding particular stressors for communities of color and low-income and working-class communities.”* (Source: Underwater: Rising Seas, Chronic Floods, and the Implications for US Coastal Real Estate, Union or Concerned Scientist, 2018)
- *“Additionally, wildfire vulnerability is spread unequally across race and ethnicity, with census tracts that were majority Black, Hispanic or Native American experiencing ca. 50% greater vulnerability to wildfire compared to other census tracts.* Embracing a social-ecological perspective of fire-prone landscapes allows for the identification of areas that are poorly equipped to respond to wildfires.” (Source: The unequal vulnerability of communities of color to wildfire, Ian P. Davies, Ryan D. Haugo, James C. Robertson, Phillip S. Levin, 2018)
- *“So when natural disasters pour, literally, trillions of gallons of water onto largely Black and Latinx cities surrounded by oil and gas refineries, don’t blame Mother Nature; blame institutions, historic and systemic racism, and the people behind these institutions, systems, and history.”* (Source: 5 Reasons Why Natural Disasters Screw Over People of Color, Yessenia Funes, 2017)
- *“Extreme weather events impact the most vulnerable in a multiplicity of ways. In the days before, poorer people have less opportunities to evacuate as they may not have anywhere to go, cannot afford a motel out of town, or do not have a car to drive there.”* (Source: Hurricane Harvey was a natural disaster, but a man-made catastrophe that will hurt the poor the most, Andrew Buncombe, 2017)
- Prioritizing adaptation actions for populations that face higher risks from climate change, including low-income and marginalized communities, may prove more equitable and lead, for instance, to improved infrastructure in their communities and increased focus on efforts to promote community resilience that can improve their capacity to prepare for, respond to, and recover from disasters. (Source: Fourth National Climate Assessment, Volume II Impacts, Risks, and Adaptation in the United States, Page 55, 2018)
- *“Results indicate that as local hazard damages increase, so does wealth inequality, especially along lines of race, education, and homeownership. At any given level of local damage, the more aid an area receives from the Federal Emer-*

gency Management Agency, the more this inequality grows. These findings suggest that two defining social problems of our day—wealth inequality and rising natural hazard damages—are dynamically linked, requiring new lines of research and policy making in the future.” (Source: *Damages Done: The Longitudinal Impacts of Natural Hazards on Wealth Inequality in the United States*, Rice U., University of Pittsburgh, 2018)

- “Compared to the overall U.S. population, a higher share of the population living in the combined floodplain identified as Hispanic. 25% of the population living in the combined floodplain identified as Hispanic, as compared to 17% nationally”. (Source: *Populations in the Floodplain*, NYU Furman Center, 2018)
- *Finding 1: Natural disaster-affected areas in 2016 and 2017 differed from the U.S. overall, in notable ways:*
 - FEMA-designated disaster zip codes contained a higher share of individuals who identify as Hispanic or African American.
 - These zip codes were also more likely to contain individuals who were foreignborn and speak a language other than English at home.
- *Finding 3: Disasters struck small firms across the age and income spectrum, but losses were concentrated among Hispanic-owned firms and firms in the retail and leisure & hospitality industries*
- 54% of Hispanic-owned firms in affected areas reported natural disaster-related losses, compared to 40% of White-owned firms and 35% of Black or African American owned firms. (Source: 2017 Small Business Credit Survey (SBCS), Federal Reserve Banks)

ROOT CAUSE OF VULNERABILITY: SYSTEMIC RACISM AND HISTORY OF NEGATIVE IMPACTS/EXAMPLES OF PAST AND PRESENT INEQUITABLE IMPACTS (EXPLAINING WHY THERE ARE DISPROPORTIONATE IMPACTS)

The COVID-19 disaster has once again brought to light the glaring disparities that continue to entrap far too many communities of color in a continuous cycle of tragedy and loss. Institutional racism serves as the fuel that creates the inequities that combust when disasters strike. Discriminatory economic and social policies are the root cause for the vulnerability faced by marginalized communities. Decades of divestments have created impoverished communities across the country that lack basic necessities including affordable, safe, and adequate housing. Federal and State guidance to “socially distance” to limit the spread of COVID-19 is difficult when systemic racism has confined impoverished families to occupy incredibly small living spaces. Environmental injustices have located toxic facilities in and around communities of color contributing to concentration of Black and Brown people with the same “underlining health conditions” (asthma, cancer, etc) that makes COVID-19 so fatal.

LACK OF DIVERSITY AND REPRESENTATION

The profession of emergency management’s lack of diversity with representation of people of color and women within its ranks prevents the field from rising to the great disaster challenges of the present and tomorrow. Research and labor data indicates that an overwhelming number of individuals, designated as “Emergency Managers” are white males. But several studies have been released over the last decade that confirms the positive impact of diversity on organizational performance. Private sector companies increase profits with more women and people of color throughout their organization, especially in positions of leadership. Though not studied as much, the impact of diversity in public service positions, such as emergency management, produces similar positive results. Racial diversity within the EM workforce improves decision-making, reduces “blind spots” errors by leveraging new perspectives, and results in better performance and improved outcomes. Within emergency management, a more diverse workforce would ensure that emergency operation and preparedness plans are inclusive and equitably consider the unique needs of communities of color. More representation of people of color in emergency management would increase the likelihood for investing greater mitigation funding into communities that have historically been divested and has contributed to increased vulnerability. A more diverse network of emergency managers at the decision-making table and in senior leadership roles would promote better response decisions such as allocating equitable resources to communities most in need and possessing the cultural competence to effectively engage diverse communities. Short-term and long-term recovery would be improved by the participation of people of color that have a connection to the communities most impacted. Simply put, diversity in emergency management will help to reverse the existing failure to enact equitable practices before, during, and after disasters.

RECOMMENDATIONS FOR INTEGRATING EQUITY TO SUPPORT AT-RISK POPULATIONS

Dismantling the systemic and structural inequities in each phase of emergency management (preparedness, mitigation, response, and recovery) requires significant commitment, resources, and time. The inequities have been embedded and institutionalized for many years so the solutions will not be quick and require more than “lip service” or “check the box” efforts that do nothing more than further institutional inequitable practices. I-DIEM’s hope is that the COVID-19 disaster and recent focus on equity by a broader audience will lead to dramatic and fundamental changes to all aspects of disaster management. The entire Emergency Management Enterprise (Federal, State, local, non-profit, and private) must prioritize and embed equity as a core part of all its responsibilities. Emergency management leaders should be held accountable with performance measures aligned to equitable practices and outcomes. Emergency managers are unable to make sustained changes alone. Political leaders on all levels of government must provide the resources and prioritize equity as critical function of government.

There have been positive actions taken in recent years to embed equity into emergency management which serve as great examples or implementation nationally. The Commonwealth of Virginia created a Health Equity Working Group (HEWG) as a key component of the COVID-19 Unified Command (UC) response. Led by a multi-agency leadership team that includes representatives from the Governor’s Chief Diversity Office, Virginia Department of Health–Office of Health Equity, and Virginia Department of Emergency Management, the Health Equity Working Group was initially created at the beginning of the COVID-19 response due to the recognition of inequitable impacts and the need to embed equity into all aspects of the disaster response. The Health Equity Working Group reports directly to the UC leadership and have designed innovative programs to support those most in need. The purpose of HEWG is to apply a health equity lens to the Commonwealth of Virginia’s COVID-19 response by proactively and reactively:

- Identifying and prioritizing resources and decision points impacting marginalized and at-risk individuals and communities.
- Supporting intentional inclusion of the needs of at-risk and marginalized individuals and communities within each working group related to preparedness, mitigation, response, and recovery.

In Houston, officials are integrating equity into flood protection efforts by prioritizing communities of color which have historically excluded from mitigation efforts in the past. City officials are removing the normal cost-benefit ratio that has prioritized more valuable housing properties which tended to only benefit wealthy and white areas. Instead of prioritizing spending to protect the most valuable properties, that tended to exclude communities of color, the intentional focus and priority has been placed to target communities “that would have the hardest time recovering, including communities of color” (Source: A Climate Plan in Texas Focuses on Minorities. Not Everyone Likes It. Christopher Flavelle. New York Times, 7/24/29). This type of bold mitigation action is necessary due to the increasing number of extreme weather events due to climate change that will disproportionately impact vulnerable communities. Funding priorities should focus on the communities most in need. Dedicating pre-disaster mitigation funding in the most at-risk areas will reduce cost long-term and improve disaster outcomes.

Below are several recommendations for sustainably integrating equity into each phase of emergency management:

- Integrate Diversity, Inclusion, and Equity as Foundational Goal and Responsibility of Emergency Management.
- Prioritize Vulnerable and Underserved Populations in all planning and grant programs.
- Thoroughly review all current emergency management laws and policies through an equity lens, including identifying the intended and unintended effects of current policies on marginalized on individuals and communities.
- Integrate equity and cultural competence into the current FEMA doctrine, training and educational programs, including incentivizing equity in grants programs, to influence sustainable changes throughout the Emergency Management Enterprise.
- Integrate diversity, equity, and inclusion, and information on disproportionate impacts of disasters into FEMA’s planning, exercises, guidance and priorities.
- Include the addition of equity-related performance measures in emergency management grants and other funding requirements.
- Invest in innovative technology to conduct predictive modeling to identify potential inequitable outcomes.

- Ensure continuous use of Social Vulnerability Assessments and Community Engagement to identify and understand the needs of vulnerable individuals and communities.
- Commitment to enhance efforts to promoting diversity within the Emergency Management Profession by increasing the number of people of color and women, especially in positions of leadership.
- Leverage Diversity, Equity, and Inclusion experts and engage marginalized communities when making any changes to policies and plans.
- Increase the number of Small, Minority, and Woman-owned Businesses in FEMA procurement opportunities
- Fund efforts to increase research and improve datasets on equity and disproportionate impacts of disasters

STAFFORD ACT CHANGES

The Robert T. Stafford Disaster Relief and Emergency Assistance Act provide critical support to states, tribes, and local governments when a federal emergency declaration is issued. Since its creation in the 1950s, the Stafford Act has evolved based on increasing disasters, failures, and lessons learned. The next evolution of the Stafford Act should intentionally focus on equity and disproportionate impacts of disasters to eliminate any barriers that negatively impacts vulnerable individuals and communities.

- Require equitable delivery of Stafford Act services equitably.
- FEMA updates policy guidance for the Building Resilient Infrastructure and Communities (BRIC) program to dedicate the majority of funding to support marginalized communities that will be disproportionately during disasters
- Better leverage FEMA’s Office of Civil Rights to ensure equity is integrated into the delivery of all Stafford Act related response, recovery, and mitigation programs.
- Equitably adjust caps for federal assistance to recognize that at-risk individuals and communities need more support for longer periods of time.
- Create additional provision so FEMA can provide equitable support for long-term housing recovery efforts.
- FEMA should ensure match requirements are equitable and consider the limited resources of different stakeholders
- Provide additional support or allow under-resourced local governments to follow State Procurement requirements instead of 44 CFR since many lack adequate number of staff capable to navigate all the requirements.
- Ensure the integration of equity into the delivery public assistance and individual assistance program to provide additional resources and support for vulnerable communities.
- Eliminate the preference for homeowners in the Individual Assistance Program which has been found to be biased against communities of color and contributes to the expansion of wealth inequality.
- Ensure FEMA equitably considers the diverse resource, capacity, and limitations of communities its support and has resources and authority to provide additional support.

THE FIERCE URGENCY OF NOW

Fifteen years have passed since Hurricane Katrina battered New Orleans resulting in over 3,000 fatalities, mostly within the Black community. Since then there are have been other major natural disasters that resulted in disproportionate impacts on at-risk population, in terms of both lives lost and economically. Unfortunately, these numerous events and lives lost have not prompted a major change in existing emergency management approaches. It has become painfully clear that effective disaster management requires a new, equitable approach that understands the unique circumstances of the individuals and communities in order to prioritize their needs. The emergency management tactics in recent years have proven ineffective in many cases because false assumptions have been made about the ability of individuals and communities who are already suffering to survive disaster impacts. Political leaders, policymakers, and emergency managers can no longer turn a blind eye to the reoccurring disproportionate impact of disasters on vulnerable populations. New and innovative equitable practices must be integrated and prioritized in emergency management in order for dramatic and sustainable changes to be made to build resilience in the most at-risk communities. As the COVID-19 response continues and the heart of hurricane season starts, the transition to equitable disaster approaches should begin now. There is a “fierce urgency of now” that

requires all levels of government to take action before the next disaster continues the horrible, unjust, and disproportionate cycle of loss in vulnerable populations.

Ms. TITUS. Thank you much, Mr. Brown.

Mr. Higdon?

Mr. HIGDON. Good morning, Chairwoman Titus, Ranking Member Katko, and members of the subcommittee. My name is Chad Higdon, chief executive officer for Second Harvest Community Food Bank, and I appreciate the opportunity to offer perspective regarding the experiences of vulnerable populations during disasters.

For 7 years I have been the CEO of Second Harvest, which is headquartered in St. Joseph, Missouri, and serves 19 counties in northeast Kansas and northwest Missouri. Second Harvest is a member of Feeding America, the nationwide network of 200 food banks which provide food and services to food insecure people in every county in the United States. I first want to thank members of the committee for your support of food banks in your districts.

Every food bank is very appreciative of the support we receive from Members of Congress, and we recognize your efforts to support the work we do. We have seen a tremendous increase in need as a result of COVID-19. This past fiscal year, Second Harvest distributed 9.9 million pounds of food, up 31 percent from our record distribution the year prior. There are no signs of this slowing down as we distributed 1 million pounds of food product in July, our first month of the new fiscal year.

We understand that low-income families in general are vulnerable. One vehicle emergency or unexpected home repair can set a family back financially for months, and we know that low-income seniors often must choose between needed prescriptions and a nutritious meal. We are mindful of racial disparities and the prevalence of poverty and food insecurity across demographics, as well as urban and rural disparities.

Our focus has always been to support all families in need, and in doing so have worked to identify and address inequities in our service and distribution efforts. To address inequities, we recently closed our onsite pantry in an effort to focus more attention to mobile pantry distributions across our 19 counties. We learned that our poorest performing county, Leavenworth County in Kansas, is the county with our largest black population.

I'm proud to say our focus in Leavenworth County saw an increase in distribution by more than 72 percent in the past 2 years. Second Harvest also created partnerships with Native American populations in northeast Kansas and has established food distribution programs on the reservations. Our goal is to reach all distressed populations, and the Federal support we have received has helped us accomplish this.

We have seen the benefit of food purchased through the Families First Coronavirus Response Act and the CARES Act, the Kansas Department of Emergency Management has purchased shelf-stable food packages for us to distribute, and we have seen increases in USDA commodity purchases to support the need. Even with these additional sources of food being provided, we are still purchasing significantly more product at a higher price than we did a year ago.

We understand programs such as pandemic unemployment assistance, housing assistance, SNAP, and CFAP are temporary solu-

tions and will eventually come to an end. I am concerned that as the Federal relief programs expire, demand will remain high, as will the price to distribute food.

Among the most important support we have received is that provided by National Guard members deployed to Second Harvest. The Guard has been assisting in all facets of our operations, including preparing disaster relief food boxes, distributing product at local pantry locations, and deliveries of food and other efforts to support food distributions. The National Guard has shown commitment to safety at a time when traditional volunteers are on the decline because of concerns related to the pandemic.

We also appreciate FEMA's response efforts, including efforts of emergency feeding activities eligible for reimbursement under FEMA Public Assistance. The PPE that has been offered and provided across the country to support our personnel and volunteers has also been greatly appreciated. There does appear to be a lack of clarity about which incurred expenses may be reimbursable, as well as how partnering with the State or local government might impact our ability to receive reimbursement for emergency food distribution.

We also heard concerns with the implication and overlap of services for individuals who would receive food through FEMA Public Assistance in addition to other Federal services. For all the assistance we have received to support our pandemic response, the continuance of title 32 funding to support deployment of the National Guard by the States is what would best support our efforts to continue our pandemic response.

I would also strongly encourage States to consider developing proactive agreements with individual food banks and State associations so that when food banks are needed to support emergency food distribution efforts, we have the tools necessary to rapidly support the communities we serve. Through all the adversity and challenges, I'm proud to say our team at Second Harvest has demonstrated a tremendous effort in keeping up with the demand.

We are very appreciative of everything the Federal Government has done to help our response and support vulnerable populations, and I hope you consider this testimony as an indication of what has been working well, and ideas for how we can all be better at what we do.

Thank you.

[Mr. Higdon's prepared statement follows:]

Prepared Statement of Chad Higdon, Chief Executive Officer, Second Harvest Community Food Bank

Dear Chairwoman Titus, Ranking Member Katko, and Members of the Subcommittee:

Thank you for allowing me the opportunity to provide written testimony regarding the experiences of vulnerable populations during disasters. It has been an honor and privilege for Second Harvest Community Food Bank and myself to support distressed families during this pandemic. I hope the insight I provide will be taken into consideration as the federal government continues to respond to the needs of its citizens and prepares for future unforeseen emergencies.

I also want to take the opportunity to thank Members of the Committee for your support of food banks within the Feeding America network and your dedication and commitment to hunger relief efforts and causes. We appreciate Chairwoman Titus'

efforts on legislation targeted to assist children with weekend and out-of-school meals in previous sessions. While preparing my testimony and remarks, I solicited feedback from food banks across the country. Food bank staff from Nevada communicated how attune Chairwoman Titus is to the work of food banks, citing her efforts to address childhood food insecurity. Food bank staff in New York commended Ranking Member Katko for being genuinely concerned with issues surrounding poverty and food insecurity. They mentioned he has visited their food bank as well as summer feeding sites for children, has volunteered at a mobile pantry distribution and has taken time to discuss issues related to food insecurity with their staff. My own Congressman, full Committee Ranking Member Sam Graves, has visited my food bank and others in his district learning about United States Department of Agriculture (USDA) Commodity distributions, our partner agency network, food distribution programs, and legislative issues critical to our cause. We appreciate and thank all Members of Congress who have taken time to visit or volunteer at food banks serving their constituents and hearing our concerns.

Second Harvest Community Food Bank is a non-profit food distribution organization serving fifteen counties in Northwest Missouri and four counties in Northeast Kansas. Our mission is to provide nourishment and hope to the hungry, while engaging and empowering the region in the fight to end hunger. We welcome food from the federal government, food manufacturers, retailers, restaurants, food drives, through our own purchases, and from other partners. We strive for efficiency and integrity in our work and are proud to say that ninety-six percent of our operating budget goes directly to providing food for families and only four percent is used for administrative or fundraising purposes. We distribute nutritious food product through a network of 54 partner agencies and direct distribution programs such as mobile pantries, childhood, and senior hunger initiatives. In the last fiscal year, 39 percent of the nutritious food product Second Harvest distributed was associated with federal nutrition programs.

From July 1, 2019 to June 30, 2020, Second Harvest distributed nearly 9.9M pounds of food through direct service programs and partner agency distributions. This translates to the equivalent of approximately 8.25M meals to families in need. This was a 31 percent increase over our distribution from the year before. We employ a staff of 24 full-time employees with an annual operating budget of \$3.7M. Prior to the pandemic we served an estimated 45,000 individuals identified as food insecure out of a total estimated population of 350,000, or 13 percent of the population. The estimated number of food insecure is expected to increase by approximately five percent to an estimated 64,000 individuals as a result of the pandemic.

Second Harvest Community Food Bank is also part of the Feeding America nationwide network of 200 food banks and 60,000 food pantries and meal programs which provide food and services to food insecure people in every county in the United States. Together, we are the nation's largest hunger-relief organization. While food banks throughout our network are very diverse and vary in size and types of distributions, one thing that we all have in common is our reliance on donors and volunteers to carry out our day-to-day operations. I am proud to serve on Feeding America's Policy Engagement and Advocacy Committee (PEAC), which helps direct policy and advocacy work for the organization.

The focus of this hearing—the impact on vulnerable populations of disasters like the COVID-19 pandemic—is something our food bank has also been considering. When we look at vulnerable populations, we understand that low-income families in general are vulnerable. One vehicle emergency or unexpected home repair can set a family back financially for months, and we know that low-income seniors often must choose between needed prescriptions and a nutritious meal.

We are particularly mindful of racial disparities and the disparate prevalence of poverty and food insecurity among various ethnic groups as well as between urban and rural communities. While the focus for our food bank has always been reaching and serving all food insecure families in our service territory, we also seek to better understand the inequities that exist in our service territory so that we may develop plans to address any disparities.

As an example of our efforts in this area, during the past two years we have benchmarked our food distribution efforts against the estimated need in each of the nineteen counties we serve, and perhaps not surprisingly, we discovered that some counties were receiving more support than others. The county where our food bank is physically located received more support than counties in more remote, rural areas, as a significant amount of our distribution was happening through an on-site pantry and pickups from local agencies. We made a conscious decision to close our on-site pantry and initiate a mobile pantry program. Initially this idea was met with some criticism and skepticism, but the focus on mobile pantries in every county we

serve has not only helped us increase our overall distribution but also improve the equity of service we provide.

Additionally, we learned that our poorest performing county—Leavenworth County—is the county in our service area with the largest black population. Because of this work evaluating our service at the county level I am proud to say we have increased our food distribution in Leavenworth County by more than 72 percent in the past two years. We will continue to challenge ourselves to be better and ask the tough questions about why these disparities exist, and how we can continue to ensure our distribution is fair and equitable throughout our 19-county service territory.

Second Harvest also created partnerships with the Iowa Tribe of Kansas and Nebraska and Kickapoo Tribe, both operating on federally established reservations in Northeast Kansas and worked with these native populations to support food distributions to children when schools on the reservations closed. Second Harvest is currently providing support through the summer feeding program for children at both locations. Monthly mobile pantry distributions are regularly scheduled on the reservations and food product received for COVID-19 relief has been provided through these distributions.

The focus of all Second Harvest programs and distribution efforts is reaching all vulnerable populations within our service territory. The response and recovery effort from COVID-19 will be the largest relief assistance program in American history by far and will require significant partnerships along the way, including federal, state, and local government and nonprofit organizations. Our work to support hunger relief needs resulting from the pandemic in the communities we serve would not have been possible if not for the federal support and assistance our organization has received. This support has allowed us to begin building a path to a brighter, food secure future for people in our communities and we are proud to be a partner in this endeavor.

Obviously, this is an unprecedented time, and I believe this has been the quickest I have witnessed the government respond to the needs of its citizens. This is not to say there have not been challenges along the way. We appreciate the response and continuous efforts to support us in hunger relief strategies for vulnerable families. From passage of the Families First Coronavirus Response Act (FFCRA), to the Coronavirus Aid, Relief and Economic Security (CARES) Act, the Coronavirus Food Assistance Program (CFAP), and the Paycheck Protection Program, we have seen the government roll out new programs to respond to the pandemic, illustrating a commitment and dedication to serving the citizens of this country.

In Missouri the FFCRA provided \$5.1M for food purchases and \$7.6M was provided by the CARES Act for the State to purchase and distribute food through The Emergency Food Assistance Program (TEFAP) channels. Additionally, \$1.7M has been allocated through FFCRA for administrative funding to support food distribution and an additional \$1.5M in flexible CARES Act funding is being funneled to the food banks in Missouri for reimbursement of purchased food. A total of \$107,811 of the flexible CARES Act funding has been provided directly to Second Harvest.

In Kansas, \$2.7M was allocated for food purchase through FFCRA and an additional \$400,000 allocated for administrative funding, and \$3.5M in CARES Act funding was authorized for food purchases. In addition, the Kansas Department of Emergency Management has purchased nutrient-dense, shelf stable meals that were packaged by members of the National Guard. Second Harvest has also distributed over 1M pounds of CFAP product between the two states it serves with an estimated value of \$1.5M.

With as much additional food provided for our pandemic response efforts, we still have purchased significantly more food product than we did a year ago. In addition, the cost for purchased product has increased and our budget for food purchases does not go as far as it did before the pandemic. From March to June of 2019 Second Harvest spent \$404,538 on purchased food product, and from March to June of 2020 we spent \$727,284. With funds spent last year we purchased 692,492 pounds of product, compared to 793,649 pounds this year. This results in a \$0.33 increase in the price per pound of purchased product. I am extremely concerned that as the federal relief programs expire, demand will remain high, prices to purchase food will remain higher and the strain this will put on most food banks will be difficult to navigate.

The federal support received has been very critical to our response efforts. Yet we also understand these programs are temporary solutions and will eventually come to an end. Pandemic unemployment assistance will soon expire. Housing and SNAP assistance programs will eventually return to pre-pandemic levels. Funds families have received through stimulus programs will eventually be spent. The CFAP program will eventually expire. Unfortunately, I do not believe the food insecurity crisis

caused by the pandemic will be short-lived. In fact, I am concerned the significant increase in demand we have seen since March will only increase, and as some of these federal disaster response programs end it will be a tremendous challenge for food banks to sustain current levels of operations without ongoing support.

The estimated food insecurity rate for Second Harvest's service territory in 2018 was 13 percent of the total population. For 2020 we expect that number to increase by 40 percent to an estimated 18.3 percent of the population—and 26.5 percent of the children—living in our 19 counties. We have closely monitored our demand and service between mid-March and mid-July of 2020 compared to the same period in 2019. Through our partner agency network, we have witnessed an increase of approximately 58 percent of individuals served, and through Second Harvest's mobile pantry distributions we have seen an increase of more than 220 percent of individuals served from the previous year. This has been possible in large part due to the additional support of food product received from USDA and through CARES Act food purchases, and increased distributions made possible through utilization of the National Guard in both Missouri and Kansas.

Our biggest concern is that the increased demand will remain heading into 2021, while much of the support we received in the current year will not.

Among the most important support we have received, and that we can least afford to lose, is that provided by National Guard members deployed to Second Harvest who have done an exceptional job and have been critical to our work of providing much needed support to families in need. The Guard has been assisting in all facets of our operations including preparing disaster relief food boxes, distributing product at mobile pantry locations, delivering USDA commodities and other food product, sorting produce for distributions, packaging boxes of food for distributions to children, delivering food to the homebound, and serving at summer feeding sites for children.

Additionally, clients receiving services and our staff feel extremely confident in the Guard members' efforts to adhere to social distancing and best safety practices with our distributions, where monitoring volunteers to adhere to the same standards can be a challenge. One of our biggest fears would be one volunteer working a mobile distribution who tested positive for COVID-19 where more than 200 vehicles received food through that distribution, and the effort it would take to track families who received support through that distribution and provide future assurances to families that we are taking all necessary measures to ensure their safety when receiving food. The National Guard has shown a tremendous commitment to safety through their mission at the food bank.

Many of our efforts and service levels would have been highly impacted without the support of the National Guard. With the increase in demand and reduction in traditional volunteers, what we have accomplished during the pandemic would not have been possible without their support. From May to July we established 67 additional mobile pantry distributions utilizing National Guard personnel and vehicles and the majority of these would not have been possible without their support. In total during those months, 70 mobile pantry distributions in Missouri and 34 in Kansas were conducted utilizing National Guard support at Second Harvest.

The Federal Emergency Management Agency's (FEMA) response efforts are no different, and we are especially grateful for the Agency's April 11 guidance that made emergency feeding activities eligible for reimbursement under FEMA Public Assistance. FEMA staff in regional offices have also been working hard to meet the requests of state and local governments and their partner non-government organizations, including food banks.

In Texas FEMA Public Assistance funds were utilized for food replenishment in the amount of \$65M. Food bank staff shared that this effort came at a critical juncture and helped bridge the gap from existing inventory and private funding shortages. In Indiana, FEMA supported delivery of meals for approximately six weeks as donations decreased. This effort was greatly appreciated and well received by the food bank's partner agencies and clients served. Across the country food banks are distributing record amounts of food product, and the various channels of food sourcing which have been made available to support the record levels of demand have directly correlated to the success we have seen in our disaster response efforts.

We have seen other initiatives that have contributed to the disaster response in different parts of the country. Funding has been provided to support pork processing initiatives in Missouri and pork and beef processing efforts in Iowa. Drive thru distribution models proved to be a safe and efficient way to get a large quantity of food distributed to a high volume of individuals with contactless distribution efforts implemented. Personal protective equipment (PPE) has been offered and provided across the country. Face shields have been offered by Missouri's State Emergency Management Agency and will be delivered to food banks this week.

All of these combined efforts and much needed support have arrived during a critical time of need for hunger relief in this nation as a result of the pandemic. We truly appreciate the efforts of federally elected officials, administrative agency staff, state officials and local resources who have had a hand in carrying out each of these efforts. The work of food banks like ours would not have been as responsive to the needs of Americans if not for these actions taken.

With all the demonstrated success stories, there are also going to be opportunities for improvement and takeaways to improve on future disaster response efforts. When no one could have planned and prepared for everything that transpired as a result of COVID-19, the federal response should be commended for the swift action and rapid response. In the next few paragraphs, I will outline areas which I hope will be considered as the federal government continues to evaluate the effectiveness of its COVID-19 response efforts and the impact on vulnerable populations.

One of the challenges food banks experienced was a disparity in response efforts across FEMA regions. It seems that in some instances, discretion from the FEMA regional offices and the level of effort or understanding on the part of state and local emergency management agencies directly impacts the likelihood of emergency feeding activities by food banks having been reimbursed by FEMA during the pandemic.

There appears to be a tremendous opportunity to better educate state, local, tribal and territorial governments about how to partner with food banks to receive reimbursement for food distribution expenses during a disaster. Specifically, for Second Harvest Community Food Bank there has been a lack of clarity about which incurred expenses may be reimbursable, as well as how partnering with a state or local government might impact our ability to receive reimbursement for emergency food distribution. We developed a Memorandum of Understanding with our largest county served but to date have not had a need to act on this initiative. In addition, if we were to try and determine increased costs as a response to the pandemic, it would be difficult to differentiate costs that would be eligible for other federal program reimbursement or private funding and exclude those expenses.

As an example, Second Harvest provides a report to Missouri Department of Social Services regarding purchases and value of distributions to families with children as a third-party maintenance of effort (MOE) claim toward the state's Temporary Assistance to Needy Families (TANF) MOE. We do not directly receive federal TANF dollars as a result of this, but we do receive funding from the state for the partnership created. However, it would be my understanding that if we claim expenses toward TANF MOE those expenses would not be eligible for any FEMA disaster reimbursement. Additionally, we received funding from a private donor for food purchases in response to the pandemic through March and April, and I assume we would not be able to claim costs covered through private donations also as a disaster reimbursement. However, there has not been much clarity on whether we can claim any expenses for disaster reimbursement, or what the guidelines would be in doing so. And for a small organization which employs 23 full-time employees and only one staff member handling all financial activity, tracking expenses across government programs can be very challenging.

Feedback provided by other food banks reiterated some of these same concerns, with a lack of understanding for what populations or services would be eligible for reimbursement. I also heard concerns from other food banks that FEMA prohibits reimbursement of expenses which are tied to serving anyone who receives any other form of government food assistance. Typically, during a disaster we would assume that those seeking additional assistance may very well also be SNAP recipients or receive federal commodities through USDA TEFAP or the Commodity Supplemental Food Program (CSFP). When the goal would be to serve a high volume of individuals in drive thru operations, it would be extremely difficult to track who might be receiving any other type of federal assistance. It appears that this may not in fact be the case, but this is the message some food banks received from emergency management officials they had been working with. Food banks shared that they along with many local governments could not afford to take the risk that FEMA would not reimburse expenses for emergency food distributions, and therefore did not pursue the opportunity.

In addition to these challenges, it can also be problematic managing various food distribution programs across multiple states and among different state agencies operating in the same state. States are allowed flexibilities to operate food distribution programs within the standards set by the federal government, but within those standards can manage programs as they best see fit. This can be a challenge when managing the same program, with basically the same food product in the same warehouse, but variances in how to manage each of these for different states. In Kansas we operate USDA Commodity programs with oversight from the Kansas Department of Children and Families. In the same state we operate the USDA Child

and Adult Care Food Program (CACFP) and USDA Summer Food Service Program (SFSP) under the Kansas Department of Education. In Missouri we work with the Missouri Department of Social Services in operating SNAP Outreach Assistance and the TEFAP Commodity program, and the Missouri Department of Health and Senior Services in operating the USDA CSFP, CACFP, and SFSP programs. In addition, each state has other departments managing other federal nutrition programs. This can often cause challenges in working to find the best methods to efficiently manage each program.

As we look at what the federal government could do to best support our efforts going forward, the first effort which would be a tremendous help to our food bank and others across the country would be extension of the Title 32 authorization to support states in the deployment of the National Guard to support food distribution efforts. We know that over the next few months many of the food distribution programs will continue and we expect to have increased amounts of food available to distribute. The challenge will be in our individual food bank cold storage capacity and logistical limitations. With National Guard support we can increase distributions and move product more quickly so that it reaches families needing support in a timely manner. The second item which would be most helpful is financial support for the purchase of shelf-stable food product. Because product from the CFAP program and other steady channels includes more perishable product, an increase in shelf-stable food would complement our current product offerings and is much easier for food banks and partner agencies to distribute in a safe and efficient manner.

I would also encourage any efforts to provide consistency across FEMA regions to ensure all parts of the country are receiving similar support and resources for disaster response. We know that states may have different priorities in how they choose to respond to the pandemic, but a priority should be placed on making sure food banks have the support and tools they need to keep up with the increased demand, regardless of how those resources are acquired. We know there are different approaches that can work to address any problem and we simply hope steps are being taken to make sure the end-result is the same and vulnerable families receive the support they need.

I also believe steps could be taken to build stronger partnerships between emergency management agencies and Feeding America food banks. Feeding America has the infrastructure and history of meeting the hunger needs of American citizens. During this pandemic we found ourselves developing an agreement with a state for emergency food distribution to receive product that was highly needed just prior to implementation, and consequent month-to-month agreements were signed as prior agreements expired.

If a time comes when we must respond to a disaster worse than this pandemic, it could be detrimental to have a need to develop and requirement to sign a formal agreement which could delay a food bank from being able to provide the necessary and expedient response. Instead, we should be focused on meeting the need and equipping food banks to be ready to move as disaster strikes. Ideally, we would like FEMA to encourage proactive partnerships with food banks and state associations of food banks on an ongoing basis, so that relationships already exist for food banks to respond quickly when such need should arise.

Providing PPE to food banks for staff and volunteers at the food bank and partner agency level is encouraged. This has been a tremendous help and provides added safety for staff, volunteers, and clients involved with food distributions. Along those lines, if hand sanitizer is provided, it is most needed in individual sizes or more manageable packaging, rather than large 55-gallon drums which some food banks were offered. No contact thermometers have also been very helpful to check temperatures for staff and volunteers involved in food distribution efforts.

The final suggestion I would offer is related to the capacity of food banks to meet ongoing community needs and also be better prepared to respond to future disaster situations. The dramatic increase in commodity foods being distributed by our nation's food banks, which began with the introduction of the USDA's Food Purchase and Distribution Program two years ago, is stressing the ability of food banks and our agency partners to store and distribute this volume of perishable foods.

The \$600 million for TEFAP food purchases provided in the FFCRA and CARES Acts, as well as the approximately \$500 million in additional USDA Section 32 food purchases announced in May 2020, will add further distribution strain to food banks and agency partners. This need is more acute in communities that are also receiving a high volume of perishable food through the CFAP program. Specifically, we are seeing a significant need at food banks and partner agencies across the country to acquire the coolers, freezers, trucks, and trailers necessary to efficiently store and distribute food across their service areas. Additionally, and especially during dis-

aster response, there is a need for on-site generators to help ensure food banks can maintain operations during prolonged power outages.

To address these needs Feeding America has recommended an investment of \$543,625,000 to support the rental, lease, or purchase of these essential assets across the nation's network of 200 food banks and 60,000 partner agencies. Such an investment will allow Second Harvest Community Food Bank and our colleagues across the country to better meet the ongoing needs related to the current pandemic, and ensure we are prepared to respond to future crises.

In conclusion, there have been multiple challenges we have faced during our pandemic response at Second Harvest. I am extremely proud of my team and the efforts of our food bank, to distribute record levels of nutritious food product this past fiscal year. We have persevered and accomplished much of this while dealing with partner agency closures including food pantries and meal service centers and concerns among staff for their own safety. Children's initiatives were impacted with school closures, and our staff worked closely with multiple school districts to continue to provide much needed support to families with children. We have worked through a decrease in volunteerism, and we still have many volunteers reluctant to return because of COVID-19 concerns.

While food safety and product integrity has always been a focus of our food bank, we have been extremely mindful of safety and sanitation needs associated with food distributions during the pandemic. We have dealt with work from home efforts with full intention of keeping our doors open and uninterrupted service. We dealt with challenges acquiring and providing PPE and hand sanitizer to accommodate staff and volunteers. We understood families needing assistance were at times reluctant to go out to a food distribution site to receive food product their family needed. We have experienced increased food costs and disruptions to supply chains, impacting our food sourcing efforts. Finally, we have worked through extreme limitations with cold storage capacity and a significant increase in the amount of frozen and refrigerated product received and needed to support families in need.

Through all the adversity and challenges I am proud to say my team has demonstrated a tremendous effort keeping up with the demand and serving families in need. And we are very appreciative of everything the federal government has done to help us respond to COVID-19 and support vulnerable populations which have been impacted. We will continue to serve the American public and I hope you consider this testimony as an indication of what has been working well, and ideas for how we can all be better in what we do.

If I can provide any additional information to support the committee's efforts through this process, please do not hesitate to reach out.

Ms. TITUS. Thank you, Mr. Higdon.

Ms. Roth, you may proceed.

Ms. ROTH. Good morning, Chairwoman Titus, Ranking Member Katko, and distinguished members of the subcommittee. It is an honor to testify before you today as one voice among the 26 percent of the U.S. population who have disabilities. I too honor a man who was a beacon for me and so many others with disabilities.

In that spirit, I am here to make good trouble. I am the executive director and CEO for the World Institute on Disability. I've been focusing on the intersection of disability rights, emergency management, disasters, public health emergencies, and disaster resilience since the 9/11 terrorist attacks almost 20 years ago.

For almost 8 years, I served as Senior Advisor to FEMA Administrator Craig Fugate, establishing and directing the FEMA Office of Disability Integration and Coordination. Thank you for allowing me to share the experiences of people with disabilities during disasters, the topic of today's hearing.

After so many years of effort, I wish I was here with better news. The Centers for Disease Control and Prevention reports that at least 1 in 4 adults has a disability. Like me, they have sweeping civil rights protections against discrimination on the basis of their disability, and are entitled to equal access throughout almost all aspects of daily life in the U.S. These rights are never suspended

or waived, including before, during, and after public health emergencies and disasters.

Having a disability does not make people more vulnerable in disasters. Everyone is potentially vulnerable to the impact of disasters. What makes people vulnerable is the failure of communities and governments to plan for the inclusion of people with disabilities in every aspect of the disaster cycle, including community preparedness and disaster exercises, accessible instant warnings, building and community evacuation, sheltering in temporary housing, access to health, maintenance, and medical services, and all aspects of the recovery process.

Chairwoman Titus, we can't even assure that service animals will be consistently admitted to shelters in a disaster, despite the obligation, training, and technical assistance I and many others have been providing for years. Failure to comply with the ADA and other key civil rights laws is what makes people with disabilities more vulnerable in disasters and public health emergencies.

While 8 percent of the country's COVID-19 cases have occurred in long-term care facilities, deaths related to COVID-19 in these facilities account for at least 43 percent of the country's pandemic fatalities. With 150,000 Americans dead, this means at least 65,000 people, almost all disabled, many black, indigenous, brown, and other people of color, mostly poor, have died horrible deaths in the last 137 days, almost always without any loved ones to hold their hand.

How can I say most of these people were disabled? Because no one ever goes to a nursing home or a long-term care facility because they're old. They go because of the failure of their community and their Government to provide adequate housing, support, and services in their own home, despite the requirements of disability civil rights laws. These 65,000 people with disabilities all have unwaiverable rights confirmed in the 1999 Supreme Court *Olmstead* decision, giving them all the right to live in the most integrated setting appropriate to their needs, which was clearly not in the COVID infested death pits in which they gasped their final breath without loved ones by their side.

It's too late for them, but not for the millions of others. According to a New York Times database, as of July 23rd, the virus has infected more than 335,000 people at some 15,000 facilities. This includes people who are in prisons and in detention facilities.

We have many asks in our testimony, but most particularly, we asked for immediate passage of the bipartisan bicameral Real Emergency Access for Aging and Disability Inclusion for Disasters Act, and the Disaster Relief Medicaid Act.

And we ask you to help us find out who is monitoring and enforcing FEMA's and HHS' use of disaster funds to ensure that every Federal dollar spent or granted to others to spend are in full compliance with all of the obligations under the Rehabilitation Act of 1973.

We can't seem to get that answer, and can't seem to get an answer for who is responsible for monitoring the folks who are supposed to be monitoring the expenditure of billions, perhaps trillions, of taxpayer disaster funds. I have many individual examples I wish I had time to share with you today.

[Ms. Roth's prepared statement follows:]

**Prepared Statement of Marcie Roth, Executive Director and Chief
Executive Officer, World Institute on Disability**

Good morning Chairman Titus, Ranking Member Katko, and distinguished members of the Committee. It is an honor to testify before you today, as one voice among the 26 percent of the US population who have disabilities.

I am the Executive Director and Chief Executive Officer for the World Institute on Disability, one of the first global disability rights organizations, founded in 1983 by people with disabilities and continually led by disabled people for the past 37 years. Thank you for allowing me to share the experiences of people with disabilities during disasters, the topic of today's hearing.

I have been active in the disability rights movement since I was in high school and have worked as an advocate for the rights and services needed by people with disabilities throughout my 45-year career. Along the way, I acquired my disability, raised two disabled children, married a man with a disability and, though some don't own it, most of my family and friends have disabilities, too.

DISABILITY RIGHTS, DISASTERS AND PUBLIC HEALTH EMERGENCIES

Since the Centers for Disease Control and Prevention (CDC) reported in 2018 that at least 1 in 4 adults has a disability, it's safe to assume that many people listening to or reading my testimony has a disability too. Like me, they have sweeping civil rights protections against discrimination on the basis of their disability and are entitled to equal access throughout almost all aspects of daily life in the US.

Two days ago, July 26, 2020, the 30th anniversary of the Americans with Disabilities Act was celebrated. This law, known as the ADA, gives civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. The ADA also assures equal opportunity for individuals with disabilities for access to businesses, employment, transportation, state and local government programs and services, and telecommunications. These rights are never suspended or waived, including before, during and after public health emergencies and disasters.

In the words of one of the original authors of the ADA, Bob Burgdorf, written in the Washington Post "The ADA was a response to an appalling problem: widespread, systemic, inhumane discrimination against people with disabilities. In 1971, a New York judge described people with disabilities as "the most discriminated [against] minority in our nation."

My laser focus on emergency preparedness and improving disaster outcomes for people with disabilities and building accessible disaster-resilient communities began in the immediate aftermath of the September 11, 2001 terrorist attacks, when I was asked to advise the White House on the rights and urgent needs of thousands of people with disabilities living in the area around ground zero.

Appointed by President Obama to the U.S. Department of Homeland Security—Federal Emergency Management Agency from 2009 to 2017, I served as Senior Advisor to Administrator Fugate, establishing and directing the FEMA Office of Disability Integration and Coordination. I also served as FEMA's Congressionally mandated Disability Coordinator; a requirement established when the Post Katrina Emergency Management Reform Act (PKEMRA) amended the Stafford Act in 2006.

Now I'm going to speak about what happens to people with disabilities in disasters, again and again. The news is not good.

Having a disability does not make people more vulnerable in disasters. Everyone is potentially vulnerable to the impacts of disasters. What makes people vulnerable is the failure communities and governments to plan for the inclusion of people with disabilities in every aspect of the disaster cycle, including community preparedness and disaster exercises, accessible alerts and warnings, building and community evacuation, sheltering and temporary housing, access to health maintenance and medical services, and all aspects of the recovery process.

Failure to comply with the ADA and other key civil rights laws is what makes people with disabilities more vulnerable in disasters and public health emergencies. Most notable among the civil rights laws is the Rehabilitation Act of 1973 which requires equal physical access, program access and equally effective communication access. The Rehabilitation Act, now almost 50 years old, applies to EVERY federal dollar spent, including all funds expended by the federal government before, during and after disasters, and every federal dollar spent by grantees and sub grantees,

including states, tribes, territories and their subgrantees from cities and counties and any other user of federal funds.

The US Department of Justice, FEMA, the Departments of Health and Human Services, Homeland Security, Housing and Urban Development have all confirmed that they know that these civil rights laws are NEVER waived or suspended, including in a disaster. Even when waivers of other laws are granted in a federally declared disaster, those waivers never apply to the ADA and the Rehabilitation Act, nor do they apply to the non-discrimination requirements in the Stafford Act.

Despite this, the Centers for Medicare and Medicaid have repeatedly issued waivers in public health emergencies that allow states to bypass many of the protections that keep people with disabilities out of institutions, nursing homes and other congregate facilities, in direct violation of their rights. These Section 1135 of the Social Security Act blanket waivers have been issued repeatedly over the past four years with dire consequences for people with disabilities, despite their ADA, Stafford and Rehabilitation Act rights.

I have repeatedly raised these concerns for years, including in a formal complaint from the Partnership for Inclusive Disaster Strategies in 2017, filed with the Departments of Justice, Health and Human Services, Homeland Security and FEMA. As the Executive Director of the Partnership for Inclusive Disaster Strategies, I was granted a “listening session” hosted by the Disability Rights Section of the Department of Justice in November 2017. Representatives from HHS and DHS attended, FEMA RSVPed to DOJ that they would attend, but never showed up. In my one-way conversation, while everyone “listened”, I requested that these federal representatives exercise their obligation to enforce disability rights laws since the civil rights of people with disabilities are never allowed to be waived or suspended. I never heard another word about my complaint and the issuance of 1135 blanket waivers continued in many subsequent disasters, including the current COVID-19 pandemic.

The National Council on Disability (NCD) is an independent federal agency charged with advising the President, Congress, and other federal agencies regarding policies, programs, practices, and procedures that affect people with disabilities. In May 2019, NCD published *Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters*. In NCD’s cover letter to President Trump, Presidential Appointee NCD Chairperson Neil Romano tells the president, “NCD has found that people with disabilities are frequently institutionalized during and after disasters. The report examines factors that lead to institutionalization. Then, most critically, it provides recommendations to eliminate institutionalization of people with disabilities during and after disasters. It also recommends how to improve community readiness to meet obligations that require equal access to emergency and disaster services and programs in the most integrated setting appropriate for disaster-impacted people.” Chairman Romano tells President Trump, “There will be no remedy in future disasters without sweeping changes.”

WHERE DO WE NEED TO FOCUS?

After many years of calls for action to address the disaster rights and needs of 26% of the population, we have largely failed. Among the many issues we are asking this Committee to prioritize, include the following:

- Focus on disability inclusive preparedness, response and recovery.
 - Please help us find out who is monitoring and enforcing FEMA and HHS’ use of disaster funds to ensure that every federal dollar spent or granted to others to spend are in full compliance with all of the obligations under the Rehabilitation Act of 1973? We can’t seem to get that answer and can’t seem to get an answer for who is responsible for monitoring and enforcing the agencies required to monitor and enforce the expenditure of billions—perhaps trillions of taxpayer dollars!
 - Are we centering our efforts on the disaster needs of multiply marginalized Black, Indigenous, Brown and other People of Color?
 - Are the rights and needs of disabled prisoners and detainees prioritized in emergency and disaster planning?
 - What efforts are being taken to ensure people with intellectual disabilities, autistic people, people with mental health needs and other disabled people who are most often the most excluded from emergency planning?
 - Why are funds being directed to improve nursing homes when they very obviously are incapable of protecting the people in their facilities from infections, including deadly COVID-19. Invest funds in home and community based services and accessible housing!

- Who is responsible for monitoring the GAO findings regarding FEMA’s obligations to people with disabilities? Despite several recent reports about the failures of the Office of Disability Integration and Coordination, several agreements remain unfulfilled and although GAO reported that they weren’t conducting a civil rights review, many disability civil rights violations have been documented and remain unresolved. If GAO is not responsible for addressing these documented civil rights violations, who is?
- Are people with disabilities involved in planning, participating in and reviewing disaster exercises?
- Do they get alerts and warnings in formats accessible to them? Has the Integrated Public Alerts and Warning Act adequately addressed all accessibility requirements? Information must be accessible to be actionable.
- The only service provided to individuals under the nationwide COVID–19 disaster declarations is “Crisis Counseling”. Currently, FEMA has been unable to provide any information about which states are providing accessible crisis counseling services or what those accommodations are and how to locate them.
- Can they evacuate from multistory buildings? Can they evacuate the community with everyone else, even if they need accessible transportation, or are they left behind?
- Are shelters prepared to meet their access and functional needs?
- Will service animals be welcomed? Despite relentless efforts, people with service animals are still repeatedly denied access to shelters.
- Can people with disabilities register for FEMA assistance? Can they request reasonable accommodations for the application process when they apply? After years of repeatedly raising these issues, FEMA told GAO over a year ago that they would have this resolved. It still is not, and we are told, “hopefully by the end of 2020”.
- Will national disability organizations finally be invited to work with FEMA’s Office of Disability Integration and Coordination after being refused time and again since 2017.
- How will personal assistance and other accommodations be provided in concurrent disasters during the pandemic? There is a need for immediate solutions to prevent admissions to nursing homes and other COVID–19 infested congregate facilities.
- There is a national shortage of accessible and affordable housing before disasters destroy homes. This must be a priority or the cascade that leads to institutionalization won’t be stemmed.
- Likewise, we must prioritize Home and Community Based Services funding and Money Follows the Person funding to prevent institutionalization and provide the resources for nursing home transition and other deinstitutionalization for all who wish to live in the community, without exception.
- Meeting the educational needs of students with disabilities remains an especially urgent need during the pandemic. The disaster related needs of students with disabilities have been an issue in every recent disaster, and this must be addressed so that planning can prevent the disproportionate interruption of the educational needs of these students, in violation of their rights under the Individuals with Disabilities Education Act.
- And, disaster recovery and mitigation must always start with a commitment to universal design standards and accessibility as imperatives. Without accessibility, community resilience is impossible.
- Immediately pass the bi-partisan, bi-cameral Real Emergency Access for Aging and Disability Inclusion for Disasters (READI for Disasters Act)—S–1755 and HR–3208 and Disaster Relief Medicaid Act (DRMA) S–1754 and HR–3215. These bills will go a long way towards closing many of the deadly gaps in disasters and public health emergencies, not just for people with disabilities, but for the whole community.

THE CURRENT CRISIS

On March 3, 2020, in anticipation of what was to come, disability advocates led by the Partnership for Inclusive Disaster Strategies, the National Council on Independent Living Emergency Preparedness Subcommittee, and my organization, the World Institute on Disability issued a National Call to Action joined by 194 other local, national, and international groups.

The coalition, led by the Partnership followed our Call to Action with a letter to Vice President Pence and the White House COVID–19 Task Force on March 9, 2020.

It took many complaints before CMS amended their COVID-19 1135 blanket waiver guidance last month, adding one line to the document originally published 4 months earlier. The added language reads, “States are still subject to obligations under the integration mandate of the Americans with Disabilities Act, to avoid subjecting persons with disabilities to unjustified institutionalization or segregation.

In a footnote, CMS also added “Please note that consistent with the integration mandate of Title II of the ADA and the *Olmstead vs LC* decision, States are obligated to offer/ provide discharge planning and/or case management/ transition services, as appropriate, to individuals who are removed from their Medicaid home and community based services under these authorities during the course of the public health emergency as well as to individuals with disabilities who may require these services in order to avoid unjustified institutionalization or segregation. Transition services/ case management and/or discharge planning would be provided to facilitate these individuals in their return to the community when their condition and public health circumstances permit.” Based on reports, this has not stemmed the placement of people with disabilities in COVID infested nursing homes.

WHO IS AFFECTED?

On March 13, 2020, President Trump declared the COVID-19 pandemic a national emergency. While 8 percent of the country’s COVID-19 cases have occurred in long-term care facilities, deaths related to COVID-19 in these facilities account for 50 percent of the country’s pandemic fatalities, according to Larry Kudlow, representing President Trump on CNN’s State of the Union on 7/26.

According to Mr. Kudlow’s numbers, in the 137 days that have followed President Trump’s National Emergency Declaration, 50% of the 150,000 US COVID-19 deaths, 75,000, *were almost all people with disabilities* who despite their right to live in the community, died a horrific death, without any loved ones by their side, in congregate facilities, such as nursing homes, long term care facilities, and group homes. Countless other disabled people are also dying from COVID in juvenile and adult psychiatric hospitals and carceral facilities, such as jails, prisons and detention centers. Many of these people are multiply marginalized Black, Indigenous, Brown and other people of color, most of them were poor.

According to a New York Times database, as of July 23, the virus has infected more than 335,000 people at some 15,000 facilities. These numbers would indicate that there are still well over a million institutionalized people who could still be prevented from contracting the virus. Clearly, given the abject failure of these facilities to protect the people under their care, this won’t be possible in those 15,000 facilities.

Disability rights advocates from across the country are calling for immediate relocation of all disabled people currently in congregate facilities. Many of the nation’s 400+ Centers for Independent Living, non-residential community advocacy organizations, serving most communities in every state, have completed thousands of successful transitions from nursing homes to non-congregate community living. They are ready, willing and able to implement their federally mandated nursing home transition services. In a July 6, 2020 letter to the nation’s governors, these community living experts and their allies notified the governors that they will assist state and federal government authorities to meet their civil rights obligations under the ADA and the Rehabilitation Act by rapidly relocating nursing home residents with disabilities to far safer transitional housing where they would continue to receive all of the supports and services they require in the privacy and safety of non-congregate community locations. FEMA has been repeatedly requested to provide guidance to governors about how to use the current disaster declarations to enable the use of Public Assistance, Category B funds, Emergency Protective Measures, to fund the emergency protective needs of hundreds of thousands of people with disabilities in dangerous COVID infested congregate facilities. FEMA has shown no urgency in providing this life saving guidance. People with disabilities living in our communities, in their own homes, have a radically lower infection rate than people living in congregate settings. Home and community-based services are also a very cost-effective solution.

In the NCD report *Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters*

“data shows it is more cost-effective to provide community-based services like accessible shelters versus institutionalization. In NCD’s 2009 report *The Cost of Deinstitutionalization: Comparing the Cost of Institution Versus Community-Based Services*, the average annual expenditure for a state institution was \$188,318 compared to \$42,486 for Medicaid funded home and community-based services.¹ The fiscal disparity between the two

options is staggering and further supports NCD's recommendations in this report that institutionalization of persons with disabilities during and after disasters is not an economically sound option."

REAL EXPERIENCES

Here are the experiences of three disabled people affected in extreme ways in the midst of the COVID-19 federally declared disaster.

Katy is a disability advocate in Yuba City, CA. She lives in her own home, and, as a person with quadriplegia, she receives In-Home Supportive Services (IHSS) as an alternative to out-of-home care. This State of CA program is described as "enabling recipients to remain safely in their own homes". Due to COVID, Katy's in-home support providers stopped coming and, despite repeated promises from the state, she was told IHSS workers were unavailable. Without in-home support, Katy's health and safety were in danger. She could find people to hire on Craigs List, but they were far more expensive than the \$133/day IHSS currently pays but IHSS won't cover the additional cost. Instead, Katy was forced to go into a nursing home at a cost to the state of \$600/day, a \$467 more expensive option in an especially dangerous place for anyone to be forced to live.

Kristen is a mother of four, from Atlanta. During childbirth, she had a massive stroke, resulting in paralysis and a brain injury. After a recent hospitalization related to her brain injury, the hospital was in a hurry to discharge Kristen so they could fill her bed with a higher paying patient. While she and her friends scrambled to find an accessible home for her and her children to live, she was relocated 300 miles away to a nursing home in TN against her will. As a result of that decision, she can't see her children and she has been told that since she is out of state, proceedings to sever her parental rights will begin soon.

Both Katy and Kristen have submitted Civil Rights complaints to the US Department of Health and Human Services Office for Civil Rights. As of this hearing, neither has had any action taken by HHS.

Last month, a Black, disabled, 46-year-old African American father of five was one of the tens of thousands of disabled people who had contracted COVID-19 in a nursing home. However, Michael Hickson, who was paralyzed after a massive heart attack caused a brain injury in 2017, did not die from the virus. He was euthanized, despite his wife's pleading with doctors to provide life sustaining care to her husband. In the words of one reporter, Michael "was black and paralyzed, so doctors decided his life wasn't worth saving".

Michael's wife, Melissa, legally recorded an exchange she had with her husband's doctor about Michael's care. "As the recording shows, they agreed that Michael should not be intubated, but Melissa still wanted Michael to be treated aggressively. The doctor insisted aggressive treatment wouldn't "help him improve" and "right now, his quality of life . . . he doesn't have much of one." "What do you mean?" Melissa asked. "Because he's paralyzed with a brain injury, he doesn't have quality of life?" "Correct," the doctor flatly replied. "The doctor admitted he'd had "three patients survive who were in Michael's situation" but claimed "Michael's "quality of life is different from theirs." The others "were walking and talking people. I don't mean to be frank or abrasive, but at this point, we are going to do what we feel is best for him along with the state, and this is what we decided." Michael, a father of 5, was denied food and water and he died a horrific death six days later, with none of his loved ones by his side.

Kristen is a black woman and Michael was a black man.

Advocates had to move quickly earlier in the declared disaster to prevent children and adults from rationing of their medical care and medical devices based simply on their disability and the perceived quality of life.

"The Center for Public Representation and others filed complaints alleging that crisis standard of care plans in two of the states currently being hardest hit by COVID-19, Arizona and Texas, discriminate against people with disabilities, older adults, and people of color, placing these communities at risk of substantial and imminent harm—and the real risk of being denied basic and emergency treatment—during the pandemic.

In response to the disability community's strong advocacy, the U.S. Department of Health and Human Services' Office of Civil Rights (HHS OCR) published a bulletin on March 28, 2020 to ensure that covered entities follow civil rights laws, including Section 1557 of the Affordable Care Act and Section 504 of the Rehabilitation Act which "prohibit discrimination on the basis of disability in HHS funded health programs or activities." The guidance explains that entities funded by HHS cannot deny people with disabilities medical care "on the basis of stereotypes, assessments of quality of life, or judgments about a person's relative "worth" based

on the presence or absence of disabilities.” It also discusses the obligations of hospitals to ensure equal access and effective communication.”

In many states, efforts have been taken to provide immunity to all hospitals, nursing homes and other congregate facilities, protecting those facilities and their employees from any criminal or civil liability for their treatment decisions and actions. Families, disability advocates and advocates for older adults are outraged. One advocate in New York told the New York Times “Having liability can cause a facility to be more diligent and prevent incidents occurring that will cost them money,” said Susan M. Dooha, the executive director of the Center for Independence of the Disabled. “The preventive power of liability has been muted.”

Based on the findings of the report, *Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters*, NCD recommends that:

- The Department of Justice (DOJ), the Department of Health and Human Services (HHS), the Department of Homeland Security (DHS), and the Department of Housing and Urban Development (HUD) monitor and enforce the Americans with Disabilities Act (ADA) Olmstead integration mandate and the Rehabilitation Act obligation to use federal funds in such a way that people are served in the most integrated setting appropriate to their needs.
- All relevant federal agencies engage with national, state, and local coalitions of disability led organizations and stakeholders.
- DOJ assesses the equal access and non-discrimination civil rights compliance performance of the American Red Cross and other shelter and mass-care providers in relation to actions resulting in institutionalization of disaster survivors with disabilities.
- The Federal Emergency Management Agency (FEMA) explore ways to expeditiously modify its Individual Assistance registration process to curtail the incidence of institutionalization of individuals with disabilities.
- DHS/FEMA and HHS/Administration for Community Living (ACL) provide grant funds to support Independent Living Centers in supporting disaster-impacted people with disabilities in their community. (This funding should incorporate all five core services of Independent Living Centers, including their obligation to prevent and divert institutionalization of disaster-impacted people throughout disaster response and recovery.)
- Relevant federal agencies integrate disaster-related services for veterans with disabilities with all other emergency and disaster services in order to address the current gap in coordination.
- Legislation be introduced and swiftly enacted to address all gaps in meeting the civil rights obligations to people with disabilities impacted by disasters.

Recommendations from the Emergency Relocation of Congregate Setting Residents letter to the National Governors Association:

- Relocate residents to safe, non-congregate, cohort settings that house no more than one person per room
- Identify residents who want to transition to Home & Community Based Services (HCBS)
- Require that institutions / long-term care facilities grant access to essential CIL staff and transition coordinators in order to implement these relocation plans
- Expedite HCBS eligibility determinations for those who want to remain in the community OR who refuse to return to an unsafe congregate setting
- Work with your Department of Commissioners, etc. to utilize alternative funds (such as FEMA Public Assistance Category B funds) to cover the costs of care, shelter and food during disaster relocations
- Immediately lift the restrictions on visitations. Data shows visits from family are critical to the well-being and quality of life of people housed in these congregate settings. Not allowing visitations is contributing to the increases in death

And, the Partnership for inclusive Disaster Strategies led our COVID-19 Coalition to issue the following Legislative Recommendations for Public Health Emergencies and Disasters to meet the urgent and immediate needs of people with disabilities, including multiply-marginalized people, throughout the COVID-19 Public Health Emergency, Presidential Disaster Declarations, concurrent disasters and in preparation for future disasters and public health emergencies:

- There must be the establishment and funding of one or more Disability, Emergency and Disaster Technical Assistance Centers led and managed by disability inclusive emergency management experts, operational within 30 days of enactment in order to meet the immediate lifesaving and life sustaining needs and protecting the rights of 61 million adults with disabilities and for others who

also have access and functional needs in a disaster or public health emergency. Purposes of the Disability, Emergency and Disaster Technical Assistance Centers:

- Operating a National Disability Disaster and COVID-19 rights and needs Hotline
- Developing and delivering remote just-in-time training on the COVID-19 rights and needs of people with disabilities, with a specific focus on:
 - The rights and immediate needs of people with disabilities who need supports and services to protect themselves from exposure.
 - People with disabilities who are in quarantine.
 - People with disabilities who are in isolation or in an acute care medical setting.
 - Information for medical, public health, and public safety officials, government and non-government, and private sector entities to understand their obligations to people with disabilities, before, during and after public health emergencies and disasters.
 - Meeting continuity of operations and continuity of services for serving people with disabilities across the lifecycle and throughout the disaster cycle.
 - Public engagement, coordination between all public and NGO stakeholders to provide accessible information, promising and good practices, and problem-solving via disability accessible teleconference and web-based information sharing.
 - Crisis counseling and Disaster Case Management for people with disabilities, eligible as a result of Federal Disaster Declarations. Crisis counseling and Disaster Case Management must be provided by disability culturally competent providers, and must be equally effective for all people with communication disabilities. Crisis Counseling and Disaster Case Management must be provided without interruption and gaps. Auxiliary aids and services to make communication equally effective include sign language interpreters, real-time captions, CART, plain language, easy read, Braille, large print, screen reader and other alternative formats. Alternative and augmentative communication is used by many people with disabilities to meet their daily communication needs. For people with COVID-19 whose ability to communicate may be temporarily affected, equal access to crisis counseling can be provided by utilizing auxiliary aids and services to meet their urgent crisis communication needs.
- Amendment to Stafford Act—Use of Disaster Response and Recovery Funds
- Fund certain “nonprofit entities” in Category B language—amended to define funding for a training & technical assistance center.
- Funding for disability-led organizations providing life saving and life sustaining assistance in a federally declared, Stafford Act eligible disaster or emergency.
- Fund state, local, tribal and territorial government entities to track the displacement of people with disabilities into skilled nursing facilities (SNF) and other institutions with or without the use of a CMS 1135 Blanket Waiver.
- Require and fund federal, state, local, tribal, and territorial government entities to ensure disability services and supports are provided in the most integrated settings appropriate to the person.
- If the person is in an acute care setting, all reasonable accessibility accommodations and modifications of policies and practices are provided without interruption.
- To maintain all reasonable accessibility accommodations and modifications of policies and practices are provided without interruption at home and throughout transition home from an acute care or institutional setting.
- Increase Home and Community Based Services (HCBS) funding
- Expand funding for Money Follows the Person (MFP)
- Fund federal entities to monitor recipients and subrecipients of federal funds to ensure compliance throughout all disaster-related placement decisions by recipients and subrecipients of federal financial funds within 30 days, and with quarterly reports to Congress.

Additional recommendations for legislative action are all drawn from the 5/24/19 report from the National Council on Disability report to President Trump: *Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters*

- Require CMS to establish a process for Medicaid portability and continuity of services within states and among states, tribes and territories during disasters and public health emergencies to ensure uninterrupted health maintenance and medical care in the least restrictive environment for Medicaid recipients.

- Require that all recipients and subrecipients of federal funds receive just-in-time training in the scope of their obligations to people with disabilities. This training must be developed and delivered by disability led organizations with knowledge, skills and abilities. This training must include information advising that federal funds may be revoked due to noncompliance with the obligation to receive services in the most integrated setting appropriate and that this obligation applies during disasters.
- Training on the scope of the obligations of recipients and subrecipients of federal financial assistance to people with disabilities during the period of hospitalization and discharge for individuals impacted by public health emergencies and disasters, including those who have been abandoned during evacuation, sheltering, and transition to long-term housing.
- Funding will be provided to disability-led organizations to deliver technical assistance to local, state, tribal, territorial and federal agencies responsible for emergency preparedness, community resilience, and disaster-related services, programs, supports, or activities to engage with national, state, and local coalitions of disability-led organizations and stakeholders.
- Fund NCD to lead a review of the National Response Framework, Emergency Support Function Annexes, and Federal Interagency Operations Plans and all other applicable federal doctrine to determine any required updates to specifically address responsibility for meeting the equal access, health maintenance, safety, and independence needs of children and adults with disabilities to prevent institutionalization.
- Fund an organization with expertise in IDEA, ADA, Rehab Act and Stafford Act to assess and make recommendations that disaster-impacted students with disabilities are not excluded from distance learning and returning to school with their peers and that all supports and services included on their IEP or Section 504 plan are provided without interruption. This includes providing services during school closure and upon school reopening in order to meet their individualized educational needs and to prevent institutionalization.
- Fund a comprehensive assessment of with recommendations for the establishment and execution of a seamless and integrated process in Emergency Support Functions #6 and #8 to prioritize health maintenance for children and adults with disabilities and seamlessly deliver services and supports to people in the most integrated setting throughout the evacuation, sheltering, hospitalization, temporary housing, and disaster recovery. Recommendations must include actionable steps for the HHS Secretary's Operations Center and the FEMA Emergency Support Function Leadership Group to ensure the rights and needs of people with disabilities are maintained throughout the period of a declared public health emergency and disaster.
- Establish a roster of federal agencies who must provide senior leadership participation and active engagement in a community led public private partnership with disability organizations with specific expertise and involvement in national disability inclusive emergency management policy and practice.
- Authorize and appropriate funds for DHS and FEMA to provide disaster preparedness grants specifically targeted to organizations led by and serving marginalized communities, including but not limited to people with disabilities experiencing poverty; people with disabilities experiencing homelessness; women with disabilities; people of color with disabilities; and members of the LGBTQ community with disabilities.
- Provide funding and quarterly reporting by DOJ, DHS and HHS to monitor and enforce the obligation under both the ADA and the Rehabilitation Act to serve people with disabilities in the most integrated setting appropriate to their needs.
- Fund the FCC to reestablish its Emergency Access Advisory Committee to establish effective communication access requirements for alerts, warnings and notification, including provision of American Sign Language and other existing and new assistive technology. These guidelines should be developed in consultation and collaboration with DOJ, applying the requirements for equal effective communication access. Implementation should include monitoring and enforcement by the FCC and DOJ.
- Fund immediate operations and research into solutions for existing disability service providers (such as independent living centers, paratransit service providers, meals on wheels, medical supply providers, developmental disability service providers, personal assistants, direct support professionals, birth to 3, ADRCs, AAA, sign language interpreters, peer support, respite, etc to jointly plan for, share information and meet the emergency and disaster needs of the people one or more of them maintain in their database.

- Fund research on HIPAA and Privacy Act laws to determine if and how they need to be revised to allow providers to share information and resources in emergencies and disasters. This is an alternative to the use of “special” registries that repeatedly fail to provide a solution for meeting the civil rights obligations the government has to people with disabilities in emergencies and disasters.
- Fund NCD to review the Federal Mass Evacuation Plan, DRRRA and PKEMRA evacuation planning requirements, and any other plans that use federal funding for evacuation be reviewed by the Department of Justice, Department of Transportation, Department of Homeland Security, and other federal agencies with a role in planning, implementing and/or funding evacuation initiatives to ensure compliance with disability civil rights obligations throughout disaster response and implement all necessary corrective action immediately.
- Fund HHS CMS to develop and implement within 30 days, a comprehensive federal database in collaboration with all other federal entities with admission and monitoring or funding and reimbursement obligations to ensure that all admissions to hospitals and long-term care facilities during and after disasters are monitored at every admission and discharge and that people placed are provided with the assistance needed to return to their community with all supports and services they need to regain and maintain their independence. Reporting to congress must begin NLT 60 days and must continue quarterly until all admissions from the start of a declared emergency (including public health emergency) and disaster have returned home (or died).
- Fund DOJ and other federal entities with enforcement authority to monitor and prohibit the automatic placement of individuals with disabilities in hospital and nursing home settings and direct state and local entities to immediately provide supports and services in the most integrated setting appropriate to any person who does not need this level of care. Monitor and enforce civil rights compliance with Titles II and III of the ADA regarding sheltering.
- Fund DOJ, DHS, and HUD to monitor and enforce compliance with obligations for emergency sheltering in a disaster consistent with emergency sheltering requirements under the Fair Housing Amendments Act. Compliance should occur in transient and long-term emergency shelters.
- Congress funds all elements of the REAADI and DRMA Acts not otherwise specified in these recommendations to ensure that the rights of people with disabilities are protected and that the needs of people with disabilities and older adults are met in concurrent and future disasters.
- This includes:
 - Establish a National Research Center to conduct research and collect and analyze data to determine recommended practices for including people with disabilities and older adults in planning during and following disasters. Establish a “projects of national significance” program to increase the involvement of people with disabilities and older adults in the planning and response to disasters.
 - Establish a National Commission on Disability Rights, Aging and Disasters that will provide recommendations on how to ensure effective emergency preparedness, disaster response, recovery, and community resilience efforts for people with disabilities and older adults.
 - Establish one national and 10 regional Training and Technical Assistance Disability and Disaster Centers that provide comprehensive training, technical assistance, development of funding sources, and support to state, tribal, and local disaster relief; public health entities; social service agencies; and stakeholder groups.
 - Require and fund DOJ to create an oversight committee that will review all ADA settlement continued agreements related to disaster-response activities for the years 2005 to 2017.
 - Medicaid Relief for Disaster Survivors
 - Amending the Social Security Act to provide medical assistance available to relief-eligible survivors of disasters during relief coverage periods in accordance with section 1947.
 - Disaster Relief Medicaid for Survivors of Major Disasters.
 - Promoting Effective and Innovative State Responses to Increased Demand for Medical Assistance Following a Disaster.
 - HCBS Emergency Response Corps Grant Program.
 - Targeted Medicaid Relief for Direct Impact Areas.
 - Presumptive and Continuous Eligibility, No Documentation Required.

- Fund DOJ to provide pointed guidance to sister federal agencies to address the issue of outdated regulations that conflict with the Olmstead integration mandate.
- Fund the University of Minnesota Institute on Community Integration University Center on Excellence in Disabilities Residential Information Systems Project (RISP) to expand their research on institutionalization during and after disasters in all states and territories to include people with all types of disabilities.
- Fund DOJ to assess the equal access and non-discrimination civil rights compliance performance of the American Red Cross and other shelter and mass care providers in relation to actions resulting in institutionalization of disaster survivors and issue orders for immediate corrective actions as needed.
- Fund DOJ to issue a fact sheet that defines monitoring and enforcement obligations in order to ensure compliance with civil rights requirements in the placement, as well as to track and use of federal funds associated with emergency and disaster sheltering of people with disabilities.
- Fund Independent Living Centers and other affordable and accessible housing experts to provide individual and household disaster case management focused on the transition and permanent housing needs of disaster-impacted people with disabilities.
- Fund Independent Living Centers and other experts on affordable and accessible housing to provide individual and household disaster case management focused on the transition and permanent housing needs of disaster-impacted people with disabilities during concurrent and future disasters.
- Fund HUD to establish metrics and measure the nationwide availability of the ready supply of accessible, adaptable, affordable, and disaster-resistant permanent and temporary housing.
- Fund FEMA and HUD to create systems for collecting and publishing all disaster recovery and mitigation expenditures for housing that is subject to compliance with requirements under the Rehabilitation Act, Fair Housing Amendments Act, and the ADA. This reporting systems must measure and report compliance with accessibility standards.
- Fund DOJ to monitor and enforce civil rights compliance throughout all phases of disaster response to: a. Prevent abandonment on the part of government entities, such as National Guard and other recipients and sub-recipients of federal financial assistance. b. Ensure compliance throughout all disaster related placement decisions made by recipients and subrecipients of federal financial assistance. c. Ensure compliance with Titles II and III of the ADA pertaining to sheltering.
- Fund FEMA to explore ways to modify their Individual Assistance registration process expeditiously to curtail the incidence of institutionalization of individuals with disabilities during concurrent and future disasters.
- Fund the DHS Office for Civil Rights and Civil Liberties to lead and manage the 25-plus federal agencies included in Executive Order 13347, which established the Interagency Coordinating Council on Emergency Preparedness and Individuals with Disabilities (ICC), to collaborate to ensure moving forward that emergency preparedness plans incorporate the perspectives and needs of individuals with disabilities, and that barriers to access, services, and planning are removed.
- Fund member agencies of the ICC to place disability experts from their agency into the field during federally declared disasters in all FEMA Joint Field Offices and Area Field Offices throughout disaster operations. These experts must be qualified by either the FEMA Qualification System or the National Qualification System to ensure adequate expertise in guiding compliance with the civil rights of disaster-impacted people with disabilities to prevent institutionalization during concurrent and future disasters.
- Fund HHS to establish a process for states and territories to immediately loan and replace durable medical equipment, consumable medical supplies, assistive technology, and disability services and supports, well as disaster case management to disaster survivors with disabilities, in order to provide equal access and non-discrimination throughout emergency response to meet immediate health, safety, and independence needs.
- Fund the Veterans Administration and HHS to ensure disaster-related services for veterans are integrated with all other emergency and disaster services to address the current gap in coordination between services for veterans with disabilities and services for other people with disabilities.

- Fund the immediate provision of experts on reasonable accommodations for every disaster applicant until such time as applicants with disabilities can request and receive these reasonable accommodations through the FEMA application.

IN CLOSING

One of my favorite sayings is associated with the Chinese symbols for Crisis, Danger and Opportunity. “Crisis is an opportunity riding on a dangerous wind.”

In these very troubled times, we all face three choices. Do we go back to what wasn’t working before? Do we stay stuck right where we are until the next catastrophic event forces us to scramble again, or do we use this unprecedented opportunity to boldly move forward on the dangerous wind that is blowing, all of us, to create and sustain a resilient country that prioritizes the resilience of the people who will once again be disproportionately impacted if we don’t act. I choose the bold commitment to resilience for all and I ask you to join me in turning words into action.

Thank you for listening.

Ms. TITUS. Well, thank you. Perhaps we can get to some of those examples in the questions. We appreciate your testimony very much.

Ms. Yentel?

Ms. YENTEL. Yes, Chair Titus and Ranking Member Katko and members of the subcommittee, thank you for the opportunity to testify before you today. The National Low Income Housing Coalition has worked on disaster housing recovery for 15 years since Hurricane Katrina, and from this experience we have reached a simple conclusion: America’s disaster housing recovery system is fundamentally broken.

It certainly exacerbates the housing crisis, solidifies segregation and racial inequities, and deepens inequality. When disasters strike, the lowest income and most marginalized people are often hardest hit. They have the fewest resources, and face the longest, steepest path to recovery. Yet these are the households that are least likely to receive FEMA assistance.

FEMA prioritizes protocol over outcomes, relies on programs that are inefficient or unhelpful to low-income people, creates unnecessary and arbitrary deadlines, and refuses to release data on program requirements or outcomes.

FEMA has consistently failed to learn lessons from past disasters, and to apply them to future efforts. A clear example is FEMA’s refusal to update the Disaster Housing Assistance Program, or DHAP, which Republican and Democratic administrations have upheld as a best practice to help families find permanent housing solutions. Instead, FEMA relies on programs that low-income and marginalized families struggle to access and use. As a result, homelessness often increases in communities impacted by disasters.

After Hurricane Maria, FEMA implemented arbitrary deadlines that required Puerto Ricans that evacuated the island to leave FEMA-funded hotels before they had alternate housing. As a result, homelessness increased in communities with Puerto Rican evacuees by 14 percent in Massachusetts, and 17 percent in Connecticut. After Hurricane Harvey, homelessness increased in Houston by 18 percent. Nearly 20 percent of people experiencing homelessness in the city reported that they had become homeless as a

result of the disaster, a stunning indictment of the failed disaster response.

FEMA-funded programs exacerbate racial inequities. After Hurricane Harvey, nearly half of disaster survivors with the lowest incomes, mostly people of color, were denied FEMA assistance. The vast majority of higher income or mostly white households were approved. The average white family in the higher income neighborhoods received about \$60,000 per person. Black families in poorer neighborhoods received an average of \$84 per person.

FEMA frequently denies assistance to eligible survivors because of inflexible requirements. For example, title documentation rules bar low-income homeowners, residents of manufactured housing, and renters without written leases from receiving the assistance for which they are eligible. After Hurricane Maria, FEMA denied assistance to at least 77,000 people because of otherwise accepted informal systems for documenting homeownership.

Rural, historically black, or immigrant communities also implement informal systems of home ownership. After Hurricane Michael, FEMA denied assistance to as many as 50 percent of applicants in certain parts of the panhandle due to title issues. After California's wildfires, FEMA denied assistance to 70 percent of applicants due to title issues. In all cases, FEMA refused to modify its programs to accommodate applicants and needs.

FEMA has known this issue is a problem since 1995, and has done little to remedy it. FEMA has a systemic lack of transparency. The agency refuses to make information public about its application and appeals processes, which leads to higher and often shocking levels of denial rates for low-income people.

People experiencing homelessness are often most at risk during a disaster, and have the fewest resources to recover, but they are denied FEMA assistance, even if all their belongings were destroyed by a disaster. These are just some examples of our country's broken disaster recovery system, and the ways in which it neglects the people most in need of assistance, and my written testimony has many more examples and evidence.

Congress should rebuild a disaster housing recovery system that is centered on the needs of the lowest income people. Racial equity and equity for all marginalized and impacted people should be a central and explicit goal of Federal disaster policy. There must be opportunities for public engagements, systemic transparency, full accountability, due process, robust civil rights enforcement, fair mitigation practices, and a focus on increased local capacity and benefits. These priorities must be reflected in every stage of disaster recovery and response. This work will take many years, but Congress can take action immediately.

Congress should permanently authorize the DHAP program, and activate it after every major disaster. Congress should require FEMA to activate it now for those people experiencing homelessness that have been moved to hotels to contain the spread of COVID-19.

Congress should enact the Housing Survivors of Major Disasters Act, which passed unanimously out of this committee, and would help overcome documentation issues, and Congress should require that FEMA provide basic, essential information about its response

and recovery efforts, including full transparency on program eligibility, the application process, reasons for denial of assistance and outcomes.

Decades of evidence makes clear that our country's disaster housing system is fundamentally broken. Congress must develop a new system that centers the housing needs of the lowest income survivors, including people of color, people with disabilities, and others. Thank you again for the opportunity to testify and for holding this important hearing. I look forward to your questions.

[Ms. Yentel's prepared statement follows:]

Prepared Statement of Diane Yentel, President and Chief Executive Officer, National Low Income Housing Coalition

Committee Chair DeFazio and Ranking Member Graves, Subcommittee Chair Titus and Ranking Member Katko, and members of the subcommittee, thank you for the opportunity to testify before you today on ways to ensure that our nation's disaster housing recovery and response efforts address the unique and often overlooked needs of low-income people, people of color, people with disabilities, people experiencing homelessness and other marginalized people.

The National Low Income Housing Coalition (NLIHC) is dedicated solely to achieving socially just public policy that ensures people with the lowest incomes in the United States have affordable and decent homes. NLIHC leads the Disaster Housing Recovery Coalition of more than 850 national, state, and local organizations, including many working directly with disaster-impacted communities and with first-hand experience recovering after disasters. We work to ensure that federal disaster recovery efforts prioritize the housing needs of the lowest-income and most marginalized people in impacted areas.

NLIHC has worked on disaster housing recovery since Hurricane Katrina, and from this experience, we have come to a simple conclusion: America's disaster housing recovery system is fundamentally broken and in need of major repair and reform. It is a system that was designed for middle-class people and communities—a system that never contemplated, and so does not address, the unique needs of the lowest-income and most marginalized people. Because of this fundamental design flaw, these families are consistently left behind in recovery and rebuilding in disaster after disaster. The disaster recovery system not only ignores the needs of the lowest-income people, but it exacerbates many of the challenges they faced prior to the storm; disaster response and recovery often worsens the housing crisis, solidifies segregation, and deepens inequality.

When disasters strike, the lowest-income and most marginalized survivors are often hardest hit. They have the fewest resources and face the longest, steepest path to recovery. Despite the clear need, federal efforts frequently leave these survivors without the assistance needed to recover and leave their communities less resilient to future disasters. Without this critical assistance, many of the lowest-income and most marginalized survivors return to uninhabitable homes, sleep in cars or at shelters, double- or triple-up with other low-income families, or pay more than half of their limited incomes on rent, putting them at increased risk of displacement, eviction, and, in worst cases, homelessness.

The national coronavirus pandemic underscores the deep inequities embedded in our nation's disaster housing response and recovery system and the urgent need for reform. Black and Native people—who, even before the pandemic, faced higher rates of homelessness and housing instability due to decades of systemic racism in housing and other systems—are most at risk of severe illness and death due to the coronavirus, and Black and Latino people are disproportionately harmed by the resulting economic impacts. Now their homes—and with it their ability to keep themselves and their families safe—are at risk. Without significant and immediate federal action, there will be a wave of evictions and a spike in homelessness in the coming months and, once again, Black and brown people will be most harmed.

In my testimony today, I will discuss key barriers to an equitable and comprehensive disaster housing recovery and opportunities to reform our country's disaster framework. These barriers and opportunities are reflected in "Fixing America's Broken Disaster Housing Recovery System," a two-part report published by NLIHC and Fair Share Housing Center of New Jersey.

These policy recommendations reflect nine core principles that should guide our country's disaster housing response and recovery:

1. Recovery must be centered on survivors with the greatest needs and ensure equity among survivors, especially for people of color, low-income people, people with disabilities, immigrants, LGBTQ people, and other marginalized people and communities;
2. Everyone should be fairly assisted to fully and promptly recover through transparent and accountable programs and strict compliance with civil rights laws, with survivors directing the way assistance is provided;
3. Securing help from government must be accessible, understandable, and timely;
4. Everyone in need should receive safe, accessible shelter and temporary housing where they can reconnect with family and community;
5. Displaced people should have access to all the resources they need for as long as they need to safely and quickly recover housing, personal property and transportation;
6. Renters and anyone experiencing homelessness before the disaster must quickly get quality, affordable, accessible rental property in safe, quality neighborhoods of their choice;
7. All homeowners should be able to quickly rebuild in safe, quality neighborhoods of their choice;
8. All neighborhoods should be free from environmental hazards, have equal quality and accessible public infrastructure, and be safe and resilient; and
9. Disaster rebuilding should result in local jobs and contracts for local businesses and workers.

These core principles and the following policy recommendations should serve as a guidepost for this committee and other federal policymakers as you work to reform our nation's disaster housing recovery framework.

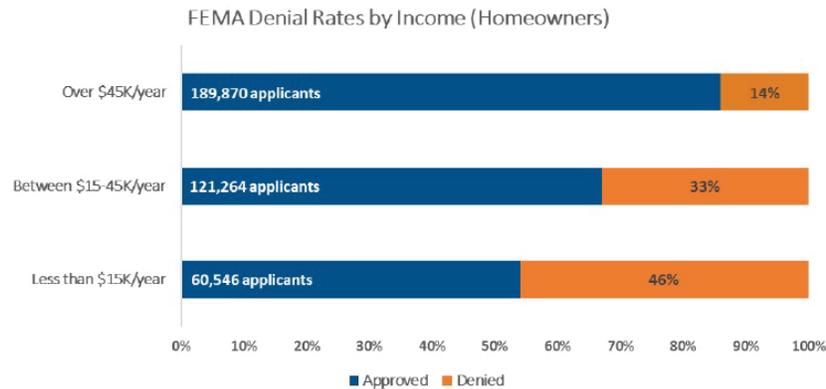
BARRIERS TO AN EQUITABLE HOUSING RECOVERY

After a disaster, displaced families must have a safe, accessible, and affordable place to live while they recover. FEMA programs can provide crucial assistance to help survivors recover from a disaster by providing temporary shelter and financial assistance and making basic structural repairs to homes. However, FEMA created unnecessary and often insurmountable barriers to accessing these programs, leaving many low-income survivors at increased risk of displacement, eviction, and, in worst cases, homelessness.

FEMA programs are not designed to serve lower-income people with the greatest needs; these households are consistently denied assistance. For example, nearly half of disaster survivors with the lowest incomes were denied FEMA Individual Assistance after Hurricane Harvey. The vast majority of higher-income households were approved¹ (see Figure 1).

¹Adams, A. 2018. *Low-income Households Disproportionately Denied by FEMA Is a Sign of a System that is Failing the Most Vulnerable*. Retrieved from <https://texashousers.org/2018/11/30/low-income-households-disproportionately-denied-by-fema-is-a-sign-of-a-system-that-is-failing-the-most-vulnerable/>

Figure 1



FEMA'S FAILURE TO ADDRESS HOUSING NEEDS

Despite the clear need, FEMA housing programs neglect the housing needs of America's lowest-income disaster survivors and exacerbate housing insecurity. Without the affordable and accessible homes survivors need, many return to uninhabitable homes, sleep in cars or tents, stay at shelters, double- or triple-up with other low-income families, or pay more than half of their limited incomes on rent, putting them at increased risk of eviction and, in worst cases, homelessness.

Research from NLIHC demonstrates that disasters exacerbate the existing rental housing crisis for households with the lowest incomes.² After Hurricane Sandy, households already dealing with housing instability were further destabilized through displacement and increased rents. Two years after Sandy, few new affordable homes had been completed yet survivors were no longer eligible for federal rental assistance.³

The impact of disasters on low-income people's housing needs is made worse by FEMA's continued refusal to activate the Disaster Housing Assistance Program (DHAP), rendering some survivors homeless.⁴ During past disasters, both Republican⁵ and Democratic^{6,7} administrations upheld DHAP as a best practice for disaster housing recovery. DHAP was created after hard-won lessons from Hurricane Katrina, and it has been used successfully in some major disasters since that time. Under DHAP, displaced families receive longer-term direct rental assistance and case management services provided by local housing professionals with extensive knowledge of the local housing market. This assistance helps families find permanent housing solutions, secure employment, and connect to public benefits as they rebuild their lives.⁸

After recent disasters, FEMA has refused to activate the DHAP program and instead relied on its Temporary Shelter Assistance (TSA) program and other programs

²National Low Income Housing Coalition. 2019. *Long-term Recovery of Rental Housing: A Case Study of Highly Impacted Communities in New Jersey after Superstorm Sandy*. Retrieved from <https://nlihc.org/sites/default/files/Sandy-Rental-Recovery-Report.pdf>

³Fair Share Housing Center, Latino Action Network & NAACP New Jersey State Conference. 2015. *The State of Sandy Recovery (Second Annual Report)*. Retrieved from http://fairsharehousing.org/images/uploads/State_of_Sandy_English_2015.pdf

⁴National Low Income Housing Coalition. 2018. *Setting the Record Straight: FEMA's Failure to Address Long-Term Housing Needs of Survivors*. Retrieved from https://nlihc.org/sites/default/files/FEMA_Setting-The-Record-FEMA-TSA.PDF

⁵Homeland Security and Counterterrorism. 2006. *The Federal Response to Hurricane Katrina: Lessons Learned*. Retrieved from <https://permanent.access.gpo.gov/lps67263/katrina-lessons-learned.pdf>

⁶Federal Emergency Management Agency. 2009. *National Disaster Housing Strategy*. Retrieved from https://www.fema.gov/media-library-data/20130726-1819-25045-9288/ndhs_core.pdf

⁷Federal Emergency Management Agency. 2011. *National Disaster Recovery Framework: Strengthening Disaster Recovery for the Nation*. Retrieved from <https://www.fema.gov/pdf/recoveryframework/ndrf.pdf>

⁸National Low Income Housing Coalition. 2017. *Disaster Housing Assistance Program*. Retrieved from <https://nlihc.org/sites/default/files/DAHP-Program.pdf>

that are inaccessible to many low-income survivors. TSA is intended to reduce the number of survivors in congregate shelters by covering the cost of staying in an approved hotel or motel for an initial period of up to 14 days. Once again, this is a program better suited to middle-class households than to low-income people.

Low-income families are often unable to access TSA motels due to financial and other barriers, including the practice of motels charging daily “resort” fees and requiring security deposits or credit cards. Because TSA must be renewed every 14 days, those disaster survivors who are able to access the program face arbitrary deadlines that cause them to scramble to submit required paperwork or leave the motel before finding a permanent housing solution. While FEMA is authorized to provide TSA for at least 18 months, the Trump administration abruptly terminated⁹ the program for nearly 2,000 Puerto Rican families displaced to the mainland after Hurricane Maria, forcing them to find alternative housing or to return to their uninhabitable homes on the island with just a few hours’ notice. Without DHAP, states that received large numbers of displaced Puerto Rican survivors—including Massachusetts and Connecticut—saw increased homelessness by 14 percent and 17 percent respectively.^{10 11}

FEMA’s other temporary housing assistance programs—Rental Assistance and Direct Temporary Housing Assistance—are also problematic for low-income families. Through its Rental Assistance program, FEMA provides financial assistance to survivors to rent temporary housing. The amount of assistance provided to survivors is based on the impacted area’s Fair Market Rent (FMR), which is often considerably less than rental costs in the area to which survivors have been displaced. Moreover, FEMA rental assistance covers rent and utilities for only two months, which is too short a timeframe for many of the lowest-income survivors. Many landlords are unwilling to enter into leases with survivors when only two months of rental assistance is assured.

Under FEMA’s Direct Lease program, FEMA enters into lease agreements with property owners to provide rent assistance for survivors. A similar program, the Multi-Family Lease and Repair program, allows FEMA to enter into lease agreements with multifamily housing property owners and to make repairs to provide temporary housing. Both programs, however, have extremely low rates of participation by property owners and are inadequate to meet post-disaster rental needs.

After Hurricane Harvey, FEMA piloted a program where states take on the responsibility of implementing and managing temporary housing programs. These state-run disaster housing programs face significant delays and do not address the full scale of housing needs because FEMA continues to retain control over eligibility and the program-assignment process. According to FEMA, only a few hundred families were served under state-administered housing programs following Hurricanes Harvey and Irma, despite damage to or destruction of more than 307,000 homes in Texas¹² and 27,649 homes in the Florida Keys alone.¹³ Other state-administered programs like Multifamily Lease and Repair were wholly unsuccessful because property owners declined to participate.

Due to the lack of housing assistance, one year after Hurricane Harvey nearly 20% of individuals experiencing homelessness in Houston reported that they became homeless as a result of the disaster.¹⁴ Without DHAP, homelessness increased in Houston by 18%.¹⁵ This is a colossal failure of the federal government’s disaster recovery efforts.

⁹National Low Income Housing Coalition. 2018. *NLIHC’s Response to Court Ruling Allowing FEMA to Move Forward on Evicting Hurricane Maria Survivors*. Retrieved from <https://nlihc.org/news/nlihc-response-court-ruling-allowing-fema-move-forward-evicting-hurricane-maria-survivors>

¹⁰Martin, T. 2019. *After a Long Road, Hurricane Maria Evacuees Settle in Massachusetts*. Retrieved from <https://www.wgbh.org/news/local-news/2019/01/23/after-a-long-road-hurricane-maria-evacuees-settle-in-massachusetts>

¹¹Skahill, P. 2018. *Hurricane Maria Drives Up Connecticut’s Homelessness Numbers*. Retrieved from <https://www.wnpr.org/post/hurricane-maria-drives-connecticuts-homelessness-numbers>

¹²CBS News. 2019. *We’re Still Here: Volunteers Rebuilding Homes 2 Years After Hurricane Harvey*. Retrieved from <https://www.cbsnews.com/news/hurricane-harvey-houston-meet-the-volunteers-rebuilding-homes-all-hands-hearts-2019-08-24/>

¹³Monroe County, Florida Government. 2017. *Approximate Damage Assessment Results*. Retrieved from <http://www.monroecounty-fl.gov/DocumentCenter/View/12459/Approximate-Damage-Assessment-Results?bidId=>

¹⁴Vigh, E. 2019. *Hurricane Harvey Caused Homelessness Lingers in Harris County 2 Years Later. Community Impact*. Retrieved from <https://bit.ly/3hEvKHW>

¹⁵Ward, A. 2018. *Homeless after Harvey: For Some, the Historic Flooding in Houston Washed Away Shelter and Security*. Retrieved from <https://www.houstonchronicle.com/news/houston-weather/hurricaneharvey/article/Homeless-after-Harvey-For-some-the-historic-13171309.php>

During the current COVID-19 pandemic, FEMA should have activated DHAP to provide housing and shelter for people experiencing homelessness. DHAP could have been used to quickly move people out of congregate shelters or encampments and into affordable homes, where they can more easily keep themselves and their neighbors healthy. Instead, FEMA has worked with some states and localities under its Public Assistance program to place a very limited number of people experiencing homelessness into temporary motels for self-quarantine and self-isolation.

Before Public Assistance funding for these motels end, FEMA should activate DHAP to help transition these individuals into permanent housing, rather than allowing individuals to be pushed back into homelessness as is already beginning to happen. For example, after funding for a hotel voucher program in Fort Lauderdale, Florida ran out on July 17, over 70 people experiencing homelessness who had been temporarily residing at a Rodeway Inn & Suites were forced to leave, even if they did not have a permanent housing plan.¹⁶

FEMA NEGLECTS THE NEEDS OF MARGINALIZED POPULATIONS

People Experiencing Homelessness

People experiencing homelessness are often most at risk during a disaster and have the fewest resources to recover. People experiencing homelessness are unlikely to have the resources needed to adequately prepare for or evacuate prior to a disaster, and their unique needs are often overlooked by emergency managers when planning for disasters. During the recovery, homelessness resources are stretched thin to accommodate those households that became housing insecure as a result of the disaster and resources for pre-disaster homeless populations are deprioritized. Communities are often unable to return to the level of care provided to people experiencing homelessness before the disaster.

Despite the clear need, people experiencing homelessness are often excluded from or face additional barriers to FEMA resources, including mass shelters and individual assistance. Following Hurricane Irma, there were reports of FEMA requiring people experiencing homelessness to wear armbands and be separated from other disaster survivors.¹⁷ Pre-disaster homeless populations are often denied FEMA assistance, even if all their belongings were destroyed in the disaster.¹⁸ These actions further stigmatize people experiencing homelessness and often prevent them from accessing the resources they need to stay safe.

During the current COVID-19 pandemic, people experiencing homelessness are particularly at risk of severe illness and death from coronavirus, yet many of these individuals have been unable to access the assistance they need to self-isolate and self-quarantine.

Narrow eligibility criteria for FEMA reimbursement, however, have created significant barriers to moving people experiencing homelessness to safety in hotels and motels. In San Francisco, for example, people experiencing homelessness must be over the age of 60 or have documented underlying health conditions in order to be deemed eligible. This narrow interpretation of eligibility criteria has limited the efficiency of San Francisco's hotel program.¹⁹ Additionally, FEMA reimbursement of non-congregate shelter for people experiencing homelessness is only made available if a Governor requests it; people who are homeless in states with governors who do not prioritize their needs are left with no assistance.

Seniors and People with Disabilities

People with disabilities also face barriers to assistance. They are two to four times more likely to die or sustain a critical injury during a disaster than people without

¹⁶ Kelley, E. 2020. *Fort Lauderdale Ending Program to House Homeless in Hotels This Weekend*. Retrieved from <https://www.sun-sentinel.com/coronavirus/fl-ne-fort-lauderdale-evicts-homeless-20200717-h5vjhwlnndfnf6batks4rgegk3va-story.html>

¹⁷ Dearen, J., & Kennedy, K. 2017. *Yellow Wristbands, Segregation for Florida Homeless in Irma*. Retrieved from <https://www.usnews.com/news/us/articles/2017-09-29/yellow-wristbands-segregation-for-florida-homeless-in-irma>

¹⁸ Ehrlich, A. 2019. *After Wildfires, Homeless People Left Out of Federal Disaster Aid Programs*, Oregon Public Broadcasting. Retrieved from <https://www.opb.org/news/article/fema-disaster-aid-wildfires-homeless-people/>

¹⁹ Karlis, N. 2020. *How Bureaucracy Kept the Bay Area from Housing the Homeless*. Retrieved from <https://www.salon.com/2020/06/21/how-bureaucracy-kept-the-bay-area-from-housing-the-homeless/>

disabilities.²⁰ Despite an increased risk of death and injury, many emergency plans do not address how local officials can reach those with disabilities during a disaster. People with disabilities are often diverted to “special needs” or “medical shelters,” even if they do not require the level of care provided there. This practice fosters forced institutionalization and places people with disabilities at greater risk of injury or death.

During Hurricane Harvey, elderly residents in a Galveston, Texas nursing home were photographed with floodwaters up to their waists,²¹ and 14 nursing home residents in the largely unregulated state nursing home industry died in 2017 from heat exhaustion when their facility lost power in Hurricane Irma.²² The COVID-19 pandemic has devastated people residing and working in nursing homes, psychiatric hospitals, and other congregate settings for people with disabilities. People living in these settings comprise less than 1% of the U.S. population, but nearly 50% of coronavirus deaths.²³

Immigrants

Individuals with limited English proficiency often face difficulty in accessing FEMA resources. For example, in Puerto Rico, FEMA struggled to find translators or provide basic information in Spanish, which is the predominant language on the island.²⁴ While FEMA’s regulations require that such documents are produced, advocates commonly express concern that the agency and its grantees regularly distribute forms only in English or with limited translated versions.

ONEROUS TITLE DOCUMENTATION REQUIREMENTS

Eligible applicants often do not receive FEMA assistance due to inflexible and arbitrary requirements, rigid interpretations of rules, and confusing and bureaucratic processes. FEMA’s rigid title documentation requirements, for example, have barred low-income survivors from FEMA assistance.

FEMA consistently requires disaster survivors to provide title documentation in order to prove eligibility for the agency’s Individual Assistance (IA)²⁵ program and other recovery aid, even though its own guidance on Individual and Household Assistance allows alternative documentation of ownership. Low-income homeowners, residents of manufactured housing, renters without written leases, and other individuals frequently lack such documentation or the ability to quickly procure proper documents. FEMA’s rigid and unnecessary policy has harmed low-income disaster survivors since at least 1995, but FEMA has done little to resolve the problems.

After Hurricane Maria, FEMA denied assistance to at least 77,000 survivors due to title documentation issues.²⁶ For months, NLIHC’s Disaster Housing Recovery Coalition pushed FEMA to remove this unnecessary obstacle to low-income Puerto Ricans receiving needed assistance. Finally, FEMA’s Office of Chief Counsel engaged and worked with DHRC members Ayuda Legal Huracan Maria, Fundación Fondo de Acceso a la Justicia, and Servicios Legales de Puerto Rico to prepare a “sworn statement” that would allow Puerto Rican homeowners without title documents to prove ownership of their homes so that they can receive the assistance to which they are entitled.

²⁰ Timmons, P. “Disaster Preparedness and Response: The Special Needs of Older Americans,” Statement for the Record, Special Committee on Aging, U.S. Senate, September 20, 2017, available at https://www.aging.senate.gov/imo/media/doc/SCA_Timmons_09_20_17.pdf.

²¹ Ferguson, J. W. 2017. *Eighteen People Rescued from Flooded Assisted Living Facility*. Retrieved from https://www.galvnews.com/news/free/article_e1fff8e-435d-5c78-ab46-57d6bc7dc6a5.html

²² CNN. 2017. *Husband and Wife Among 14 Dead After Florida Nursing Home Lost A/C*. Retrieved from <https://www.cnn.com/2017/10/09/health/florida-irma-nursing-home-deaths-wife/index.html>

²³ Mizner, S. 2020. *COVID-19 Deaths in Nursing Homes are not Unavoidable—They are the Result of Deadly Discrimination*. Retrieved from <https://www.aclu.org/news/disability-rights/covid-19-deaths-in-nursing-homes-are-not-unavoidable-they-are-the-result-of-deadly-discrimination/>

²⁴ Davidson, J. 2020. *How a lack of diversity at federal agencies can have serious consequences*. Retrieved from https://www.washingtonpost.com/politics/how-a-lack-of-diversity-at-federal-agencies-can-have-serious-consequences/2020/02/29/ceec904e-5a65-11ea-8753-73d96000faae_story.html

²⁵ Individual Assistance (IA) programs provide financial and program assistance directly to disaster survivors, as opposed to governments or eligible nonprofits. See: <https://www.fema.gov/media-library-data/1565194429982-5674cd81399faeb00cc72ab7fc4d84f/FACTSHEETIndividualAssistanceProgram.pdf>

²⁶ National Low Income Housing Coalition. 2019. *Impact of Hurricane Maria*. Retrieved from <https://nlihc.org/sites/default/files/Hurricane-Impact-Maria.pdf>

But FEMA refuses to provide the sworn statement to survivors or even to make it available on FEMA's website, social media, or at Disaster Recovery Centers, greatly limiting the ability of survivors to make use of this new resource. FEMA has told congressional offices that it is not allowed to share such documents unless they have been approved by the Office of Management and Budget, but FEMA has not taken any steps to get the appropriate approval. FEMA staff have now indicated that rather than formally adopting a sworn statement, the agency may instead simply refuse to create such documents after future disasters, doubling down on a clearly flawed and failed policy.

These same issues occurred in the continental U.S. In North Carolina and other parts of the American South, rural, historically African American communities often do not use title systems, instead implementing informal systems like those used in Puerto Rico. After Hurricane Katrina, thousands of poor Alabamians were denied assistance due to lack of formal title on their damaged homes. After Hurricane Michael, FEMA denied assistance to as many as 50% of applicants in certain parts of the panhandle largely due to elderly households and mobile homeowners lacking FEMA-required title documentation.²⁷ After California's wildfires, FEMA denied assistance to 70% of applicants due to title issues.²⁸ Those denied were predominantly rural mobile home owners, many of them farmworkers or other low-income workers, who do not have title to their homes. In all cases, FEMA refused to modify its programs to accommodate the situation, choosing instead to deny eligible applicants needed assistance to which they were entitled.

Disincentives to apply for assistance and high denial rates not only limit immediate assistance for low-income survivors, but these factors also distort the entire disaster recovery process because IA application data is used to make funding determinations throughout the federal disaster recovery process.

FEMA'S SYSTEMIC LACK OF TRANSPARENCY

FEMA has consistently refused to clarify or make public important information about its aid application process. By not releasing this information, FEMA makes it difficult, if not impossible, to determine who is eligible to receive assistance and why assistance is denied. A confusing appeals process leads to higher denial rates for low-income disaster survivors.

While FEMA, SBA, and HUD offer assistance programs to disaster survivors, basic information on program eligibility is not made publicly available. Without such information, disaster survivors often apply to all programs with the hopes that at least some assistance will be provided. For low-income individuals who may lack internet or phone access or who may need special accommodations to allow them to apply, completing multiple applications can be especially problematic. As a result, many of the disaster survivors with the lowest incomes forgo applying for assistance all together, despite their need.

FEMA has consistently refused to give reasons upfront for denials or opportunities for applicants to correct errors or provide more information. Instead of receiving guidelines or clarification from FEMA, survivors and advocates must work through a lengthy administrative process in order to be given a reason for their denial. The lack of clarity makes it more difficult for assistance organizations attempting to inform and assist low-income survivors after a disaster. As a result, appeals take longer and are more costly.

The FEMA appeals process is confusing and difficult. A denied applicant must first submit a form explaining the dispute and providing supporting documentation. FEMA denial letters, however, provide only very vague reasons for the initial denial of assistance. The denied applicant must refute all possible interpretations of the reason, or they will lose their appeal. As a result, low-income survivors with little access to legal representation or the money for a protracted legal fight simply do not appeal at all.

It is extremely difficult to access basic data about FEMA programs and processes. Freedom of Information Act (FOIA) requests to FEMA often go months or years without being answered. NLIHC filed a FOIA request in December 2018 requesting basic materials, including FEMA's application for assistance, procedure manuals for determining eligibility, and data sharing agreements with HUD and other federal agencies. To date, FEMA has not provided these materials. In other cases, FEMA refuses to provide basic information, claiming grounds of privilege. In recent years,

²⁷ National Low Income Housing Coalition. 2019. *Impact of Hurricane Michael*. Retrieved from <https://nlihc.org/sites/default/files/Hurricane-Impact-Michael.pdf>

²⁸ National Low Income Housing Coalition. 2019. *Impact of the 2018 California Wildfires*. Retrieved from <https://nlihc.org/sites/default/files/California-Wildfire-2018.pdf>

some progress has been made with the release of data after major disasters through FEMA's OpenFEMA portal. These changes, while a welcome development, are not enough and may not be continued.

FEMA'S INFLEXIBILITY AND INABILITY TO ADJUST TO NEW CONDITIONS

Climate change means disasters are more destructive, more frequent, and impact a broader geographic scope, posing new challenges for FEMA and disaster recovery efforts. FEMA is not adapting its thinking or its programs to respond to these challenges, instead sticking to a rigid system of disaster aid and recovery based on responding to contained local disasters. FEMA has little capacity to effectively deal with both large, regional disasters and the unique circumstances and needs of a specific community impacted by a disaster.

FEMA has a rigid allegiance to protocol over outcomes, a stubborn reliance on programs inaccessible to low-income survivors and repeatedly refuses to release important data on recovery outcomes. FEMA relies heavily on protocol written in Washington, D.C. and not on what the agency hears from advocates, survivors, FEMA employees in the field, and other stakeholders. FEMA systems are not designed to adapt to situations on the ground. As a result, predictable issues repeatedly arise after each disaster and go unaddressed by the agency, further harming low-income survivors.

FEMA has consistently failed to learn larger lessons from past disasters and apply them to future disaster recovery efforts. FEMA's own internal watchdog, the Department of Homeland Security Office of the Inspector General, removed criticisms from reports on the agency's disaster response and replaced them with success stories, praising FEMA's work.²⁹ As a result of this lack of internal critique and self-adjustment, FEMA repeats the same mistakes, and does similar harm, disaster after disaster.

FEMA'S RESPONSE TO COVID-19

People who are homeless and contract coronavirus are twice as likely to be hospitalized, two to four times as likely to require critical care, and two to three times as likely to die than others in the general public. If unchecked, as many as 20,000 people who are homeless could require hospitalization and nearly 3,500 could die.³⁰ During COVID-19, congregate sheltering poses a severe risk to people experiencing homelessness and people with disabilities, who are more likely to have pre-existing medical conditions than the general public. The only way to reduce this risk is to move these individuals to safer non-congregate sheltering.

Congress provided critical resources in the "Coronavirus Aid, Relief, and Economic Security (CARES) Act," including FEMA Public Assistance (PA) funds, to address the critical need to move people experiencing homelessness to non-congregate settings. Despite congressional efforts, many states, local governments, and homeless service providers continue to face barriers to effectively and efficiently using FEMA resources. FEMA failed to release clear guidance regarding program rules, including rules related to reimbursement eligibility, the use of matching funds, and the duplication of benefits. The lack of clarity led to delays among county and local decision-makers who fear they will be unable to secure FEMA reimbursements for the cost of moving people to safety.

In North Carolina, for example, the state's guidance vaguely implied that all individuals residing at shelters were eligible for reimbursable non-congregate sheltering. However, FEMA initially failed to clarify the guidelines, and many local officials refused to recognize requests to shelter members of the broader homeless population.³¹ Lack of clear guidance from FEMA and distrust of its reimbursement process also impacted San Francisco's participation in Project Roomkey—a California plan to utilize hotel rooms to shelter thousands of individuals experiencing homelessness. Concerns about whether FEMA would reimburse the costs of hotels and FEMA's requirement that governments spend the money first have contributed to

²⁹ U.S. Department of Homeland Security Office of Homeland Security. 2019. *Special Report: Review Regarding DHS OIG's Retraction of Thirteen Reports Evaluating FEMA's Initial Response to Disasters*. Retrieved from <https://www.oversight.gov/sites/default/files/oig-reports/OIG-19-41-May19.pdf>

³⁰ <https://endhomelessness.org/resource/estimated-emergency-and-observational-quarantine-bed-need-for-the-us-homeless-population-related-to-covid-19-exposure-by-county-projected-hospitalizations-intensive-care-units-and-mortality/>

³¹ National Low Income Housing Coalition. 2020. *Getting to Yes: Working with FEMA to Fund Non-Congregate Shelter During COVID-19*. Retrieved from https://nlhc.org/sites/default/files/Guidance_Working-with-FEMA.pdf

the Bay Area’s “slow, piecemeal response” to housing people experiencing homelessness in non-congregate settings.³²

Housing and homeless shelter and service providers working directly with impacted populations often lack the critical information needed from FEMA to plan and interface with the PA program, such as expiration dates and application processes. FEMA should ensure that all documentation surrounding the request, approval, and justification of non-congregate sheltering reimbursement is made publicly available online. This would improve transparency and the ability of housing and homeless service providers to utilize the PA program to the most effective extent possible.

Moreover, FEMA has neglected to authorize its full range of assistance programs to address the pandemic. As authorized by the Stafford Act, FEMA can administer a wider suite of disaster assistance programs designed to be deployed rapidly to the wide range of challenges faced by individuals during and after a disaster, including housing instability, financial stress, and the need for legal services. To help address the broad health, housing, and economic impacts of the coronavirus pandemic, FEMA should activate its IA programs, including the Transitional Shelter Assistance (TSA), Individual and Households (IHP) assistance, and Disaster Legal Services (DLS) program, to ensure that low-income households can remain stably housed. Although not originally created for pandemic response, these programs could be quickly deployed to serve households in need as a result of the coronavirus pandemic, rather than requiring overburdened state and local governments to quickly design and stand up new programs.

EQUITABLE SOLUTIONS CENTERED ON THE NEEDS OF SURVIVORS

A reformed disaster housing recovery system that is centered on the needs of the lowest-income and most marginalized survivors and their communities must ensure opportunities for resident and public engagement, systemic transparency, full accountability and due process, robust equity and civil rights enforcement, fair mitigation practices, and a focus on increased local capacity and benefit. These priorities must be reflected in every stage of disaster recovery and response, from pre-disaster emergency planning through long-term recovery and post-recovery mitigation, to help address the systemic racism and classism that have resulted in our broken current disaster housing system.

RESIDENT AND PUBLIC PARTICIPATION

A reformed disaster housing recovery and response framework must ensure robust, ongoing, and timely opportunities for public engagement through structured collaboration with stakeholders beginning with emergency planning and response and continuing through the closeout of recovery and mitigation programs. Residents must be empowered to make decisions for themselves and their communities, and their input must be given substantial weight.

Current disaster housing response and recovery efforts effectively limit opportunities for impacted residents to meaningfully engage and contribute to the rebuilding of their communities after a disaster. State officials are under enormous pressure to respond and rebuild as quickly as possible, often making any public input process rushed and ineffective. Engagement is often limited because residents are unaware of emergency response, rebuilding, and mitigation plans, whether because state officials fail to announce public meetings or because materials are provided only in English or in formats that are not accessible, including to people with disabilities. Moreover, plans often do not include essential information—including information about how funds will be spent and who will be eligible for which funds—that is needed for the public to engage effectively. Opportunities for engagement are limited, irregular, and occur too late in the process.

SYSTEMIC TRANSPARENCY

Basic, essential information about federal disaster response and recovery efforts must be made publicly available in a timely manner. This transparency must be systemized, so that it is not provided on an ad hoc basis. Data transparency is critical to ensuring informed public policy decisions, allowing greater public participation in disaster recovery efforts, and helping public and private entities better recognize gaps in services and identify reforms needed for future disaster recovery efforts.

³² Karlis, N. 2020. *How Bureaucracy Kept the Bay Area from Housing the Homeless*. Retrieved from <https://www.salon.com/2020/06/21/how-bureaucracy-kept-the-bay-area-from-housing-the-homeless/>

The current federal disaster response and recovery, however, suffers from a systemic lack of data transparency. After past disasters, this failure to provide basic transparency—ranging from damage assessments, determination of unmet needs, program design and implementation, grantee and subgrantee performance, and how federal dollars are spent—has hampered efforts to effectively target and distribute aid to those most in need.

FULL ACCOUNTABILITY AND DUE PROCESS

Accountability and due process must be central in any reformed disaster housing recovery and response framework. Federal efforts must ensure that all eligible survivors receive the assistance needed to get back on their feet.

The daunting application process for disaster aid discourages survivors from applying for assistance. The application and appeals processes are confusing, time-consuming, and frustrating. As a result, low-income survivors—especially seniors, people with disabilities, and people with limited English proficiency, and other individuals—face high, unnecessary, and counterproductive barriers to receiving federal disaster housing recovery assistance and many forgo applying for assistance altogether. By not providing full accountability, transparency, and due process to applicants, the federal government has made it difficult—if not impossible—to determine who is eligible to receive assistance and why assistance was denied, leading to higher denial rates for low-income disaster survivors.

ROBUST EQUITY AND CIVIL RIGHTS ENFORCEMENT

Equity must be a central and explicit goal of federal disaster housing response and recovery efforts, and each stage of the response and recovery must be examined and reformed to ensure that federal, state, and local efforts actively dismantle systems of oppression. All emergency response, long-term recovery, and mitigation actions must be designed and pursued in a manner that addresses and prioritizes the needs of the lowest-income survivors, people of color, seniors, people with disabilities, immigrants, and other protected classes. All such actions must also be explicitly anti-racist: analyzed to determine if they exacerbate, leave in place, or ameliorate existing or historic patterns of segregation and discrimination in housing and infrastructure, and remedied accordingly.

FAIR MITIGATION PRACTICES

All emergency response, long-term recovery, and mitigation efforts must be designed and pursued in a manner that provides survivors with the choice to relocate or rebuild their communities resiliently, minimizing displacement. As the climate changes, disasters will be both more frequent and more destructive. In response, local and state officials have begun to focus on mitigation and infrastructure improvement. Too often, such upgrades go to more affluent communities, while the needs of lower-income people and people of color are ignored. Moreover, federal, state, and local recovery efforts may actively contribute to displacement by failing to provide survivors with meaningful choices to rebuild resiliently, relocate, or improve infrastructure (such as storm drainage, floodplain management, and other common mitigation measures) in their disaster-affected communities. This effectively leaves low-income survivors at greater risk for future disasters than they were prior to the disaster.

INCREASED LOCAL CAPACITY AND BENEFIT

All emergency response, long-term recovery and mitigation efforts must maximize the engagement of local contractors and workers and build the capacity of local community-based organizations, putting as much federal resources as possible into the impacted economy and impacted survivors.

Local community-based organizations and networks are in the best position to engage with and have intimate awareness of the unique needs of the lowest-income survivors. These local organizations often do not receive the support needed to build capacity to scale up efforts quickly after a disaster. By relying on out-of-town contractors for everything from debris removal to repair of electrical grids, state and local governments miss an opportunity provide employment, job training, and contracting opportunities to low-income local workers and small- and minority-controlled businesses, who often are in severe need of work as a result of disasters' disruption to local business.

FIRST STEPS TO FIX AMERICA'S BROKEN DISASTER HOUSING RECOVERY SYSTEM

The “Fixing America’s Broken Disaster Housing Recovery System” report provides specific policy recommendations to reimagine and redesign a new disaster housing recovery framework that is centered on the needs of the lowest-income and most marginalized survivors. This work will take many years. However, there are a number of actions Congress can take to immediately address some of the biggest challenges facing survivors.

PERMANENTLY AUTHORIZE AND AUTOMATICALLY ACTIVATE THE DISASTER HOUSING ASSISTANCE PROGRAM (DHAP)

Congress should permanently authorize DHAP and automatically activate it after every major disaster to provide longer-term housing assistance and wrap-around services to low-income survivors. Such assistance should be provided to eligible survivors until the long-term housing recovery—including the rebuilding of affordable rental housing stock—is complete.

ENACT THE “HOUSING SURVIVORS OF MAJOR DISASTERS ACT”

Congress should enact the “Housing Survivors of Major Disasters Act,” (H.R. 2914)³³ introduced by Representative Adriano Espaillat (D-NY). The bill, which passed unanimously out of the House Transportation and Infrastructure Committee in February 2020, contains critically needed reforms to ensure that the lowest-income and most marginalized survivors can access the housing assistance they need to rebuild their lives. I thank the Committee for your work on this bill and ask that you help move it to the floor for a vote.

The “Housing Survivors of Major Disasters Act” would address the significant title-documentation challenges that have resulted in tens of thousands of eligible disaster survivors being wrongfully denied FEMA assistance. The bill would reform FEMA’s application process and allow survivors to more easily navigate this process. It would provide a new framework to make it easier for disaster survivors to prove residency in disaster-impacted areas, either by completing a “declarative statement” form or by submitting a broader range of acceptable documents such as utility bills, credit card statements, pay stubs, and school registration in lieu of a formal title to property or leases.

ENSURE EQUITY IS AN EXPLICIT POLICY GOAL

Congress must ensure that equity is a central and explicit goal of federal disaster housing response and recovery efforts. Our current disaster housing recovery framework exacerbates and reinforces racial, income, and accessibility inequities at each stage of response and recovery. Survivors of color and communities of color are disproportionately harmed by the current disaster housing recovery system.

Federal disaster housing response and recovery efforts must address and prioritize the needs of the lowest-income and most marginalized survivors, including people of color, people with disabilities, immigrants, and other protected classes. All actions must be explicitly anti-racist: analyzed to determine if they exacerbate, leave in place, or ameliorate existing or historic patterns of segregation and discrimination in housing and infrastructure and remedied accordingly.

Congress must ensure that disaster housing recovery efforts undo the racial, income, and accessibility inequities embedded in our current disaster housing recovery framework. Disaster recovery efforts—which often include significant, robust funds—represent a unique opportunity to rebuild in a way that addresses, rather than entrenches, these disparities.

REQUIRE FULL TRANSPARENCY

Congress should require that FEMA provide basic, essential information about federal disaster response and recovery efforts, including damage assessments, determination of unmet needs, program design and implementation, grantee and sub-grantee performance, and how federal dollars are spent. Congress should require FEMA to provide full transparency on program eligibility, the aid application process, and reasons for denials of assistance. Data collected by the government must be open and accessible at the most granular and comprehensive level, while protecting personally identifiable information. This information must be made publicly

³³H.R. 2914, “Housing Survivors of Major Disasters Act of 2019.” Retrieved from <https://www.congress.gov/bill/116th-congress/house-bill/2914>

available in a timely manner and this transparency must be systemized, so that it is not only provided on an ad hoc basis.

Data transparency allows policymakers and advocates to be informed about program results and make policy improvements and incorporate best practices into future activities. Issues of equity clearly exist in the disaster recovery process, and Congress must require FEMA to implement better transparency practices so the problems can be identified and rectified.

ENSURE SURVIVOR-CENTERED APPROACHES TO ASSISTANCE

Congress must ensure that every survivor receives assistance to which they are entitled. FEMA maintains a culture of rigid allegiance to narrowly defined protocol over outcomes; as a result, many disaster survivors, including many of the lowest-income survivors, are wrongfully denied needed assistance. Congress should require FEMA to prioritize categorical eligibility, simplify the application and appeals process, and track and report on outcomes to ensure recovery aid reaches those in need.

Rather than creating and implementing numerous categories of ineligibility, disaster assistance programs should employ broad-based categories of eligibility, with the aim that every survivor receives the recovery assistance to which they are entitled. Through the use of damage assessments, geographic information, and other data, a reformed federal disaster housing recovery system can provide categorical eligibility to survivors in disaster-impacted areas. With a shift in emphasis to categorical eligibility, many of the convoluted rules and requirements employed by recovery assistance programs will no longer be necessary, allowing for an easier, quicker, and more flexible application process.

FEMA should allow for a flexible system of documentation for distributing disaster recovery assistance. Applying the least restrictive guidance regarding alternative documentation—and doing so consistently across all jurisdictions—would cut down on wasted time and confusion on the parts of both applicants and advocates alike. In order to employ full categorical eligibility, there must be a system in place that permits alternative documentation to ensure all survivors can receive assistance.

Congress should also require FEMA, HUD, and other federal agencies involved in disaster recovery efforts to work together and create a single, universal application for aid to make the process easier, quicker, and more flexible, reducing the administrative burden and speeding the process.

ADDRESS THE UNIQUE NEEDS OF PEOPLE EXPERIENCING HOMELESSNESS

Congress should enact legislation to ensure equitable treatment of individuals experiencing homelessness through the response and recovery effort. Pre-disaster homeless populations are often denied FEMA assistance. Even if they lost all of their belongings in the disaster, FEMA will often deny survivors any benefits once their status as pre-disaster homeless is established.³⁴ With no resources to adequately prepare or recover from a disaster, people experiencing homelessness are among the most harmed disaster survivors.

FEMA has interpreted current law to deny assistance to people experiencing homelessness prior to a disaster, despite their exceptional needs. Congress should enact clarifying legislation to ensure that people experiencing homelessness prior to the disaster have access to the same emergency shelter and disaster relief assistance as other survivors, including rental assistance.

MEET THE URGENT HEALTH AND HOUSING NEEDS OF PEOPLE EXPERIENCING HOMELESSNESS DURING THE PANDEMIC

Congress must take every action to save lives and prevent outbreaks of coronavirus among people experiencing homelessness and other individuals living in congregate settings. Congress should direct FEMA to provide full reimbursement to state and local governments for Public Assistance (PA) emergency protective measures. These provisions would cover all eligible PA costs and allow FEMA to provide assistance in advance rather than requiring states to be reimbursed later.

In addition, Congress should require FEMA to immediately issue guidance regarding compliance with federal duplication of benefit requirements. FEMA's failure to release such guidance has unnecessarily slowed down the best efforts by state and local governments and homeless service providers to use the flexible federal resources provided in the CARES Act—including FEMA PA grants, HUD Emergency

³⁴ Ehrlich, A. 2019. *After Wildfires, Homeless People Left Out of Federal Disaster Aid Programs*, Oregon Public Broadcasting. Retrieved from <https://www.opb.org/news/article/fema-disaster-aid-wildfires-homeless-people/>

Solutions Grants and Community Development Block Grants, Treasury-administered Coronavirus Relief Funds—to move people experiencing homelessness out of shelters or encampments and into non-congregate spaces. FEMA guidance should clearly provide the broadest flexibility possible to combine federal CARES Act resources. Overly rigid duplication of benefits requirements will prevent critical resources from reaching survivors with the most acute needs.

Congress should require full transparency from FEMA on all materials related to state reimbursements for non-congregate sheltering. At a minimum, FEMA should be required to make publicly available on a monthly basis the number of people currently housed in FEMA-reimbursable hotels and other non-congregate shelters by state; the number of people who were previously experiencing homelessness prior to participation in the non-congregate shelter program by state; and copies of every state request for non-congregate shelter and every letter of approval and/or denial by FEMA. The agency should be directed to develop and make publicly available plans to ensure that individuals have permanent, stable housing prior to ending FEMA assistance. Requiring FEMA to report this data will help policymakers and service providers better understand FEMA's role in providing non-congregate shelter to individuals experiencing homelessness.

CONCLUSION

Our country must develop a new disaster housing recovery system that centers the housing needs of the lowest-income survivors, including people of color, people with disabilities, and others. In addition to addressing immediate housing needs caused by the pandemic, Congress should address our nation's pervasive structural and racial inequities and reform federal disaster planning and response efforts to be inclusive and intersectional. We must reform existing programs by centering racial equity and equity for all historically marginalized people to ensure that affordable housing investments and federal disaster recovery resources reach all impacted households.

Thank you again for the opportunity to testify today. I look forward to your questions.

Ms. TITUS. Thank you, Ms. Yentel, and thank all of you for excellent testimony laying out the statistics of how this community is affected, and also some of the reasons why it's so affected. We will now move on to Member questions. Each Member will be recognized for 5 minutes, and I'll start by recognizing myself.

This committee did some good work expanding FEMA assistance for the disabled community and the Disaster Recovery Reform Act, but based on your testimony, there is clearly additional room for enhancements to have FEMA evaluate its disaster aid for vulnerable communities. Mr. Brown, you said that you had some suggestions, and we heard some others mention, but I'm wondering if you all would speak directly to what can be done, and put it in the context of, is it a problem of law, is it a problem of policy, or is it a problem of politics? Does it change depending on who is the Administrator, or what those priorities of the administration are? Start with you, Mr. Brown?

Mr. BROWN. Thank you, Chairwoman. You know, our perspective is that these problems are systemic, so they are a problem of law and policy and also implementation. Equity has to be fully integrated throughout the entire process, and especially implementation when a disaster occurs.

So, one of my recommendations as part of my written testimony is a full and thorough vetting of all of FEMA's policy practices and grant programs to look at how we can integrate equity and prioritize the needs of the most vulnerable, and cut through the redtape and the delays that disproportionately impact the communities that are most at risk and most in need when a disaster strikes.

So just to answer your question, I think it's systemic. It's deeply rooted over many years in time, and in order to change the trend that we see continuously, we need some intentional efforts, aligned with investment and focus, and we also need a diverse profession. We also need to add diversity into the field and add additional perspectives to commit to long-term change.

Ms. TITUS. I notice that in the field of emergency management, there's not much representation from people of color, from women, from people with disabilities especially at the top levels of management, and do you think if we were more open in our recruiting and in our promotion within the agencies that deal with these problems, that might have some impact?

Mr. BROWN. Yes, Chairwoman. That's vitally important at all levels, and throughout the emergency management enterprise. To your point, the field is not diverse, but it is growing.

There's a unique opportunity here to diversify the field of emergency management, more women, more people of color, especially in positions of leadership. We've been working with Historically Black Colleges and Universities, as well as minority-served institutions to increase the number of students who are interested in the field. We need to look critically at the skillsets needed in the field. We need to bring in folks who understand a human-centered approach to disasters and understand the communities that are most impacted, and I think we can get the best bang for our buck if we do that.

Right now we have a field that is not diverse, who cannot fully understand the unique experiences of the communities that are most impacted. And so, yes, that is a huge part of the problem, but diversity and inclusion is a part of the solution.

Ms. TITUS. Thank you. Ms. Roth?

Ms. ROTH. Yes, there are so many opportunities for improvement. First and foremost, we have got to resolve who has the responsibility for monitoring and enforcing Federal laws that are now 30 years old. Thank you for recognizing the ADA anniversary, and almost 50 years old with regard to the Rehabilitation Act, which applies to the use of every Federal dollar, whether it's expended by the Government, or whether it's granted or sub-granted.

And so, you know, we address many of these shortfalls, failures, and unfortunately those with dire outcomes. We address those in the READI for Disasters Act, and the Disaster Relief Medicaid Act. The issues at FEMA are quite honestly baffling.

We had hired 175, 185 disability integration advocates to deploy out into the field of disasters to support the Governors, support States, support disability organizations, to navigate the complexities of FEMA's programs. Most of those were people with disabilities, and unfortunately, most of those are no longer working.

Ms. TITUS. Thank you. I'm afraid I've got to cut you off. My time is up, but I would like to come back to that if we could. Thank you.

Ms. ROTH. Great.

Ms. TITUS. Mr. Katko?

Mr. KATKO. Thank you, Madam Chair, and thank you all for your testimony today, and I just—a quick example. I met a young woman on the—in my district years ago who had Down syndrome, and I had her come down to speak at an event. She did such a good

job that she became the first person with Down syndrome to be registered as a lobbyist for the National Down Syndrome Society.

The point is, is that when they get an opportunity, that's often all they need, and we got to keep that in mind, and so, opportunities is what the name of the game is as far as I'm concerned. So, I credit all of you—all your advocacy and what you're saying in that regard.

Mr. Higdon, the Central New York Food Bank, just in a 4-month period, from March to June of this year, has distributed over 8.4 million pounds of food, or over 7 million meals, had 73 mobile food pantry distributions, received over 4,000 requests for assistance, and pre-screened 3,400 households for assistance. It accomplished this with 445 volunteers and 27,000 staff hours devoted to their COVID efforts.

Food banks are critical to addressing food insecurity, as you know, and what is the best way, Mr. Higdon, that we can continue to ensure food banks like yours and in central New York have what they need to continue to meet the needs in these very trying times?

Mr. HIGDON. Yes, Ranking Member. I appreciate your comments and support of the food bank. They spoke very highly of your efforts to kind of stay plugged in with what they're doing.

But you know, for us, we've seen a lot of success with our mobile pantry distributions. It's really been an opportunity for us to do drive-through distributions so individuals don't get asked to get out of their cars. You're seeing this across the country. It's very—a lot of dignity provided in—through those opportunities where, you know, we're not doing a lot of income intake.

We have a lot of opportunities with food that's been provided to us right now. And so, for us, really, the support that's been most helpful in order for us to increase our distributions has been use of the National Guard.

We have been blessed with—you know, there's been a lot of private donors who have responded and been helpful, and support from the Government and things of—are happening, and who knows how long this is going to go, and what's needed to really support the needs long term, because some of these programs will run out, but you know, for now, it seems like we're doing a good job of trying to keep up, and dealing with adversity and trying to keep our doors open and reach as many people as we can, and I think one thing that our Feeding America Network really has is that opportunity to provide coverage throughout the country.

Every county in the United States is covered, and we have established multiple pantries in every county that that we serve. And so, really just through our reach and opportunity, we're trying to reach as many people as we can, and the support we've seen from the Federal Government has really enabled us to get out there and help keep meeting the needs through everything that's going on right now.

Mr. KATKO. Thank you, Mr. Higdon. I'm glad you mentioned the National Guard, and I didn't know you were going to do that, of course, but my son is a lieutenant in the National Guard called up to Active Duty, and he was serving underprivileged communities, and it was quite an education for him, and then he commanded a testing site.

So, I can testify firsthand to you that the National Guard was a great help, and I'm glad you mentioned that. Switching gears here to all the other witnesses, I want to note that this committee has worked over the years to ensure the emergency management system works for all people hit by disaster, with a particular focus on the most vulnerable. Ultimately we must make sure what assistance is valuable is clear and communicated effectively, and that the process itself does not revictimize the victim. That means removing unnecessary redtape and hurdles.

I appreciate all of your included recommendations in your testimony, but what I want to do in the time that's left is to try and get at least one or two of you on the record telling us what would be your top one or two actions you would recommend. The top one or two, briefly, that would improve delivery of assistance in vulnerable populations, and we can start with Ms. Roth.

Ms. ROTH. My top one or two would be ensuring that the monitoring and enforcement of the Federal laws is occurring without interruption, and as well that the local disability-led organizations are able to provide services before, during, and after disasters, and be appropriately funded for them.

At this point, we have independent living centers across the country who are providing their services without reimbursement, not because they wouldn't be eligible for that reimbursement, but because they are dependent on their States to facilitate the process. So we need to correct that in the Public Assistance emergency protective measures.

Mr. KATKO. Thank you very much. We're out of time, but for the other witnesses, I would ask that you just—if you could just submit something in writing, I would really appreciate it because I wanted to know what we need to prioritize and what you believe the priorities are, and sorry I couldn't get to you all, but we ran out of time, and I yield back, Madam Chair.

Ms. TITUS. Thank you. We will now go to Ms. Mucarsel-Powell.

Ms. MUCARSEL-POWELL. Yes. Thank you, Madam Chair, and thank you to all the witnesses for coming this morning. Ms. Yentel, I wanted to start with a question about housing. As you know, the moratorium on evictions is about to end, and that means that many Floridians will find themselves without proper housing through no fault of their own. I would imagine this would seriously exacerbate the tragedies in south Florida if it's hit by a strong hurricane, and just this morning I saw that there's already a tropical depression that may be hitting us in 5 days. So, can you please speak on how this will affect people's ability to get FEMA assistance?

Ms. YENTEL. Absolutely. It's a tremendous concern. The Federal eviction moratorium has expired, as you say. State and local eviction moratoriums are expiring rapidly. Where State and local officials have been able to cobble together emergency rental assistance programs, they too have been depleted very quickly, and many communities like in Florida were suffering from a severe shortage of affordable homes even before COVID-19 came.

So, the potential for an eviction wave in a State with a severe lack of affordable housing available as a hurricane approaches is devastating and could be catastrophic, and I think it points to both

the need for immediate congressional action to prevent this wave of evictions through a Federal moratorium on evictions through \$100 billion in emergency rental assistance, through assistance to homeless shelters and service providers.

And it also points to the need for those households who were homeless before COVID-19 and have been moved into hotels through FEMA's reimbursement for noncongregate shelter. We have to ensure that as those programs end that we are moving people from hotels into permanent housing, not back onto sidewalks or encampments or in homeless shelters, again, which would be devastating in the middle of a storm.

Ms. MUCARSEL-POWELL. Mm-hmm. Yeah, thank you, Ms. Yentel, and as you know, we actually passed the Heroes Act, including that rent and mortgage relief to prevent evictions and the Senate Republicans came back without including those provisions which just seems cruel, especially in my State where we have such a serious crisis where people are facing evictions now. Thank you so much.

And Ms. Roth, I wanted to highlight the fact that 2 days ago, July 26th, was the 30th anniversary of the Americans with Disabilities Act becoming law. Over the past three decades, this law has made a world of difference for so many of my constituents and people across this country, but we still have so much work to do to ensure that individuals with disabilities are treated fairly, that they have access to everything that our communities have to offer, and receive sufficient protections and assistance when disasters strike.

And we all know someone with a disability, whether it's a family member that has had a disability since they were born, or a friend who got into an accident, and then was faced with a disability. Ms. Roth, approximately, like you said, 26 percent of the U.S. population has a disability. One-quarter of our population. But somehow, this fact is far too often overlooked.

My nephew Charlie, who is so close to me, has serious disabilities that require him to live in a special group home, and they provide him with expert care. His caregivers, actually, I have to say are angels. I've had several conversations with them about how they're dealing with this pandemic.

They've told me that they can't get the proper testing for their residents because they're bed-bound, or are in wheelchairs. They fear the day when a hurricane forces them to evacuate. They feel forgotten. In fact, the owner and general manager of the organization that cares for my nephew stated, and I quote, "nobody thought about group homes."

Ms. Roth, as you know, CMS has instituted strict reporting requirements for nursing homes. COVID cases must be reported to all residents and families as well as directly to the CDC and State and local officials. This data is important to stop the spread of COVID.

Do these same reporting requirements apply to facilities that care for individuals with intellectual disabilities or psychiatric residential treatment facilities, or substance use disorder treatment facilities?

Ms. ROTH. Thank you so much for those questions, and unfortunately, even where there are now finally some requirements, we're still not getting accurate information. It is just completely baffling

to me that we cannot identify where this virus is emerging in hotspots, and make sure that everyone, including people with disabilities, have what they need in order to protect themselves. Just yesterday, the Senate bill completely left out any home- and community-based services funding.

It is that kind of funding that makes it possible for people with disabilities and their families to have the support and services that they need, and to keep them out of the congregate facilities that are unable to keep people safe.

Ms. MUCARSEL-POWELL. Yes, Ms. Roth, it's so troubling that now, when we need that support the most, we're facing those cuts. How does the lack of data and the lack—

Ms. TITUS. I'm sorry—

Ms. MUCARSEL-POWELL [continuing]. Of transparency affect the emergent—

Ms. TITUS. I think your time—

Ms. MUCARSEL-POWELL [continuing]. Standards, or—

Ms. TITUS. We're going to have to move on to the next person.

Ms. MUCARSEL-POWELL. Oh, Madam Chair—

Ms. TITUS. But we'll have a—maybe have a second round.

Ms. MUCARSEL-POWELL. Yeah, I couldn't see the clock.

Ms. TITUS. It's OK.

Ms. MUCARSEL-POWELL. I couldn't see the clock, but thank you so much. I yield back.

Ms. TITUS. Thank you. Mrs. Miller?

Mrs. MILLER. Thank you, Chairwoman Titus and Ranking Member Katko, and thank you all for being here today. This hearing is extremely relevant to my State of West Virginia. We have people living among the hills and hollers high up, down in valleys, along flood plains. Many of our people are low-income individuals, and we have a high population of the elderly and disabled.

I cannot express how pleased I am to see you here today, because we need to address and improve these longstanding issues that will touch my State for generations to come. Mr. Brown, when working with your State, you mentioned that you examined at-risk communities that may not have applied for assistance.

How do we ensure, for example, that the rural at-risk communities can receive the proper outreach education with the paperwork, the application requirements, and the eligibility status?

Mr. BROWN. Thank you, Congresswoman. I think we need to look at what the word "equity" really means, and it means that not all of us need the same amount. It's not equality. It's giving what people need.

There are some communities that need more. And so, when it comes to rural communities, a lot of the rules or regulations associated with assistance or applying for grants takes a lot of work, and they have limited staff and capabilities to do that. We need to adjust those rules and regulations to be equitable, and to provide the necessary support and funding to support those rural communities that have unique issues.

A lot of the communities are spread out. We've had rural communities that needed additional resources in terms of masks and hand sanitizers, for instance, related to COVID-19. So we've dedicated

supplies specifically for these communities, and created a program to deliver those right at people's doors to—

Mrs. MILLER. Who—

Mr. BROWN [continuing]. Get it right to the most vulnerable communities. And so, I really think we need to change our practices in order to provide additional resources and support to those rural communities.

Mrs. MILLER. Well, who do you think is best positioned to do this, and do you think State and local emergency managers should have a great role?

Mr. BROWN. Yes. I think State and local emergency managers should be given additional resources, and the ability to do that, but again, when we look at how to dramatically change the issues related to integrating equity in emergency management, it takes all levels of Government in order to do that effectively, and to stem the current trend of disasters with a disproportionate impact on underserved communities.

Mrs. MILLER. OK, Mr. Higdon, 37 of the 55 counties in West Virginia are classified as either at-risk or distressed. These counties rank in the worst 25 percent of the Nation's counties according to economic status indicators. I am so proud of our food banks in my State and the work that they do. We also have used the National Guard, and we just always are trying to improve. From your experience, what lessons could you share today that might be helpful to some food banks?

Mr. HIGDON. You know, one of the things we do very well—and I really appreciate the time, Congresswoman—is collaboration. You know when we look at our network, we get together often.

We have a lot of—well, right now—virtual conferences happening this week, and we're learning from each other and understanding, you know, dealing with food banks that have had a staff member test positive, or trying to manage volunteers throughout this process, and I think you know, we're all figuring everything out as we go, and it's—we're learning on the fly, and this is going to—we're continuing to get better, and we're going to [inaudible] because of this, unfortunately, but you know, really when we look at what's happening, I think when I [inaudible] one of those food banks in Missouri, the ones we haven't been using as much of the National Guard, and have volunteers, we're seeing a decline of volunteers [inaudible] that product, and some of our first [inaudible] we have logistic limitations with our food pantries, and there's not enough of refrigeration and coolers.

Mrs. MILLER. OK, I'm going to have to move on. I'm so sorry. I have a question for—

Mr. HIGDON. OK.

Mrs. MILLER [continuing]. Ms. Roth.

Mr. HIGDON. OK.

Mrs. MILLER. From my understanding, FEMA operates a system called IPAWS, which is the Integrated Public Alert and Warning System. For example, that technology alerts to include not just texts but pictures or data or even signals. How do we continue to implement and modernize emergency management systems like IPAWS for our vulnerable population?

Ms. ROTH. Thank you for that question. I think you know, first and foremost, all of the Federal agencies need to be providing information in accessible formats. It is their legal obligation, and it is imperative that people have information in formats that are accessible to them. Information that is not accessible is not actionable.

So for instance, we have been trying for a very long time to get NOAA to caption their videos, to audio describe emergency information so that people are in a position to make decisions about their safety, the safety of their family, and their neighborhood. We have some real basic work that's been in the law for many, many years, and needs to be implemented. IPAWS goes a very long way in modernizing a system that is now almost 60 years old, and it really needed to be modernized, and it was very important to be inclusive of a variety of information delivery systems. For [inaudible] that's being—is actionable, we are still going to be able to give the whole community information that they can use in times of disaster.

Ms. TITUS. Thank you.

Mrs. MILLER. Thank you. I yield back.

Ms. TITUS. Thank you. Communication does seem to be an issue that we need to address, whether it's another language, whether it's for sight impaired, whether it's lack of internet in rural parts of the State. If you can't get the information out, then you can't provide the service, because people don't know what's available. We certainly do need to work on that. Ms. Norton? I recognize Ms. Norton for 5 minutes.

Ms. NORTON. Thank you very much, Madam Chair. I very much appreciate this hearing, which is raising issues that have been arching below the surface. My first question is, I believe, for Ms. Yentel, because in preparing for this hearing, I was surprised to find that there is actually a regulation that says unless people were made homeless by a declared disaster, they were not eligible for Stafford Act relief. One, I'm wondering, is that still the regulation, and two, what happens to homeless people who were homeless anyway during a disaster?

Ms. YENTEL. Yes, thank you for the question. FEMA believes and implements programs that assume that people who are experiencing homelessness prior to a disaster are not eligible for any FEMA assistance after the disaster. That's even in the case of a person who was experiencing homelessness, maybe living in an encampment, and maybe a hurricane destroyed all of their belongings. They lost their belongings as a result of the hurricane. Still, FEMA would say they are not eligible for assistance, and very often, they receive none.

In some cases, FEMA has taken that so far as to say that people who are experiencing homelessness prior to a storm are not eligible for emergency shelter during, and that was the case in the California wildfires, where people were literally in the path of fire and destruction, and FEMA interpreted the law to say, you were homeless before the wildfire. You couldn't go to emergency shelters for safety.

Now, it's especially important to note that FEMA is now interpreting the law differently, and is finding that due to COVID-19, people who were homeless prior to the epidemic can be eligible for

nonprorated shelters, and it could be more, but it shows that they can interpret the law much more broadly than they do to apply to all people before and after a disaster.

Ms. NORTON. I appreciate that answer, but Madam Chair, I believe that this committee should make clear that the regulation, which they—apparently the pandemic has forced them to broadly interpret—does in fact interpret this bill with respect to homelessness, period.

Ms. Roth, another surprise I found by looking at what the GAO had—has—this is for Ms. Roth. That the registration process for—FEMA’s legislation process does not ask as an initial question directly it—an individual if that individual has a disability, or if they would like to request an accommodation for completing the question. That surprised me to read about that. Could you explain what—if that is true, and what should be done about it?

Ms. ROTH. Sure. For many years, that was absolutely the case. Happily, it—about 1½ years ago, the GAO listened to those of us who were repeating this concern, and many Members of the House and Senate asked the GAO to take a look at this. FEMA has subsequently made a small change in the wording of the application. This in fact used the disability—it gives some additional [inaudible]. But those are very inadequate, and there is still no way a person should [inaudible] in allocation, FEMA resists it.

So, if you need an accommodation to get through the application process, there is [inaudible] you get a sign language interpreter to come out when your house is inspected. The only way you can ask for that is to pick up the phone to call to ask for the notes to get a sign language interpreter, and then maybe a sign language interpreter will be there when the inspection is conducted. Having this, I have been told this process is too hard, because the Paperwork Reduction Act made it—this—required question, and through—whenever we [inaudible].

Ms. TITUS. Thank you. Thank you.

Ms. NORTON. Thank you, Madam Chair. Again, if I could ask that—that FEMA be required or asked to ask the question. If they won’t ask the question directly, they aren’t likely to get a response. Thank you very much.

Ms. TITUS. No, thank you, Ms. Norton. Next, we’ll have Mr. Palmer.

Mr. PALMER. Thank you, Madam Chairman. I’m not sure we can hear all of Ms. Roth’s answers, but I do appreciate her concern for the elderly people who are in nursing homes and other facilities like that, and I just wonder if your organization has made any attempt to investigate or work with Governors and other officials where we’ve had a disproportionately high number of deaths.

I mean, there’s five eastern States, Pennsylvania, Massachusetts, Connecticut, New Jersey, and New York, that account for almost half of all of the nursing home deaths. We know the controversy involving Governor Cuomo in New York and sending recovering COVID-19 patients back into nursing homes and not having them tested. You add in Illinois and Michigan to that, and that’s well over half of all of the COVID-19 deaths in the nursing homes. Has your organization looked into that and raised any concerns with any of those administrations in those States?

Ms. ROTH. Thank you for that question. We are part of a national coalition with folks active in not only every State, but just about every congressional district, and we have approached the Governors, we've recently—under the leadership of the Association of Programs for Rural Independent Living, sent a letter to the National Governors Association; we haven't yet had a response.

We had as early as March 3rd sent out a call to action that was signed by 192 organizations that called on the Federal Government and the State governments to act immediately to protect people with disabilities, older adults, other people who were identified as having underlying conditions.

Mr. PALMER. Well, we're not—ma'am, let me cut you off there. I just want to make sure that we have a proper focus on the States where there's been a disproportionate number of elderly die under the administrations of these seven States.

Ms. YENTEL, as you point out in your testimony, community-based organizations and local businesses are usually positioned to know the unique needs of a community they serve, and can assist in a number of areas, employment in the area that's been hit by a disaster. How do we assure assistance and contracting takes this into account, and again, specifically, community-based organizations and private nonprofits?

Ms. YENTEL. Sure, thank you for the question. If FEMA were to require that any kind of contracting take into account and go first to local businesses and especially businesses owned by women and people of color and be embedded in the community, then that would have the benefit of supporting those local small businesses, and also ensuring that the assistance that those contracts are providing are actually meeting the local need, because those local nonprofits and local businesses will be best equipped to know what their neighbors need.

Mr. PALMER. Both you and Mr. Brown, your testimony obviously places a high value on inclusion when it comes to disaster relief. Do you have representatives from groups with stellar reputations in disaster relief, such as Samaritan's Purse, and the Southern Baptist and Catholic charities that are faith-based? Are there any things that would preclude utilizing those organizations, and what is the greatest importance to you, inclusiveness or effectiveness in meeting the needs of victims of a disaster?

Mr. BROWN. Thank you, Congressman. I think we cannot be effective unless we're inclusive and equitable. So, I think—

Mr. PALMER. So, you don't think—

Mr. BROWN [continuing]. The hole in emergency—

Mr. PALMER [continuing]. You can be effective—

Mr. BROWN [continuing]. Management—

Mr. PALMER [continuing]. You don't think you can be effective—you—what I'm asking is, do you have any animus toward any organizations like Samaritan's Purse and Southern Baptists? We saw that particularly in New York with Samaritan's Purse, and certain groups didn't want them there because of their beliefs.

Mr. BROWN. I don't have any animus towards any group that wants to help, but I think every group that comes in to help needs to respect and understand the community and be inclusive and equitable, and this is where diversity, equity, inclusion training is so

important in order to be effective when it comes to disaster response, and that's whether it's a Federal, State, local, nonprofit, or private entity.

Mr. PALMER. Well, that 5 minutes went fast.

Ms. YENDEL. And I would just add if I could—

Mr. PALMER. I think—

Ms. YENDEL. I would just—

Mr. PALMER [continuing]. My time has expired, ma'am.

Ms. YENDEL. OK.

Mr. PALMER. You can answer the question though if you'd like, Ms. Yendel, I think that—

Ms. YENDEL. OK. I would just—I would just add if I could, I don't know the specific organizations, and certainly have no animus towards faith-based organizations and their value in disaster assistance and recovery. And would just say—

Mr. PALMER. You're not familiar with Samaritan's Purse or the Southern Baptist relief? I mean, they're the largest relief organization I think in the country, or they were at one time.

Ms. YENDEL. I know. I'm familiar with the national organizations, but not the local chapters, which I thought was what you were asking about, but I would just say that assistance has to be available to everybody who needs it without requirements put on that assistance, and there have been cases, especially when it comes to people experiencing homelessness, where faith-based organizations may want to put additional requirements on the assistance, and in our view, that's not acceptable.

Ms. TITUS. Thank you.

Mr. PALMER. I yield back.

Ms. TITUS. Mr. Carbajal?

Mr. CARBAJAL. Thank you, Madam Chair. First, I'd like to ask for unanimous consent to insert this statement from the Foodbank of Santa Barbara County into the record. My staff will also email it appropriately.

[The statement from the Foodbank of Santa Barbara County follows:]

Statement of Erik Talkin, Chief Executive Officer, Foodbank of Santa Barbara County, Submitted for the Record by Hon. Salud O. Carbajal

Since COVID-19 safety measures took effect, the Foodbank of Santa Barbara County, California, has seen unprecedented demand—dwarfing what we have experienced in previous disasters and economic downturns. The Foodbank of Santa Barbara County (FBSBC) has tripled the amount of food it normally provides to community members facing food hunger and food insecurity, and that demand has yet to decrease.

FBSBC'S RESPONSE TO DEMAND

- Doubled our Safe Home Grocery Delivery to Seniors program—from 1,500 before the pandemic to over 3,500 seniors
- Operating 22 new, no-contact drive-thru sites
- Volunteers are packing 6,000 grocery bags per week at our 50 SAFE food distribution sites
- Assisting our food distribution partners that are seeing a more-than-double increase—from 200 families to now over 450 families requesting food support
- Added two additional warehouses to our two existing warehouses in order to meet demand and accommodate safety protocols for staff and volunteers

- Have needed to utilize 20 National Guard personnel to help meet demand and replace our traditional volunteer pool that largely consists of those now classified as a COVID-19 vulnerable population
- Guard presence has been decreasing each month and will likely be phased out entirely by September 1, regardless of whether community need has declined.
- Have led a community effort over the past 18 months to create a Disaster Feeding Plan in collaboration with disaster and emergency response agencies in the government, healthcare, education, and nonprofit sectors. Such a plan ensures everyone in Santa Barbara County can be fed in case of a large-scale disaster

FEMA SUPPORT AND CHALLENGES

State and federal support has been critical in helping to replace food donations that, for various reasons, have decreased significantly—and to meet increased demand. Emergency food boxes via TEFAP, increased SNAP benefits, and the potential for food purchase and distribution reimbursement to our county through FEMA Coronavirus Pandemic Public Assistance funds have all increased the likelihood that community members in need of food can receive it.

However, the FEMA component, particularly around a lack of coordinated response and guidance, has created significant challenges for food banks—particularly those in California, including ours.

Issues with Reimbursement Criteria

Certainly, the COVID-19 pandemic is a medical emergency, but it absolutely is also an economic crisis affecting millions of Americans who lost their jobs due to the COVID-19-required shut downs—to be further exacerbated if unemployment benefits are not extended beyond July 31, 2020. Food banks across the country have seen the number of people requiring food assistance rise exponentially and continue at those extreme levels since March. Despite this, FEMA does not allow for reimbursement of food purchase and distribution (FPD) expenses tied to feeding people who need food assistance singularly due to economic necessity.

As currently required by FEMA (through the conduit of the California Governor's Office of Emergency Services—CalOES), food banks can only request reimbursement for services for those who have tested positive for COVID-19, are presumed positive and awaiting a result, or who under CDC guidance are at high risk for the negative health impacts of the virus. Guidance from FEMA on exactly which populations are eligible for reimbursement are vague to the point that county partners—the entities through which food banks must apply for reimbursement—are afraid to risk submitting a claim that will be rejected. Many counties have chosen to forego attempts to secure FEMA reimbursement, altogether.

Apparent Inconsistencies Across FEMA Regions

FEMA has not communicated clearly and consistently about the degree to which FPD expenses are reimbursable. It appears that in some regions of the country, FEMA has different interpretations and allowances for the reimbursement of those expenses. It has taken months for us in California to figure out whether traditional food bank activities and expenses are eligible for FEMA reimbursement at all. Only now, after months of providing services do we have some semblance of clarity on the matter, but questions remain.

We are told by CalOES that FEMA Region 9 staff have communicated a prohibition on reimbursement of FPD expenses that are tied to serving anyone who receives any other form of government food assistance (i.e. duplication of benefits).

FEMA's interpretation that this 'duplication' means anyone who receives FEMA reimbursed food cannot receive any other federally-funded food aid—including SNAP—has resulted in significant delay or the complete derailment of food banks' efforts to access this much-needed resource.¹ A reasonable person likely would interpret that language to mean no duplication of federal funding for the same food (e.g. A TEFAP/USDA food box not also paid for by FEMA).² Yet, CalOES reports that FEMA has still not provided clarification on the intent of the language.

Consequences of Such Inconsistencies in Language

The economic crisis from this pandemic is extreme and will be long-lasting. Government assistance programs alone are not enough for people to survive. Entire families are enduring the economic calamity of this pandemic.

¹Unfortunately, this interpretation is reflected in a CalOES document on the issue: "Food Purchase & Distribution Eligible for Public Assistance."

²This interpretation is neither supported by current policy nor underlying regulations or statute: FEMA Policy FP 104-010-03; FEMA PA Guide; Stafford Act SEC 312 (p.18).

This interpretation of “duplication” places a significant administrative burden on food banks to safely collect the data necessary to ensure that each person served does not receive government food assistance. It also presents dignity issues for recipients as well as staff and volunteers. No-one should be shamed for being hungry.

We have thousands of people showing up at distribution sites in Santa Barbara County—lines of cars in some cases that shut down streets and require police presence for traffic control. We have to get people in and out as quickly as possible in order for our small crews of volunteers and staff to stay safe and get through the line efficiently. It has required enormous additional effort to figure out a system in which volunteers can safely interrogate every person who shows up for food assistance to a) determine whether they are receiving any of the various safety net benefits and b) log those interactions.³

CLARITY IS NEEDED

People who don’t need food support, don’t show up at food bank distribution sites. And the people who do show up, truly need the help. As a country, in a disaster like this with so many millions of people suffering, we should take it as a given that feeding people who are hungry and don’t have food should be a national priority worthy of as much reimbursement from FEMA as possible.

Whether this requirement is a regional interpretation or one that FEMA supports nationwide, it’s deserving of review and clarification. Feeding hungry people is a threshold value that we, as Americans, should embody and reflect in our federal response to disaster. Barring counties and food banks from receiving reimbursement for food given to a senior who also gets a meals on wheels delivery, or a family that is getting the maximum SNAP benefit but it still not able to feed the full family, is unconscionable. Such a requirement is antithetical to what food banks stand for and it also goes against how our country should treat its residents during times of crisis.

We can and must do better.

³See the LA Times article on how the Great Plates program excludes low-income seniors, as a result of FEMA’s policy interpretation: <https://www.latimes.com/california/story/2020-06-20/senior-meals-program>



SAFE FOOD IN SANTA BARBARA COUNTY

When COVID-19 safety measures took effect, the Foodbank of Santa Barbara County initiated the SAFE (Safe Access to Food for Everyone) Food Net and SAFE Home Delivery program for seniors. Here's a closer look at how the Foodbank is helping Santa Barbara County.

The SAFE Food Net offers **50 LOCATIONS COUNTYWIDE**



- Community members can receive healthy food at no cost and with the assurance that their safety is protected. Employees and volunteers are:
-  **SANITIZING AREAS**
 -  **WEARING PPE**
 -  **BEING SCREENED**
 -  **MAINTAINING SOCIAL DISTANCE**



22 NO-CONTACT DRIVE-THRU SITES
where community members can safely receive food.

2.8 MILLION POUNDS of healthy groceries and fresh fruits and vegetables have been provided to community members during our COVID-19 response.

That's equivalent to the weight of 10 blue whales!



Or 100 school buses!




Volunteers are packing **6,000 GROCERY BAGS PER WEEK**

8,100 HOME DELIVERIES of healthy staples and fresh fruits and vegetables have been brought directly to seniors' doors.



2017 THOMAS FIRE + DEBRIS FLOW	37,000	85,000 INDIVIDUALS have been served, for more than any recent disaster in Santa Barbara County.
2020 GOVERNMENT SHUTDOWN	51,000	
2020 COVID-19	85,000	



For more about senior home delivery and where to receive food, visit **FoodbankSBC.org or Dial 211**

Sources: Pennsylvania Department of Transportation - Approximate Vehicle Weights: <https://www.dot.state.pa.us/6144/2/d8f1f4b1d4e6/Approximate%20Vehicle%20Weights.pdf>
Blue Whales - The Largest Animal on Earth: <https://www.marine mammal society.org/siberiablow/whale/mammal-information/salmon/siber-whale.html>

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
 FOOD PURCHASE AND DISTRIBUTION ELIGIBLE FOR PUBLIC ASSISTANCE
 FREQUENTLY ASKED QUESTIONS
 OVERVIEW

The April 11, 2020 FEMA policy for Purchase and Distribution of Food Eligible for Public Assistance (FP 104-010-03) policy defines the framework, policy details, and requirements for determining eligible work and costs for the purchase and distribution of food in response to the COVID-19 Public Health Emergency to ensure consistent and appropriate implementation across all COVID-19 emergency and major disaster declarations.

FREQUENTLY ASKED QUESTIONS (FAQS)

Who can apply for the reimbursement?

State, local, tribal or territorial (SLTT) governments are eligible to apply for FEMA Public Assistance (PA) under this policy. A SLTT entity may enter into an agreement or contract with a local private organization, including Private Non-profit organizations such as a food bank, to provide the food purchase and distribution in response to the COVID-19 pandemic emergency. A Memorandum of Understanding (MOU) template is available to the SLTT to use with private non-profit organizations.

The SLTT should apply for Public Assistance as soon as possible and begin working to submit their Streamlined Project Application through FEMA's Grants Portal to request Public Assistance (<https://grantee.fema.gov/>) and to submit the Streamlined Project Application, which also has step by step instructions on how to move through the application process.

Can food be purchased and distributed for any purpose?

Unfortunately, no. For FEMA reimbursement purposes, the SLTT must demonstrate the need for the purchase and distribution of food due to the COVID-19 pandemic emergency. Examples of need includes decreased mobility of the population due to government actions (i.e., Stay-at-Home Order) that restrict certain populations from accessing food, significant increase or atypical demand for food resources, and/or disruption on the food supply chain in the local area.

Which populations are eligible to receive food under FP 104-010-03?

Population affected by the COVID-19 Pandemic is defined by those who contracted or were exposed to COVID-19 (as documented by a medical professional), or those deemed high-risk according to the CDC. In addition, the appropriate local Public Health Official is able to identify additional populations in their local jurisdictions that may be eligible based on their inability to access food as a result to the COVID-19 pandemic emergency.

The FEMA PA policy requires any food purchased and distributed under another state or federally funded program is not eligible for reimbursement.

What types of costs are reimbursable?

The policy allows costs associated with purchasing, packaging and preparing food and delivering food when the severity of conditions disallow easily accessible food for purchase for the defined eligible populations. Leasing distribution and storage space, vehicles and necessary equipment related to the purchase and distribution of the food are eligible. Non-food related commodities are not covered under this special Food Purchase and Distribution policy.

Legally responsible SLTT governments may enter into formal agreements or contracts with private organizations, including private nonprofit (PNP) organizations, such as food banks, to purchase and distribute food when necessary as an emergency protective measure in response to the COVID-19 pandemic emergency. In these cases, PA funding is provided to the legally responsible SLTT government entity, which would then reimburse the private organization for the cost of providing those services under the agreement or contract.

What documentation is required?

Examples of documentation include population numbers of those impacted by COVID-19 in the jurisdiction, the percent increase in demand for food assistance by the private or PNP organization due to the COVID-19 emergency, and the various state and local funding sources received by the private or PNP organization for food assistance. Additionally, the SLTT must document the number of individuals

served, length of time the services are provided and needed, costs per individual for service delivery, and “overhead” costs such as transportation. Documentation should match the specific parameters defined by the SLTT who is eligible to receive food assistance under this policy.

The SLTT should work with their Cal OES/FEMA Point of Contact to determine the most reasonable and acceptable type and level of documentation needed.

How is this policy different from Great Plates Delivered Program?

The Food Purchase and Distribution FEMA Policy eligible for public assistance is an adaption of the standard FEMA PA process for the COVID-19 pandemic emergency. The additional guidelines provided adapt the regular program to the current COVID-19 circumstance. Great Plates Delivered is a special program to serve a specific portion of the population. No individual enrollment is needed under this policy. Any services provided under the Food Purchase and Distribution should not overlap with Great Plates Delivered. Populations receiving food assistance under Great Plates Delivered are ineligible for food assistance under this FEMA PA policy.

CORONAVIRUS (COVID-19) PANDEMIC: PURCHASE AND DISTRIBUTION OF FOOD
ELIGIBLE FOR PUBLIC ASSISTANCE

FEMA POLICY FP 104-010-03

BACKGROUND

Under the President’s March 13, 2020, COVID-19 emergency declaration¹ and subsequent major disaster declarations for COVID-19, state, local, tribal, and territorial (SLTT) government entities and certain private non-profit (PNP) organizations are eligible to apply for assistance under the FEMA Public Assistance (PA) Program. This policy is applicable to eligible PA applicants only and is exclusive to emergency and major disaster declarations for the COVID-19 pandemic.

As of April 9, 2020, 51 states and territories had “stay at home” orders in place.² The population at high-risk for severe illness from COVID-19 includes people 65 years and older and people of any age who have serious underlying medical conditions, including people with chronic lung disease or moderate to severe asthma, people with serious heart conditions, people who are immunocompromised (e.g., those undergoing cancer treatment, smokers, those with HIV or AIDs), and people with severe obesity, diabetes, or liver disease, and people undergoing kidney dialysis.³ Due to the impact of the COVID-19 pandemic, there may be areas where it will be necessary as an emergency protective measure to provide food to meet the immediate needs of those who do not have access to food as a result of COVID-19 and to protect the public from the spread of the virus.

PURPOSE

This policy defines the framework, policy details, and requirements for determining eligible work and costs for the purchase and distribution of food in response to the COVID-19 Public Health Emergency to ensure consistent and appropriate implementation across all COVID-19 emergency and major disaster declarations. Except where specifically stated otherwise in this policy, assistance is subject to PA Program requirements as defined in Version 3.1 of the Public Assistance Program and Policy Guide (PAPPG).⁴

PRINCIPLES

- A. FEMA will provide flexibility to applicants to protect the health and safety of impacted communities in response to the COVID-19 Public Health Emergency through the purchase and distribution of food.
- B. FEMA will responsibly implement this policy and any assistance provided in a consistent manner through informed decision-making and accountable documentation.
- C. FEMA will engage with interagency partners, including the U.S. Department of Agriculture (USDA), the U.S. Department of Health and Human Services (HHS), and U.S. Department of Housing and Urban Development (HUD), to

¹ Proclamation 9994 of March 13, 85 FR 15337 (Mar. 18, 2020); *see also* www.fema.gov/news-release/2020/03/13/covid-19-emergency-declaration.

² <https://www.nga.org/coronavirus/#states>

³ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/groups-at-higher-risk.html>.

⁴ The current version of the Public Assistance Program and Policy Guide (PAPPG), Version 3.1, is available on the FEMA website at www.fema.gov/media-library/assets/documents/111781.

ensure this assistance does not duplicate other available assistance. Engagement with USDA will include coordination with USDA's efforts on food bank response.

REQUIREMENTS

A. *Applicability*

Outcome: To establish the parameters of this policy and ensure it is implemented in a manner consistent with program authorities and appropriate to the needs of the COVID-19 Public Health Emergency.

1. This policy applies to:
 - a. All Presidential emergency and major disaster declarations under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act), as amended, issued for the COVID-19 Public Health Emergency.
 - b. Eligible PA applicants under the COVID-19 emergency declaration or any subsequent COVID-19 major disaster declaration.
 - c. This policy does not apply to any other emergency or major disaster declaration.

B. *General Eligibility Considerations*

Outcome: To define the overarching eligibility framework for purchasing and distributing food in response to COVID-19 declarations.

1. Legal Responsibility.
 - a. To be eligible for PA, an item of work must be the legal responsibility of an eligible applicant.⁵ Measures to protect life, public health, and safety are generally the responsibility of state, local, tribal, and territorial (SLTT) governments.
 - b. Legally responsible SLTT governments may enter into formal agreements or contracts with private organizations, including private nonprofit (PNP) organizations such as food banks, to purchase and distribute food when necessary as an emergency protective measure in response to the COVID-19 Public Health Emergency. In these cases, PA funding is provided to the legally responsible government entity, which would then reimburse the private organization for the cost of providing those services under the agreement or contract.
2. Work Eligibility.
 - a. In accordance with sections 403 and 502 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121 et seq. (the "Stafford Act"), emergency protective measures necessary to save lives and protect public health and safety, including the purchase and distribution of food, may be reimbursed under the PA program.
 - b. When necessary as an emergency protective measure, eligible work related to the purchase and distribution of food in response to the COVID-19 pandemic includes:
 - i. Purchasing, packaging, and/or preparing food, including food commodities, fresh foods, shelf-stable food products, and prepared meals;
 - ii. Delivering food, including hot and cold meals if necessary, to distribution points and/or individuals, when conditions constitute a level of severity that food is not easily accessible for purchase; and
 - iii. Leasing distribution and storage space, vehicles, and necessary equipment.
 - c. Several indicators may demonstrate the need to purchase and distribute food in response to the COVID-19 pandemic:
 - i. Reduced mobility of people in need due to government-imposed restrictions, including "stay-at-home" orders, which prevent certain populations from accessing food;
 - ii. Marked increase or atypical demand for feeding resources; or
 - iii. Disruptions to the typical food supply chain within a given jurisdiction.
 - d. Populations in an impacted community that may need the provision of food as a lifesaving and life-sustaining commodity, may include:
 - i. Those who test positive for COVID-19 or have been exposed to COVID-19, but who do not require hospitalization;⁶

⁵ 44 CFR §206.223.

⁶ Any collection or handling of information with regard to the health status of individuals must be compliance with applicable privacy laws, including the Health Insurance Portability and Accountability Act of 1996. FEMA will not be collecting any health information.

- ii. High-risk individuals, such as people over 65 or with certain underlying health conditions;⁷ and
 - iii. Other populations based on the direction or guidance of the appropriate public health official.
3. Cost Eligibility.
- a. All claimed costs must be necessary and reasonable in order to respond to the COVID-19 Public Health Emergency and are subject to standard program eligibility and other Federal requirements, including the prevailing cost-share for the respective declaration.⁸
 - b. Applicants must follow applicable cost principles and procurement requirements.⁹
 - i. Costs claimed by SLTT governments must be reasonable pursuant to Federal regulations and Federal cost principles.¹⁰ A cost is considered reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.
 - ii. States and territorial governments are required to follow their own procurement procedures, comply with 2 CFR §200.322, and include any clauses required by 2 CFR §200.326. Local and tribal governments must follow their own procedures and comply with 2 CFR §200.318.
 - iii. In accordance with the March 17, 2020, memorandum from David Bibo, Acting Associate Administrator for the Office of Response and Recovery, and Bridget E. Bean, Assistant Administrator for the Grants Program Directorate, for the duration of the Public Health Emergency, as determined by U.S. Department of Health and Human Services (HHS), local governments, tribal governments, PNPs, and other non-state entities may proceed with new and existing non-competitively procured contracts. The March 17, 2020 memorandum and other information related to procurement specific to COVID-19 declarations are available on the FEMA website at www.fema.gov/media-library/assets/documents/186350.
 - c. Pursuant to Section 312 of the Stafford Act, FEMA is prohibited from providing financial assistance where such assistance would duplicate funding available from another program, insurance, or any other source for the same costs.¹¹
4. Time Limitations.
- a. FEMA may provide funding for an initial 30-day time period.
 - b. SLTT governments may request a 30-day time extension from the Regional Administrator (RA) with documentation showing continued need.
 - c. Work may not extend beyond the duration of the COVID-19 Public Health Emergency, as determined by HHS.

KEITH TURI,
Assistant Administrator, Recovery Directorate.
April 11, 2020.

ADDITIONAL INFORMATION

Review Cycle

This policy will be reviewed periodically during the COVID-19 Public Health Emergency. The Assistant Administrator of Recovery is responsible for authorizing any changes or updates. This policy will sunset with the closure of the national emergency for COVID-19 and any subsequent major disaster declarations for COVID-19.

Authorities and References

Authorities

⁷The distribution of supplies and other relief and assistance activities shall be accomplished without discrimination on the grounds of race, color, religion, nationality, sex, age, disability, English proficiency, or economic status. Section 308 of the Stafford Act, 42 U.S.C. § 5151, as amended.

⁸In certain circumstances, the Regional Administrator may require the submission of an internal control plan, pursuant to 2 CFR §200.303, in particular when the SLTT government is implementing residential delivery of meals to targeted groups of individuals who are need of such assistance.

⁹See *COVID-19 Guidance: Procurements Under Grants During Periods of Exigent or Emergency Circumstances*, March 17, 2020. (<https://www.fema.gov/media-library/assets/documents/186350>.)

¹⁰2 CFR §200.404; OMB Circular 87.

¹¹42 U.S.C. § 5155.

- Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. § 5121, et seq., as amended
- Title 44 of the Code of Federal Regulations, Part 206, Subparts G and H

References

- Public Assistance Program and Policy Guide, Version 3.1

Monitoring And Evaluation

FEMA will closely monitor the implementation of this policy through close coordination with regional and field staff, as appropriate, as well as interagency partners and SLTT stakeholders. Various planning calls are conducted daily related to COVID-19 declarations. Additionally, FEMA has set up a mailbox for COVID-19 questions and concerns at covid19paoperations@fema.dhs.gov.

Questions

Direct questions to covid19paoperations@fema.dhs.gov.

Mr. CARBAJAL. Mr. Higdon, first of all, I want to thank you and everyone else on this panel for the incredible work that you have done to help those most in need, and remember the 145,000 lives that have been lost during this pandemic.

As this public health crisis continues, we are seeing more and more people lose their jobs and struggle to put food on the table. The Hamilton Project estimates that rates of households facing food insecurity have effectively doubled. I know the administration has taken some steps to address some of these challenges.

For example, earlier this year, FEMA issued guidance that made some emergency dollars available to feed hungry Americans. Has this been enough, and has the guidance been clear? And two, how can we partner with you and other food banks across the country to make sure no child or senior citizen goes hungry because of language or mobility barriers?

Mr. HIGDON. Thank you, Congressman. I actually asked for feedback from the food bank in Santa Clara. It seems like especially in California there was some miscommunication in terms of FEMA providing Public Assistance and then claiming any kind of food distribution expense reimbursement, and whether families would, whether they were SNAP participants or received Federal commodities, or whether they would be eligible to receive some of the food purchased through Federal assistance funds. So, I think there could be some better communication and clarity on how some of those programs work.

I know here in Missouri we have a lot of confusion in terms of, we heard that you had to sign an MOU with a local government entity to receive reimbursement for food expense, but there really wasn't clear guidance. So, we were trying to see if the State emergency management agency would actually do a statewide partnership with our food bank State association, and that never really came to fruition.

There's a lot of uncertainty as to whether we can claim reimbursement or what expenses are eligible and how it ties to other Federal programs that we operate. So, we do have one MOU with the local county government, but haven't really tried to seek reimbursement for any of that. So I think there could be better clarity in terms of what's happening, and really my concerns are what's going to happen long term with some of these other—you know, the CFAP program is going to end at some point, and pandemic SNAP is going, and other benefits are going to start to run out, and

there's still a lot of people out of work, and unemployment is still going to be high, so as those people lose some of the assistance they're receiving, are they going to need additional assistance.

So, you know, we are trying to best plan and prepare for the long term, and right now, we're getting a lot of support. It's hard to tell what the future needs are going to be, and how that response is going to be sustained.

Mr. CARBAJAL. Well, I hope in the future when we're able to we can reflect back and enumerate all these challenges so that we could work to resolve them so that we can avoid these challenges in the future.

Ms. Yentel, thank you for your testimony today. You know firsthand the barriers Latinos, other communities of color, those with disabilities, and seniors face during disasters.

In my district, we learned this when a debris flow killed 23 people and nearly half of them were immigrants. There were language barriers, equity issues, and redtape that survivors had to navigate. From your perspective, what are some recommendations this committee can help implement to address equity issues and reduce the amount of redtape families face in trying to access the help they need following a disaster? And two, are there changes we can make to FEMA to ensure we are learning from past disasters?

Ms. YENTEL. Yes, thank you for the question. So I think two of the most important things that you can do immediately to eliminate some of the challenges that low-income people face when they're trying to access resources is, one, require that FEMA provide full transparency for its programs to have publicly available information, what programs are available, and who is eligible, how they determine eligibility, how they determine acceptance or denial, and what the process for appeals is. It's shocking to me that this basic information is not available from FEMA now.

In fact, the National Low Income Housing Coalition submitted an FOIA request 1½ years ago asking for some of this very basic application information, and we still have not received it, and the fact that that information is not publicly available makes it very difficult for low-income people who are denied assistance to know why they were denied, and to have a process in place for them to appeal that denial, and ultimately get the assistance to which they are entitled.

Another tremendous challenge for low-income people, especially in rural areas, especially people of color, is this title documentation issue, and FEMA has been unnecessarily rigid for decades on requiring this formal title documentation from low-income homeowners in order for them to receive the assistance, even in communities like Puerto Rico, or like in many black and brown rural communities where informal documentation is what's typically used and accepted in all other cases. As an example in Puerto Rico, 77,000 low-income homeowners were denied assistance. Many of them have still not received assistance because they don't have formal title, which the island of Puerto Rico does not require for any other purpose, and FEMA was willing to work with some advocates in Puerto Rico, especially Ayuda Legal, to create what they called a sworn declaration so that Puerto Ricans could prove that they owned their home. But now FEMA has refused to use that sworn

declaration in any meaningful way. They won't post it on their website. They won't send it to people who were denied assistance.

So, these are two really essential and I think very basic things that the committee can and should require FEMA to do: full transparency of program, data, and outcomes, and to fix the title documentation requirements. Other things to consider, that the committee and Congress should require FEMA to implement the Disaster Housing Assistance Program, or DHAP.

Both Republican and Democratic administrations in the past have pointed out this program as a best practice for longer term housing needs for low-income renters, and FEMA under this administration has consistently refused to use this program to the detriment and harm of low-income communities.

Mr. CARBAJAL. Thank you, Ms. Yentel. My time has expired. I yield back.

Ms. TITUS. Thank you. Mr. Pence?

Mr. PENCE. Chairwoman Titus and Ranking Member Katko, thank you for holding this hearing, and thank you to the witnesses for being here today. I would also like to thank FEMA for the incredible support they have shown to local and State governments during the COVID-19 pandemic. The most recent numbers show that FEMA has delivered over 1.5 million N95 respirators, 860,000 gloves, 187 face shields, and 440,000 surgical masks to frontline workers in my home State of Indiana.

In my district, we're proud to have a Second Harvest Food Bank in Delaware County. As the region's largest hunger relief organization, Second Harvest Food Bank has worked with local, State, Federal, and corporate partners to ensure that all Hoosiers have access to nutritious meals. Mr. Higdon, as you mentioned in your testimony, FEMA supported the delivery of meals for approximately 6 weeks as donations decreased at this facility in Muncie.

Overall, FEMA has obligated to our State over \$55.5 million in Federal support for Hoosiers in need, mainly in at-risk communities. Back in April, several of our local food pantries joined forces at Lucas Oil Stadium in Indianapolis to distribute 40,000 meals per week to hungry Hoosiers, and this would not have been possible without this critical FEMA funding. While COVID-19 presents unique challenges, I applaud FEMA for swiftly moving resources to protect our public health and safety. Thank you, FEMA, for being there and showing up during the pandemic, and Madam Chair, I yield back.

Ms. TITUS. Thank you, Mr. Pence. Is Mr. Garamendi with us? No? OK, well then we'll go to Mr. Garcia.

Mr. GARCIA OF CALIFORNIA. Thank you, Madam Chair and Ranking Member Katko for that very warm welcome. I appreciate it. I'm honored and humbled to be here in this committee during this very important time in our Nation's history. I want to thank you all for your collective testimony. As a Federal agency, obviously FEMA has a lot of opportunity to get better. It has a lot of opportunity to improve its efficacy, to improve its efficiencies, and also to improve itself and evolve with more diversity inclusion.

So this is a very important topic. It's a topic that we all benefit from. It's not just the individuals, but the organization and the country as a whole when we involve more people, when we have

more diversity not only in demographics but also in thoughts. So, a very noble topic to be addressing today.

Mr. Brown, I look forward to your leadership in the emergency management position that you're in. As a minority myself, both in the military and in the corporate world and now in Congress, I recognize the value of having role models to look up to, those to inspire us, to also develop new talent, to advocate and promote within, and I have no doubt that you'll be successful in that matter.

Mr. Higdon, thank you for leading this noble cause. I believe personally that we can't solve all of our problems on the back of the Federal Government, State, or local governments, that it does require the nonprofits to be organized, to be effective, to raise money, and also be engaged in local communities, and your partnership with the National Guard is a testimony to a very successful effort, and I look forward to learning more about the organization, but I do believe firmly that the nonprofits, churches, and the charities in our communities are just as effective in many cases as Government entities. So, I applaud your efforts there.

Ms. Roth, I'd just like to simply echo Mr. Palmer's earlier comment about the decision by many of our Governors. I come from California where roughly 40 percent or so—nearly half of the deaths in our State were related to a decision by our Governor to place senior citizens back in nursing homes after they were already either diagnosed or had symptoms of COVID-19.

I resonate with the comment that you made that the folks in nursing homes aren't there because they're old. They're there because they have disabilities, and it's probably aggravated by their age or mental health challenges that they also have.

So that end, and we'll do our research as well, and we'll continue to press, but I would love to have your support and partnership in our pursuit to hold the Governors accountable for these decisions. They really did make decisions that cost the lives of many folks that didn't need to die.

So I look forward to not only offering my support for your organization, but also soliciting your support as we look into these decisions that were made. I'll get to my question now. It's pretty simple, and frankly it's a yes or no question. With all Federal agencies, like I said, we have opportunities to get better. With all nonprofit organizations or any organization for that matter, we have opportunities to get better.

Are you all taking the time to document the lessons learned that you're experiencing as we all collectively navigate through these uncharted waters called COVID, this will probably unfortunately not be the last time we have to deal with something like this, so my question—and it really is just a yes or no answer, are you taking the time to make sure that you're evolving your respective organizations, and making observations of the organizations around you and also of those that you partner with to make sure that next time we're faced with this, we're baking in these new lessons learned, we're evolving as a country, as an organization, and as Americans, and I guess Mr. Brown, we'll start with you.

Mr. BROWN. Yes. Yes, Congressman. Baking in the lessons learned, I think they'll help us with the next disaster, but they also

will help us with recovery, because it's very important that we recover equitably from this unprecedented disaster as well.

Mr. GARCIA OF CALIFORNIA. Thank you. Mr. Higdon?

Mr. HIGDON. Yeah. Absolutely we are. Thank you.

Mr. GARCIA OF CALIFORNIA. Thank you. Ms. Roth?

Ms. ROTH. Thanks for the question. The Partnership for Inclusive Disaster Strategies, who I am very involved with, has been working on a report. We don't call them lessons learned reports, because apparently we're not learning too many lessons. So these are after-action reports that are full of recommendations.

The Partnership for Inclusive Disaster Strategies has been bringing folks together from across the country every single day, 7 days a week, since February 28th, and we've documented every bit of what we've been doing together. Hundreds and hundreds of disability organizations have been working together to try to make the changes that we can't quite seem to get the Government to make.

Mr. GARCIA OF CALIFORNIA. Yeah, and that's the crux of the issue that I'm getting at here, and I look forward to seeing all of the data on the backside, and Ms. Yentel, I'm assuming that you are doing the same?

Ms. YENTEL. We are, as we have for every disaster since 2005, and documenting the evidence of what's working and what's not. Our challenge is that FEMA rarely implements or takes into account any of the best practices or lessons learned, and that's where I think we need Congress to really require that they better embed the lessons learned so that moving forward we don't continue to make the same mistakes.

Mr. GARCIA OF CALIFORNIA. Thank you all. We'll stay in contact. Madam Chair, thank you.

Ms. TITUS. Thank you. And it's interesting we've heard several of the States mentioned in the need to do better in nursing homes. We haven't heard about Florida, Texas, and Arizona, however, who also have a large number of seniors, and they have the highest rates of the COVID, so let's keep in mind how we might be able to help those populations as well. We'll now go to Miss González-Colón.

Miss GONZÁLEZ-COLÓN. Thank you, Madam Chair, and thank you all the members of the panel. I need to first, Chairwoman, ask unanimous consent that the report "Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters" issued by the National Council on Disability be entered into the record.

Ms. TITUS. Without objection.

[The report follows:]

Report, "Preserving Our Freedom: Ending Institutionalization of People with Disabilities During and After Disasters," May 24, 2019, National Council on Disability, Submitted for the Record by Hon. Jennifer González-Colón

The 107-page report is retained in committee files and is available online at <https://ncd.gov/publications/2019/preserving-our-freedom>.

Miss GONZÁLEZ-COLÓN. Thank you, Madam Chair. And now, having said that, I need to ask Ms. Roth, will you say that this re-

port is an accurate assessment, or better to put it, a comprehensive best practices for care for individuals with disabilities during and post-disaster?

Ms. ROTH. In the interest of full disclosure, I was the principle investigator for that report.

Miss GONZÁLEZ-COLÓN. OK.

Ms. ROTH. And yes.

Miss GONZÁLEZ-COLÓN. I assume the answer is yes.

Ms. ROTH. I—this—

Miss GONZÁLEZ-COLÓN. The reason I ask this question, and in the case of Puerto Rico specifically, 38 percent of the island are—we have people with disabilities, and that's 12 percent higher than the average in the Nation. In having been affected by hurricanes, earthquakes, and now the pandemic, this population has been affected directly many times, and that was the reason of my question. What are the top challenges you see for seniors? Now, I'm adding seniors, and people with disabilities following a disaster. Can you name five of them off the top of your head?

Ms. ROTH. Greatest challenges are, number one, personal assistance services, home- and community-based services to keep people out of institutions. Number two, failures of monitoring and enforcing the laws that were designed to protect the rights of all of these people. Number three, accessible, affordable housing that makes it possible for people to be able to protect themselves, and that accessible, affordable housing needs to be hardened so that people can stay safe in disasters. Number four, we must engage the disability organizations as partners, the aging organizations as partners.

FEMA had not had a meeting with national disability leaders since 2017. They had a first meeting with us last week, celebrating the Americans with Disabilities Act, but still couldn't tell us how FEMA is going to assist us in our call to get people relocated from dangerous congregate facilities.

So, we were glad to finally bring FEMA to the table, but we need—so, number five, and in some ways that's number one, we need an immediate directive of guidance to the States of how they can take actions to relocate people to save their lives—

Miss GONZÁLEZ-COLÓN. OK.

Ms. ROTH [continuing]. Right now, using the category B emergency protective measures that exist.

Miss GONZÁLEZ-COLÓN. Thank you, Ms. Roth. The issue in the case of Puerto Rico, we're talking about all the natural disasters we just mentioned, but currently, FEMA has, with COVID, over 600 open disasters, and is preparing for potential disasters.

In the case of the eastern coast, we're in the hurricane season as well. So that means that all the resources may be spread thin, and putting more requirements to FEMA also means that all those new regulations may imply more difficulties for the Territories and the States for applying for assistance, and we saw that during the last 2 years, and I need to say that in the case of Puerto Rico, FEMA has been doing an enormous and big change in how it works in the beginning.

Now it's a direct communication with the municipalities, and a lot of those issues have been solved. Still, there are a lot of challenges on the island regarding housing, the titles, and many others.

So, I know my time is near to expire, but I just need to say to Mr. Higdon, there are 3.2 million constituents in my district that are serviced by just 1 food bank, the Puerto Rican food bank.

We managed to include some provisions during the supplemental, but we do not participate in SNAP. We participate in just NAT, which is the program for Nutritional Assistance in the Territories. So, how—and my last question, how can organizations like yours be boosted, have more sources or provisions to enable more people to use it instead of having the Government doing that?

Mr. HIGDON. That's a great question, and I did hear back from the food bank in Puerto Rico, and just said FEMA's been doing a tremendous job supporting them through the hurricane and the earthquake, and you know, when we look at what the Federal Government can do with SNAP assistance, it really, when you look at our service territory, it equates to about 12 times the amount of volume that the food bank does. And so, it is a collaborative effort, and we're certainly here, and I think we all have a role, and we're all chipping in. We can't do without tremendous partners. It really does take a village in the sense of all the pieces coming together plays a part—the individuals dealing with food insecurity.

Miss GONZÁLEZ-COLÓN. Thank you, Madam Chair.

Ms. ROTH. May I ask one—may I add one—

Miss GONZÁLEZ-COLÓN. My time expired, so Madam Chair will—

Ms. TITUS. Go ahead, Ms. Roth.

Miss GONZÁLEZ-COLÓN. OK.

Ms. TITUS. Briefly.

Ms. ROTH. Thank you. I just want to give appreciation to the congresswoman, and the work that has been done in Puerto Rico, the Center for Independent Living, mosques, and the University of Puerto Rico, the university-affiliated center there, have done a tremendous job, and are a real example of good and promising practices for the rest of the country, and I just want to give a shout out to that partnership, public and private.

Miss GONZÁLEZ-COLÓN. Thank you, Ms. Roth, and thank you, Madam Chair. I yield back.

Ms. TITUS. Thank you. Are there any further questions from members of the subcommittee? Mr. Katko?

Mr. KATKO. No, but I do want to thank the chairwoman for this hearing. I want to thank the witnesses as well. I think this was a very good discussion, and a lot to chew on here, and a lot to act on. So, thank you very much for your appearance, and I yield back.

Ms. TITUS. Thank you, Mr. Katko. Just before we close, I want to be sure. Is Mr. Garamendi with us? Does he have a question, or has he stepped away? Well, I guess he's stepped away or having technical difficulties, so we'll bring the hearing to a close.

I too want to thank each of the witnesses today. Your contribution to our discussion was really informative and helpful, and we want to move some legislation out of this committee. Ms. Roth, I think you mentioned a couple of the bills, so we will stay in touch with you as we move forward and seek your wise counsel, because you're obviously the experts and the people we want to hear from as we do that.

I ask unanimous consent that the record of today's hearing remain open until such time as our witnesses have provided answers to any questions that may have been submitted in writing or that we didn't have a chance to fully answer or explore. I also ask unanimous consent that the record remain open for 15 days for any additional comments and information submitted by Members or witnesses to be included in the record of today's hearing. Without objection, so ordered.

If no other Members have anything to add, the subcommittee stands adjourned. Thank you.

[Whereupon, at 11:44 a.m., the subcommittee was adjourned.]

SUBMISSIONS FOR THE RECORD

Prepared Statement of Hon. Peter A. DeFazio, a Representative in Congress from the State of Oregon, and Chairman, Committee on Transportation and Infrastructure

Thank you Chair Titus, and thank you to our witnesses for being here today.

I've said this before and it continues to be true: we are simultaneously recovering from an unprecedented number of major disasters.

But when so many Americans are struggling with financial hardship and health concerns due to the COVID-19 pandemic, the Federal government must ensure that our nation's most vulnerable communities receive the assistance they need.

From communication of alerts and warnings of anticipated disasters to the financial assistance available to survivors to repair their homes or temporarily shelter, every American, regardless of age, race, mental or physical ability, or economic background, deserves equal opportunity to access the resources available in the wake of disaster.

Part of the challenge is monitoring and enforcing compliance with the legal obligations of the Federal government to administer these resources.

When Members of the Committee visited Puerto Rico after the earthquakes in February, we were told by local emergency managers that survivors were having difficulty certifying their home ownership to receive assistance from FEMA.

Outdated land-titling record-keeping and a non-traditional system of passing home ownership in Puerto Rico highlighted some of the inequities faced by individuals who may have lost documentation and those who live in rental, or non-traditional, properties.

As Chair Titus mentioned earlier, many of these issues were raised with FEMA Administrator Gaynor when he testified before this Subcommittee back in March.

Administrator Gaynor made assurances that self-certification of home ownership was being allowed in Puerto Rico, but I'm hearing that the approval rate of Individual Assistance in the wake of the ongoing earthquakes is still quite low.

As GAO recently found, FEMA needs to do more to support vulnerable populations and address their specific needs.

It is fitting that we're holding this hearing today since July 26th was the 30th anniversary of the Americans with Disabilities Act. That legislation was an important achievement that ushered in changes to make things so many of us take for granted that much more accessible. But 30 years later, more work remains.

I look forward to hearing from our witnesses about how we might help make disaster assistance more inclusive, as well.

Thank you.

Prepared Statement of Hon. Sam Graves, a Representative in Congress from the State of Missouri, and Ranking Member, Committee on Transportation and Infrastructure

Thank you, Chair Titus.

I want to welcome our witnesses today, including Chad Higdon.

Mr. Higdon is CEO of Second Harvest Community Food Bank—a non-profit food distribution organization serving fifteen counties in Northwest Missouri and four counties in Northeast Kansas.

The work of Second Harvest and other food banks is critical to getting food to those most in need.

I have had the opportunity to tour Second Harvest a number of times and have seen first hand the service they provide to the region. I want to thank Chad for the important work that he and Second Harvest do in my district.

I have actually known Chad for nearly 20 years, including ten when he served on my staff. He has been a tremendous resource to St. Joseph and northwest Missouri in both positions, and I am proud of the work that he has done to serve the community in both capacities.

This Committee has a long track record for reforming our emergency management system to ensure the right assistance gets to the people that need it most.

Whether it's protecting our seniors, those with disabilities, or low income communities, we know we need to ensure our response and recovery actions save lives and help people recover quickly.

That is also why I introduced the Preventing Disaster Revictimization Act earlier this year—a bill that helps ensure the federal government can't claw back disaster assistance it mistakenly awards to victims who applied for help in good faith.

But, more needs to be done.

The current redtape and bureaucracy alone creates hurdles for people and small community organizations helping to respond.

If we work towards a more simplified, streamlined process for disaster assistance, it would not only make the process faster and easier for disaster victims but would ultimately reduce the costs of recovery.

I look forward to hearing from our witnesses today.

I yield back.

APPENDIX

QUESTIONS FROM HON. PETER A. DEFazio AND HON. DINA TITUS TO CURTIS BROWN, STATE COORDINATOR OF EMERGENCY MANAGEMENT, VIRGINIA DEPARTMENT OF EMERGENCY MANAGEMENT, TESTIFYING ON BEHALF OF THE INSTITUTE FOR DIVERSITY AND INCLUSION IN EMERGENCY MANAGEMENT

Question 1. This Committee did some good work in expanding FEMA assistance for the disability community in the Disaster Recovery Reform Act, but there's clearly additional room for enhancements to how FEMA evaluates disaster aid for vulnerable communities.

First, can you speak at all to the effects, if any, from FEMA additional limits in the IHP program to provide repair and replacement for those needing appropriate access to their homes?

Second, can you each discuss how you think FEMA has been engaging with the disability and access and functional needs community in recent disasters and emergencies and has the Agency's posture shifted given the frequent turnover in the role of Administrator?

ANSWER. The increase in IHP Program assistance to provide repair and replacement for those needing appropriate access to their homes is a positive step to promote more equitable recovery, but more can be done to more equitably provide assistance given the continued disproportionate impact of disasters on vulnerable communities that lack resources. The ongoing COVID-19 pandemic disaster has left millions of unemployed American families (disproportionately communities of color) on the verge of homelessness, especially those who rent apartments and homes. Several studies have demonstrated that numerous Federal recovery programs exclude those most in-need by creating narrow eligibility requirements that favors more privileged communities. Prioritizing equity in disaster recovery programs requires conducting research to remove the barriers for supporting the disaster survivors that have the least resources, which are disproportionately communities of color and low-income individuals. Further efforts should be made to better support at-risk communities and remove inequitable program requirements. Additionally, the excuse of eliminating waste, fraud, and abuse is often used for establishing numerous complex recovery processes that inequitably keeps those most in need without the resources to recover due inequitable bureaucratic red-tape. I would encourage further investigation on how administrative oversight contributes to the establishment of inequitable policies that negatively impacts vulnerable communities.

FEMA's Office of Civil Rights released guidance documents and held webinars that have been helpful for educating on the Emergency Management Enterprise on integrating the needs of people with access and function needs during disaster response. But more must be done given the continued disproportionate impact of disasters on people with access and functional needs. It is important to listen to people with disabilities and disaster equity experts who lead organizations supporting people with access and functional needs. I-DIEM supports the recommendations provided by Marcie Roth, representing the World Institute of Disability, during the Hearing on July 28. Her written testimony for the July 28 hearing provides recommendations that include but are not limited to:

- "(FEMA) modify its Individual Assistance registration process to curtail the incidence of institutionalization of individuals with disabilities."
- "DHS/FEMA and HHS/Administration for Community Living (ACL) provide grant funds to support Independent Living Centers in supporting disaster-impacted people with disabilities in their community."
- "(Crisis counseling and Disaster Case Management for people with disabilities, eligible as a result of Federal Disaster Declarations. Crisis counseling and Disaster Case Management must be provided by disability culturally competent providers, and must be equally effective for all people with communication disabilities."

- “Authorize and appropriate funds for DHS and FEMA to provide disaster preparedness grants specifically targeted to organizations led by and serving marginalized communities, including but not limited to people with disabilities experiencing poverty; people with disabilities experiencing homelessness; women with disabilities; people of color with disabilities; and members of the LGBTQ community with disabilities.” (Marcie Roth, <https://transportation.house.gov/imo/media/doc/Roth%20Testimony.pdf>)

Question 2. We know that public communication is a vital component of emergency response, whether a hurricane, a no-notice event, or during a global pandemic with a novel, invisible, and deadly virus.

The ability to effectively communicate the threats to vulnerable communities and provide guidance on what prevention steps can be taken could be the difference between life and death.

What public communication issues have you seen as it relates to either the COVID-19 response and other disasters, specifically directed to vulnerable communities?

ANSWER. Political leaders, policy-makers, and emergency management officials have a responsibility to integrate equity into preparedness and response to disasters by understanding the unique vulnerabilities and limitations of at-risk communities. They must speak honestly and openly about the threats and communicate the best preparedness and mitigation efforts. But preparedness efforts prior to COVID-19's onslaught in the United States were slow and disjointed. Clear and accurate emergency information regarding the seriousness of the threat was lacking. Several Federal elected and appointed officials minimized the seriousness and potential deadly impact of a Global Pandemic earlier in the year. This is exactly when bold mitigation efforts could have saved lives. This is completely unacceptable and directly resulted in the large and growing death toll in America.

Black and brown communities have legitimate reasons to distrust government officials due to years of racist and inequitable policies and mistreatment. Building trust, especially during an emergency should start with honest conversations and accurate information being shared. Trust of the message and the messenger are vitally important when communicating with communities of color. Instead of partnering with community and faith leaders to “sound the alarm” regarding COVID-19 and providing resources to vulnerable communities and frontline workers (who are disproportionately people of color), efforts were taken by national leaders to downplay potential negative impacts and there major delay with taking action. Though the disaster feels like it has lasted years, it was as recent as early March that senior government officials were projecting COVID-19's severity and potential death toll to be minimal, at worst. That was approximately 6 months ago, when nationally there were only 500 COVID-19 cases and 22 deaths. The number of U.S. COVID-19 cases has now swelled to over 1.25 million cases and caused close to 200,000 deaths with thousand more expected. Disaster impact data that was finally collected and made publicly available confirms that black and brown communities have once again suffered disproportionate disaster impacts. The number of African American and Latinx deaths far outpace their overall population percentage. In some cities, 70% to 80% of cases and fatalities are black and brown people. COVID-19 response has exacerbated inequities for people of color, low-income individuals, people with disabilities, and other vulnerable and marginalized groups. Sadly, the failure to effectively communicate with the public has contributed to these inequitable outcomes, once again.

Question 3. Generally speaking, the field of emergency management lacks representation from women and people of color, especially in positions of leadership. Do you feel this lack of representation impacts the ability for Emergency Management agencies to effectively respond to large-scale disasters? If so, in what ways?

ANSWER. The profession of emergency management's lack of diversity with representation of people of color within its ranks prevents the field from rising to the great disaster challenges of the present and tomorrow. Research indicates that an overwhelming number of individuals designated as “Emergency Managers” are white males. The lack of diversity of those that make-up the emergency management enterprise (federal, state, local, non-profit, and private) contributes to continuous failure to integrate equity into emergency management and improve disaster outcomes in communities of color.

Several studies have been released over the last decade that confirms the positive impact of diversity on organizational performance. Private sector companies increase profits with more women and people of color throughout their organization, especially in positions in leadership. Though not studied as much, the impact of diversity in public service positions, such as emergency management, produces similar

positive results. Racial diversity within the workforce improves decision-making, reduces “blind spot” errors by leveraging new perspectives, and results in better performance and improved outcomes. Within emergency management, a more diverse workforce would ensure that emergency operation and preparedness plans are inclusive and equitably consider the unique needs of communities of color. More representation of people of color in emergency management would increase the likelihood for investing greater mitigation funding into communities that have historically been divested in which has contributed to increased vulnerability. A more diverse network of emergency managers at the decision-making table and in senior roles would promote better response decision such as allocating equitable resources to communities most in need. Short-term and long-term recovery would be improved by the participation of people of color that have a connection to the communities most impacted. Simply put, diversity in emergency management will help to reverse the existing failure to enact equitable practices before, during, and after disasters.

Question 4. What steps could federal, state, and local emergency management leaders take to build a more diverse workforce of emergency management professionals and leaders and also take into considerations as to ensure equities of vulnerable populations are taken into consideration during all phases of the emergency management cycle?

ANSWER. Federal, state, and local emergency management agencies need to make a commitment to diversifying the workforce by setting bold goals, innovating recruitment strategies, and increasing outreach to young people in colleges, high schools, secondary and primary schools. Data collection and dissemination would be a great first step for increasing diversity within the Federal, state, and local emergency workforce. All entities receiving Federal funding should be required to submit workforce diversity data annually. This information is useful for transparency and tracking whether new programs are working. Additionally, emergency management organizations should create and regularly update Workforce Diversity Plan that includes strategies for promoting increased diversity in the field. In support of this plan, emergency management agencies should partner with Minority Serving Institutions (MSI) to develop program to recruitment students of color to internship and entry-level positions in emergency management. Historically Black Colleges and Universities (HBCU), Asian American and Pacific Islander (AAPI) Serving Institutions, Hispanic-Serving Institutions (HSI), and Alaskan Native- or Native Hawaiian-Serving Institutions (ANNHI) have talented students who are interested in starting careers in emergency management but they have not been engaged or provide opportunities.

Internally, the profession needs to create more inclusive workplaces that no longer confine emergency professionals who are women and/or people of color to “second class” status. There are numerous racially diverse emergency management professions that should be provide the opportunity to excel in executive and senior positions directing emergency management efforts. FEMA’s workforce data and the larger Emergency Management Enterprise indicates that more diversity is needed at the senior levels or emergency management agencies. 2020 and the ongoing historic disaster of the COVID-19 Pandemic may indicate the start of new period of mega disasters that will continue to test and disproportionately impact our most at-risk communities of color.

Integrating equity into emergency management and diversifying the field are realistic goals that can be achieved through investment and sustained action. U.S. Department of Labor statistics indicates that field of emergency management is a “hot job” with expansion expected through this decade and into the next. There are numerous emergency managers at or near retirement age. So no, we do not have to choose diversity by eliminating existing professionals. But we do have to create an inclusive environment that will attract people of color to the field of emergency management which is in dire need of more diverse talent. The increasing diversity of the United States further confirms that there is no excuse for the profession to take action. African American women represent the most educated demographic in the United States. Emergency management should commit to leveraging their expertise by adding them to the ranks of emergency managers. Opportunities abound for emergency management to become a more diverse profession if action is taken now. Failure to do so is synonymous to professional malpractice; greater racial diversity will help the field build the capacity and leverage the expertise needed to meet our disaster challenges. The solution is clear, emergency management must better reflect the diversity of the communities it serves. Or it must be held accountable for the mounting negative impacts of neglecting to integrate diverse talent.

Question 5. The COVID-19 disaster has been unprecedented in terms of deaths and other negative impacts, disproportionately to communities of color and people

with disabilities. Researchers have stated that the potential for future pandemics and extreme weather events caused by climate change will exacerbate existing vulnerabilities in communities across the United States.

How can the profession of Emergency Management identify innovative ways to build resilience with our most vulnerable communities in order to reduce the number of lives lost, property destroyed and disproportionate negative impacts?

ANSWER. Innovative strategies to promote equity in emergency management requires for the field to leverage the expertise of diversity, equity, and inclusion experts who can dissect existing policies, plans, and programs to identify inequities and propose solutions. Currently, the field of emergency management does not provide training on diversity, equity, and inclusion (DEI) as a key knowledge, skill, and ability area of the profession. The solutions for integrating equity and prioritizing the needs of the those most at-risk of disasters requires better engagement with the communities of color and other marginalized communities that are frontline and continue to experience disproportionate impacts. It also requires engaging the DEI experts who understand the key issues, history, and data (quantitative and qualitative) that related systemic and structural racism and inequities. They can support efforts to identify solutions to develop more equitable policies and programs. There must be a continuous investment to ensure sustainable support equity work throughout Emergency Management. Emergency management needs to improve partnership with public health, sociologist, researchers, environmental justice, social justice, and urban planning professions to promote innovative equitable resilience-building strategies focused on those most at-risk.

Question 6. What steps should emergency managers take to ensure that diversity, inclusion and equity are integrated within each phase of emergency management—planning, response, mitigation and recovery—in order to address the disproportionate impacts of more frequent and damaging disasters or sea level rise on communities of color, women, people with disabilities, seniors and other vulnerable, under-served communities?

ANSWER. The effort to integrate equity and prioritize the needs of marginalized people is urgently important due to the challenges being faced by the impacts climate change, sea level rise, and extreme events. Produced by consensus from 13 federal agencies the *Fourth National Climate Assessment, Volume II Impacts, Risks, and Adaptation in the United States* found that communities of color will face increasing disproportionate negative impacts of climate change and extreme weather. The report states that “prioritizing adaptation actions for populations that face higher risks from climate change, including low-income and marginalized communities, may prove more equitable and lead, for instance, to improved infrastructure in their communities and increased focus on efforts to promote community resilience that can improve their capacity to prepare for, respond to, and recover from disasters” (Page 55). The rising threat of more impactful natural disasters requires that emergency planners prioritize the needs and tailor preparedness, mitigation, protection, response and recovery approach for those with the least access and means.

Integrating diversity, equity, and inclusion as foundational goal within emergency management requires a full re-examination of all preparedness, mitigation, response and recovery programs. The review will help identify how marginalized communities and people can be prioritized as it relates to resource allocation, plans and programs. Regularly updating social vulnerability assessments can help with guiding where the needs exists which will assist in policy, program, and funding decisions.

Question 7. The words and terms “vulnerability” and “vulnerable communities” are frequently used in the field of emergency management to describe communities of color and other under-served communities. But context is usually not given to fully explain the root causes for why the vulnerability exists in these communities.

While emergency managers are typically looked at as consequence management professionals, another essential function they perform are detailed after action reports that analyze response and recovery operations, identify root causes, and learn from mistakes.

Based on your professional experience as both a practicing emergency manager, but also the co-founder of the Institute for Diversity and Inclusion in Emergency Management, what are the root causes of these vulnerabilities and is there a role for FEMA, state, local, tribal, or territorial EMs to address these root issues?

ANSWER. The effort to build resilience in the most at-risk communities should start with recognizing that past inequities and biases have created the vulnerability that currently exists in communities of color and other marginalized communities. These disasters continue to demonstrate the need for emergency planners and key decision-makers to understand how historical and existing exclusionary and discriminatory practices increase the risks and impact of disasters on specific individ-

uals and communities. Those most vulnerable are consistently not prioritized in disaster planning or allocated sufficient resources during recovery. Years of biased “community development” segregated communities of color to higher risk areas have contributed to creating distrust in government. Emergency management officials have a responsibility to integrate equity into preparedness and response to disasters by understanding the unique vulnerabilities and limitations of communities. There should be a clear recognition that the vulnerability of the community was heightened due to discriminatory policies and these communities will need the more support during a disaster.

The COVID-19 disaster has once again brought to light the glaring disparities that continue to entrap far too many communities of color in a continuous cycle of tragedy and loss. Institutional racism serves as the fuel that creates the inequities that combust when disasters strike. Discriminatory economic and social policies are the root cause for the vulnerability faced by marginalized communities. Decades of divestments have created impoverished communities across the country that lack basic necessities including affordable, safe, and adequate housing. Federal and State guidance to “socially distance” to limit the spread of COVID-19 is difficult when systemic racism has confined impoverished families to occupy incredibly small living spaces. Environmental injustices have located toxic facilities in and around communities of color contributing to concentration of Black and Brown people with the same “underlining health conditions” (asthma, cancer, etc) that makes COVID-19 so fatal.

Question 8. This subcommittee has long been focused on mitigation—the effort to reduce loss of life and property by lessening the impact of disasters and with DRRRA, we ensured that additional Federal dollars are available for pre-disaster mitigation funding.

How do you believe pre-disaster mitigation funds could be more equitably distributed given the increase in large-scale disasters negatively impacting the most vulnerable communities? Do you think there are steps FEMA should take to direct or re-direct mitigation grant programs to communities most in need to ensure a more equitable future?

ANSWER. The subcommittee’s effort to provide additional pre-disaster mitigation funding will support efforts to build disaster resilience. The BRIC program’s success should be measured by its ability to build resilience in the most vulnerable and marginalized communities which include communities of color, low-income, and rural. I-DIEM provided FEMA with the list of recommendations below during the final rulemaking Public Comment period. I-DIEM believes that these recommendations will assist with ensuring equity is prioritized as a guiding principle for allocating the BRIC Program’s funding and prioritizing marginalized individuals and communities.

- Integrate Diversity, Inclusion, and Equity as Foundational Goal of the BRIC Program;
- FEMA commits to allocating the 6% BRIC of the overall/total COVID-19 disaster funds spent this year;
- Create performance measures to ensure that the BRIC program’s success is measured by equity supports communities with the most vulnerability and the least resources;
- Equitably dedicate the majority of funding to the most vulnerable and resource constrained communities;
- Add references to equity, disproportionate impact, communities of color, marginalized communities in recognition that those most vulnerable to disasters are being prioritized;
- Conduct Social Vulnerability Assessments and leverage equity related data to support the decision-making process.

Question 9. We are currently experiencing prolonged response to COVID-19, which can greatly impact our eventual recovery.

How do you envision an equitable recovery from the devastating impacts of the COVID-19 pandemic? How can we improve recovery planning to counteract the disproportionate effects? What do you consider a favorable timeline for equitable recovery and how would you approach such a timeline?

ANSWER. After nature disasters with major infrastructure impacts funding is provided to support both short-term and long-term recovery, in order to rebuild communities. COVID-19 did not have cause infrastructure impacts but the needs are even greater and resources must be allocated to support the communities of colors that were hardest impacted by this unprecedented disaster.

An equitable recovery from the unprecedented impacts of COVID-19 will focus on mitigating the root causes that have led to disproportionate impacts on in Black,

Hispanic/Latino/x, and Indigenous communities. Major recovery investments/funding is need to be made in public health, housing, education, economic development, and every other major policy area so that deeply rooted systemic and structural racism and discrimination can get untangled. Systemic changes should occur related to disaster preparedness, mitigation, response and recovery. Over 200,000 people dying should promote a dramatic and noticeable change within public health and emergency management with a major focus on ensuring all efforts are rooted in equity.

Question 10. What immediate steps could FEMA and its Federal partners involved in disaster relief take to promote equity and improve disaster impacts for vulnerable populations? And, similarly, what steps do you believe Congress must take?

ANSWER. Congress, FEMA, and the entire Emergency Management Enterprise's immediate steps to promote equity and improve disaster impacts for vulnerable populations should be to recognize that the continuous disproportionate loss of life within communities of color and other marginalized groups is completely unacceptable. These unacceptable losses require dramatic and urgent changes that impact every policy, program, and funding area within emergency management. The ability to make bold changes that will have lasting impact requires the acknowledgement that the current program, plans, and processes are inequitable.

The question should be asked "how does this program or legislation support those most at-risk for disasters or have the least resource?". A full comprehensive equity assessment of emergency management policies needs to occur conducted by outside experts. Finally, Congress and FEMA need to commitment to providing the financial and human resources to equity integration within emergency management. Funding should be provided to support new equity programs for vulnerable populations, equity-focused personnel, and financial support for environmental justice, social justice, and community-serving organizations that are working in the most at risk communities. Greater support of these organization will have lasting benefits and will build the resilience needed to end the continuing disproportionate impacts of disasters on vulnerable populations.

QUESTIONS FROM HON. PETER A. DEFazio AND HON. DINA TITUS TO CHAD HIGDON,
CHIEF EXECUTIVE OFFICER, SECOND HARVEST COMMUNITY FOOD BANK

Question 1. We know that public communication is a vital component of emergency response, whether a hurricane, a no-notice event, or during a global pandemic with a novel, invisible, and deadly virus.

The ability to effectively communicate the threats to vulnerable communities and provide guidance on what prevention steps can be taken could be the difference between life and death.

What public communication issues have you seen as it relates to either the COVID-19 response and other disasters, specifically directed to vulnerable communities?

ANSWER. Our biggest challenge has been reaching rural communities with limited media outlets. While a media outlet exists in each county we serve, some of these outlets are print based and publish a physical newspaper once per week. In addition, it is up to the individual newspaper whether to run the information we submit as a news story at no cost, or whether they view the information as an advertisement and charge a fee to run information in their newspaper.

We do our best to reach individuals across our service territory regarding distribution efforts and assistance we provide. We have a text caster system that individuals can sign up to receive at no cost which are disseminated daily. We submit information to media outlets regularly in hopes they will help us reach vulnerable populations. We share information with our network of partner agencies, as word of mouth does seem to be an effective means to reach individuals in need. And we continually update our website with current information for individuals with access to the internet.

I believe the most effective means of communication is often direct mail, which is too expensive and not an option for our food bank. Therefore, we rely upon as many other outlets as we can in hopes that we are able to reach as many individuals as possible. If there is one area we believe could directly benefit our dissemination of information it would be efforts to increase access to high speed internet throughout our service territory, specifically in underserved rural communities.

Question 2. What steps could federal, state, and local emergency management leaders take to build a more diverse workforce of emergency management professionals and leaders and also take into considerations as to ensure equities of vulner-

able populations are taken into consideration during all phases of the emergency management cycle?

ANSWER. I struggle to identify a recommendation on how to encourage individuals with diverse backgrounds to consider employment opportunities in emergency management. I can't say that youth exploring career paths and opportunities fully understand the career opportunities in this profession. Perhaps encouraging federal, state, and local emergency management leaders to work with community organizations focused on workforce development could help increase understanding of opportunities which do exist. Additionally, efforts to reach high school students to promote career opportunities could help attract prospects to this career path.

Efforts to ensure states are encouraging local jurisdictions to include vulnerable populations and integrating planning for citizens with access and functional needs into local emergency operations and public health planning could also prove beneficial. Individuals with mobility issues, vision impairments, hearing limitations, or cognitive or intellectual disabilities would certainly be impacted in their ability to understand the effects of or respond to an emergency. The disability community's standard of "nothing about us, without us" is a valuable rule in the planning process. Local emergency management planners should be encouraged to include individuals with diverse backgrounds and abilities in their planning efforts to provide perspective and insight in how to best serve diverse communities.

Question 3. I've heard, as have all my colleagues about the interplay of Federal assistance programs right now. What's been your experience in working in the community to distribute essential nutrition and trying to navigate any Federal help, whether it's FEMA's Disaster Relief Fund, Treasury's Coronavirus Relief Fund, USDA nutrition or commodity distribution, or the FEMA Emergency Food and Shelter Program funds that are administered via the United Way?

ANSWER. I believe this has been a challenge for our organization to understand what exactly is available and how to utilize and maximize funding sources and doing so while adhering to Generally Accepted Accounting Principles (GAAP). My guess is that this has been a challenge for many small non-profit organizations across the country which operate with limited staff and resources dedicated to financial management of the organization's resources. In the next few paragraphs, I will do my best to outline some specific examples and where I believe this has been a challenge for our organization.

First I would like to point out that the support and assistance we have received has been greatly appreciated, and many vulnerable families would not have received the amount of nutrition assistance we have been able to provide since March of this year if not for this additional support. Our opportunities have primarily been available as a result of Families First Coronavirus Relief Act (FFCRA) for food purchase, increases in USDA commodity food distributions, the Coronavirus Food Assistance Program (CFAP) and purchases of shelf-stable food product through state emergency management agencies utilizing federal sources. Additionally, we may be eligible to receive reimbursement for services provided in response to the pandemic, from federal funds made available through state and local government entities. We are currently evaluating or in process of applying for these funds.

One thing I have noticed, is the degree of difficulty for a small organization to navigate these multiple funding sources. We can apply costs related to coronavirus response to funding made available through state, local and private funding sources. This often makes it confusing and difficult in determining how to maximize these opportunities to best meet our mission while doing so according to GAAP principles.

Another confusing process has been whether we are eligible to receive FEMA reimbursement for emergency food distribution expenses. After the presidential disaster declaration for COVID-19 had been made, we heard we may be eligible for FEMA reimbursement for expenses related to emergency food distribution. An appeal was made to the state emergency management agency to work with food banks serving every county in the state to make all food distribution activities eligible for reimbursement. The state declined to pursue this, so we were informed that we would need to sign an agreement with a local public entity to be eligible for the reimbursement. Additional confusion centered around whether having an agreement with one public entity located in our service territory would qualify all eligible expenses across multiple counties in the same state for reimbursement. We ended up signing an MOU with our county with the largest population in Missouri, unsure whether we would be able to submit reimbursement for expenses associated with distributions only in that county, in all 15 counties we serve in the state, or if no expenses would be eligible for reimbursement even with the MOU signed. To date we have not pursued any reimbursement related to this agreement with the county

government, but again most eligible expenses are probably eligible for reimbursement through other channels.

Another example of a lack of information relates to the USDA CFAP program. Our financial auditors indicated they are awaiting additional guidance in auditing this federal program. The food bank has not yet received any funds related to this program, nor guidance on how to track any food loss or distribution records. My question to our auditors is how they plan to audit the federal guidance, when our organization has not received much guidance in how we are to manage or operate the program.

I completely understand the complexity in structuring the COVID-19 federal assistance and the difficulty in creating new programs in response to COVID-19. In my opinion, the federal government should be commended in their efforts to support vulnerable populations through the pandemic, and I hope this feedback is helpful in working to make these programs and response to future unforeseen events streamlined and more efficient.

Question 4. This subcommittee has long been focused on mitigation—the effort to reduce loss of life and property by lessening the impact of disasters and with DRRRA, we ensured that additional Federal dollars are available for pre-disaster mitigation funding.

How do you believe pre-disaster mitigation funds could be more equitably distributed given the increase in large-scale disasters negatively impacting the most vulnerable communities? Do you think there are steps FEMA should take to direct or re-direct mitigation grant programs to communities most in need to ensure a more equitable future?

ANSWER. I believed mitigation could be improved if we look at some of the issues related to my response on question #3. During a disaster, I believe it would behoove us to have existing plans in place prior to a disaster, so that organizations like food banks are ready to respond and meet the needs of the American citizens. Rather than drafting MOUs on a whim or trying to navigate complex reimbursement process across multiple agencies, my belief is that states could take a proactive approach to work with emergency food providers in each state to have a proactive agreement in place to be ready to respond during times of disaster. The infrastructure is in place from a nationwide network of food banks and emergency food providers and entities already equipped to distribute USDA commodities. If agreements were in place prior to a disaster between states and respected non-profit partners, when there was a need for emergency food distributions the ability to respond quickly could be met and efforts to support emergency food distributions with reimbursement could be streamlined.

Question 5. We are currently experiencing prolonged response to COVID-19, which can greatly impact our eventual recovery.

How do you envision an equitable recovery from the devastating impacts of the COVID-19 pandemic? How can we improve recovery planning to counteract the disproportionate effects? What do you consider a favorable timeline for equitable recovery and how would you approach such a timeline?

ANSWER. One thing I have witnessed is the role of hunger relief efforts to support families through the pandemic. There is also much uncertainty regarding the impact low-income families will experience as the recovery timeline progresses. It is hard to anticipate what the effects of utility shutoffs and housing evictions will have for families when bills come due and they are unable to meet payment obligations. As discussions resume on another stimulus package, perhaps these are discussions worth having now to explore ways to help families navigate these challenges. The USDA Supplemental Nutrition Assistance Program (SNAP) is also a very effective mechanism to respond to changes in the economy and is available to all who qualify. A temporary boost in this program could help ensure food is one issue where relief could be found, so that families are better able to address other challenges they face.

Question 6. What immediate steps could FEMA and its Federal partners involved in disaster relief take to promote equity and improve disaster impacts for vulnerable populations? And, similarly, what steps do you believe Congress must take?

ANSWER. While I struggle to offer any suggestions for immediate action to promote equity and improve disaster impacts for vulnerable populations, I will offer that the Feeding America network of food banks has been a primary recipient of federal funds to support COVID-19 recovery efforts. For our food bank, we are in the early stages of implementing diversity, equity and inclusion efforts to evaluate and improve services offered. In addition to providing upcoming training for our entire staff in this area, we are also working to form a committee with a diverse makeup to develop recommendations for our organization to improve in this area. Our goal is

to make sure all resources we receive, including support from federal sources, reaches as many individuals in need, especially our most vulnerable and underserved populations.

QUESTIONS FROM HON. HENRY C. "HANK" JOHNSON, JR., TO CHAD HIGDON, CHIEF EXECUTIVE OFFICER, SECOND HARVEST COMMUNITY FOOD BANK

Question 1. Your testimony speaks to the particular challenges in addressing food insecurity during the COVID-19 pandemic, specifically for black and brown families. Can you speak further to how food insecurity is exacerbated for low-income communities during times of crisis?

ANSWER. Unfortunately we do see disparate prevalence of poverty for minority populations. In response to many recent events, Feeding America took the initiative to evaluate the prevalence of poverty by race in each food bank's service territory. Our service territory by nature is not very diverse. An estimated 88% of our population is White, 3.5% Black, 4% Latino, and .08% Native. But when you dive deep into the estimated poverty of each demographic, 13% of our White population lives in poverty, while 25% of our Black population, 28% of our Native population, and 20% of our Latino population live in poverty.

When I try to understand why this disparity exists as it does, we can assume logical reasoning such as historical opportunities or lack thereof for minority populations that have resulted in this unfortunate circumstance. As a food bank, we are tasking ourselves to develop a strategy to reduce these disparities. The challenge I find is that with the nature of our large distributions with limited interactions with the families we serve, it creates a situation that is challenging for us to understand what we can do to better equip individuals who have the ability to improve work skills toward a path out of poverty.

By no means is this an excuse to remain complacent. My personal belief is that the path out of poverty is often through education and developing an individual's personal and professional skills, and then we hope that because employers must comply with labor laws that every individual is then provided an equal opportunity to success, or that employers will employ based on talent and skillsets without discrimination because it is the right thing to do. You have presented me with a very difficult question to answer in how we as a nation remain fair to everyone in the opportunities we provide, when in reality minority families have an uphill battle from the onset to break historical trends and are faced with an increased likelihood they will struggle with poverty issues.

Question 2. What are some of the greatest challenges food banks face in meeting communities' needs? Is there a more robust, federal response that could bolster the efforts of food banks?

ANSWER. On a personal level for the food bank, we are in the process of developing a diversity committee aimed at listening to and learning from our most disproportionately affected populations in terms of what they need from the food bank. This committee will be tasked with conducting a round table with members from Native American tribes and other minority populations. Topics we will explore include culturally appropriate food options, how to better reach underserved populations and other issues affecting minority populations. A personal long-range goal I have personally considered is how we better handle client intake to understand the individual needs of the families we serve. Senior populations have much different needs for service than young families who have opportunities to improve work skills. I believe our food bank could better serve all families if we could better understand the varying needs of the individual families we serve.

In terms of a federal response which could bolster efforts of food banks, I firmly believe food banks are a tremendous complement to the SNAP program. SNAP can reach every family in need and is responsive to changes in the economy. Our service is a tremendous complement and together we can be extremely successful in meeting the food insecurity needs of all vulnerable families.

QUESTIONS FROM HON. JOHN GARAMENDI TO CHAD HIGDON, CHIEF EXECUTIVE OFFICER, SECOND HARVEST COMMUNITY FOOD BANK

Question 1. Mr. Higdon, your colleagues from the California Association of Food Banks have told me that few foodbanks nationwide will qualify for FEMA reimbursement (under Stafford Act's "Public Assistance"), despite scaling up to meet high demand for food assistance during the current pandemic. The issue appears to be FEMA's overly conservative interpretation of its "duplication of benefits" policy, which has made it operationally infeasible for food banks to pursue FEMA reimbursement for food purchases and distribution.

As you likely know, FEMA “public assistance” reimbursements are contingent upon demonstrating that participants do not receive other federal food assistance, such as food stamps (SNAP), home-delivered meals, WIC, etc. All these federal food assistance programs are supplemental in nature, almost never providing more than 1 to 2 full meals per day. It seems the “duplication of benefits” policy is largely designed to prevent low-income households ending up with a small reserve of food in the pantry or freezer during uncertain times like now. We need to ask ourselves and FEMA, would that really be so bad?

ANSWER. This has been an eye-opening process for food banks across the country to utilize federal sources of funds for emergency food distribution efforts. Simply stated, demonstrating individuals receiving food assistance through FEMA public assistance do not receive other benefits such as SNAP, WIC, USDA federal commodities or food through other federal programs is an unrealistic expectation.

Our organization has received shelf-stable food purchased through Kansas Department of Emergency Management utilizing FEMA public assistance funding. Initially there was an expectation that food banks would verify individuals were not receiving food from other federal sources. However, officials at the state level were successful in pushing back these expectations. With much of our food being distributed through mobile pantry operations, our goal is to create safe and streamlined distributions to reduce long lines of cars which can create resentment of the services we are offering. One community we had served has decided to discontinue their mobile pantry distribution, because of complaints voiced by residents of cars blocking driveways and other disruptions these events have caused. If we create processes to verify recipients of the food purchased through FEMA public assistance are not receiving other food from federal sources this would simply create longer lines and additional frustrations and deter many families from using these services entirely. The families we are serving currently are in very high need of food assistance, and the cumulative effort of multiple federal programs and private initiatives to provide hunger relief is what is truly needed to address a prolonged response to a pandemic.

Question 2. Mr. Higdon, can you please speak to the systemic barriers foodbanks face in getting FEMA reimbursement? And do you agree that the so-called problem FEMA’s “duplication of benefits” policy seeks to prevent is not a real-world problem about which we should worry?

ANSWER. It is looking less and less likely that we will even seek this reimbursement for our emergency food distribution efforts. We have been able to apply for funding from other sources, such as CARES Act funding passed through state and local governments, and there may not even be a need to seek reimbursement from FEMA. But simply trying to keep pools of funds separate and not seek reimbursement for the same expense across multiple federal sources is a challenge and difficult to navigate. I am of the belief that we are better off seeking other sources for funding reimbursement and not utilizing FEMA public assistance for our current response efforts.

QUESTIONS FROM HON. PETER A. DEFAZIO AND HON. DINA TITUS TO MARCIE ROTH, EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER, WORLD INSTITUTE ON DISABILITY

Question 1. This Committee did some good work in expanding FEMA assistance for the disability community in the Disaster Recovery Reform Act, but there’s clearly additional room for enhancements to how FEMA evaluates disaster aid for vulnerable communities.

First, can you speak at all to the effects, if any, from FEMA additional limits in the IHP program to provide repair and replacement for those needing appropriate access to their homes?

Second, can you each discuss how you think FEMA has been engaging with the disability and access and functional needs community in recent disasters and emergencies and has the Agency’s posture shifted given the frequent turnover in the role of Administrator?

ANSWER. A response was not received at the time of publication.

Question 2. We know that public communication is a vital component of emergency response, whether a hurricane, a no-notice event, or during a global pandemic with a novel, invisible, and deadly virus.

The ability to effectively communicate the threats to vulnerable communities and provide guidance on what prevention steps can be taken could be the difference between life and death.

What public communication issues have you seen as it relates to either the COVID-19 response and other disasters, specifically directed to vulnerable communities?

ANSWER. A response was not received at the time of publication.

Question 3. What steps could federal, state, and local emergency management leaders take to build a more diverse workforce of emergency management professionals and leaders and also take into considerations as to ensure equities of vulnerable populations are taken into consideration during all phases of the emergency management cycle?

ANSWER. A response was not received at the time of publication.

Question 4. The COVID-19 disaster has been unprecedented in terms of deaths and other negative impacts, disproportionately to communities of color and people with disabilities. Researchers have stated that the potential for future pandemics and extreme weather events caused by climate change will exacerbate existing vulnerabilities in communities across the United States.

How can the profession of Emergency Management identify innovative ways to build resilience with our most vulnerable communities in order to reduce the number of lives lost, property destroyed and disproportionate negative impacts?

ANSWER. A response was not received at the time of publication.

Question 5. This subcommittee has long been focused on mitigation—the effort to reduce loss of life and property by lessening the impact of disasters and with DRR, we ensured that additional Federal dollars are available for pre-disaster mitigation funding.

How do you believe pre-disaster mitigation funds could be more equitably distributed given the increase in large-scale disasters negatively impacting the most vulnerable communities? Do you think there are steps FEMA should take to direct or re-direct mitigation grant programs to communities most in need to ensure a more equitable future?

ANSWER. A response was not received at the time of publication.

Question 6. We are currently experiencing prolonged response to COVID-19, which can greatly impact our eventual recovery.

How do you envision an equitable recovery from the devastating impacts of the COVID-19 pandemic? How can we improve recovery planning to counteract the disproportionate effects? What do you consider a favorable timeline for equitable recovery and how would you approach such a timeline?

ANSWER. A response was not received at the time of publication.

Question 7. What immediate steps could FEMA and its Federal partners involved in disaster relief take to promote equity and improve disaster impacts for vulnerable populations? And, similarly, what steps do you believe Congress must take?

ANSWER. A response was not received at the time of publication.

QUESTIONS FROM HON. PETER A. DEFazio AND HON. DINA TITUS TO DIANE YENTEL, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NATIONAL LOW INCOME HOUSING COALITION

Question 1. As you probably know all too well, housing insecurity in Nevada is particularly acute, and that's pre-disaster.

In your opinion, what could FEMA do under the Stafford Act that it isn't already doing, to ensure that assistance programs recognize these challenges and ensure that those whose homes are impacted by disaster do not face a red tape disaster when assistance programs end?

ANSWER. NLIHC research demonstrates that disasters exacerbate the existing rental housing crisis for households with the lowest incomes.¹ The impact of disasters on low-income people's housing needs is made worse by FEMA's continued refusal to activate the Disaster Housing Assistance Program (DHAP). After recent disasters, FEMA has refused to activate DHAP and instead relied on its Temporary Shelter Assistance (TSA) program and other programs inaccessible to many low-income survivors. Because TSA must be renewed every 14 days, those disaster survivors who are able to access the program face arbitrary deadlines that cause them to scramble to submit required paperwork or leave the motel before finding a permanent housing solution. While FEMA is authorized to provide TSA for at least 18

¹National Low Income Housing Coalition. (2019). *Long-term Recovery of Rental Housing: A Case Study of Highly Impacted Communities in New Jersey after Superstorm Sandy*. Retrieved from <https://nlihc.org/sites/default/files/Sandy-Rental-Recovery-Report.pdf>

months, the Trump administration abruptly terminated² the program for nearly 2,000 Puerto Rican families displaced to the mainland after Hurricane Maria, forcing them to find alternative housing or to return to their uninhabitable homes on the island with just a few hours' notice.

FEMA's other temporary housing assistance programs—Rental Assistance and Direct Temporary Housing Assistance—are also problematic for low-income families.³ FEMA should reform its existing housing programs and activate DHAP after every major disaster to provide longer-term housing assistance and wrap-around services to low-income survivors. Such assistance should be provided to eligible survivors until the long-term housing recovery—including the rebuilding of affordable rental housing stock—is complete.

FEMA maintains a culture of rigid allegiance to narrowly defined protocol over outcomes; as a result, many disaster survivors, including many of the lowest-income survivors, are wrongfully denied needed assistance. Rather than creating and implementing numerous categories of ineligibility, disaster assistance programs should employ broad-based categories of eligibility, with the aim that every survivor receives the recovery assistance to which they are entitled. FEMA should allow for a flexible system of documentation for distributing disaster recovery assistance. Applying the least restrictive guidance regarding alternative documentation—and doing so consistently across all jurisdictions—would cut down on wasted time and confusion on the parts of both applicants and advocates alike.

Question 1. (con't) Also, the example of FEMA refusing to provide sheltering assistance to the pre-disaster homeless in communities that were ravaged by wildfire seems inhumane; is it your opinion that FEMA could have at least provided temporary sheltering assistance to those survivors under its existing authority to get them out of harm's way?

ANSWER. FEMA frequently denies assistance to people experiencing homelessness prior to a disaster, despite their exceptional needs. During the COVID-19 pandemic, however, FEMA has interpreted the law much more broadly, determining that people who were homeless prior to the disaster are eligible for non-congregate shelter. This demonstrates that FEMA could interpret the law more broadly to serve people experiencing homelessness, but it chooses not to. Congress should enact clarifying legislation to ensure that people experiencing homelessness prior to the disaster have access to the same emergency shelter and disaster relief assistance as other survivors, including rental assistance.

Question 1. (con't) What are your other top priorities for reform?

ANSWER. A reformed disaster housing recovery system centered on the needs of the lowest-income and most marginalized survivors and their communities must ensure opportunities for resident and public engagement, systemic transparency, full accountability and due process, robust equity and civil rights enforcement, fair mitigation practices, and a focus on increased local capacity and benefit. These priorities must be reflected in every stage of disaster recovery and response, from pre-disaster emergency planning through long-term recovery and post-recovery mitigation, to help address the systemic racism and classism that have resulted in our broken current disaster housing system. NLIHC and the Fair Share Housing Center of New Jersey recently released “Fixing America’s Broken Disaster Housing Recovery System Part Two: Policy Framework Recommendations.”⁴ The report identifies specific local, state, and national policy recommendations to redesign our national disaster housing response and recovery system to center the needs of the lowest-income survivors and their communities.

Congress should permanently authorize DHAP and automatically activate it after every disaster. Congress should also enact the “Housing Survivors of Major Disasters Act,” (H.R. 2914)⁵ introduced by Representative Adriano Espaillat (D-NY). The bill, which passed unanimously out of the House Transportation and Infrastructure Committee in February 2020, contains critically needed reforms to ensure the low-

²National Low Income Housing Coalition. (2018). *NLIHC's Response to Court Ruling Allowing FEMA to Move Forward on Evicting Hurricane Maria Survivors*. Retrieved from <https://nlihc.org/news/nlihc-response-courtruling-allowing-fema-move-forward-evicting-hurricane-maria-survivors>

³National Low Income Housing Coalition. (2018). *Setting the Record Straight: Disaster Rental Assistance Programs at FEMA and HUD*. Retrieved from https://nlihc.org/sites/default/files/Rental-Assistance_Setting-The-Record.pdf

⁴National Low Income Housing Coalition. (2020). *Fixing America's Broken Disaster Housing Recovery System Part Two: Policy Framework Recommendations*. Retrieved from https://nlihc.org/sites/default/files/Fixing-Americas-Broken-Disaster-Housing-Recovery-System_P2.pdf

⁵H.R. 2914, “Housing Survivors of Major Disasters Act of 2019.” Retrieved from <https://www.congress.gov/bill/116th-congress/house-bill/2914>

est-income and most marginalized survivors can access the housing assistance they need to recover. The bill would address the significant title documentation challenges that have resulted in thousands of eligible disaster survivors being wrongfully denied FEMA assistance.

Question 2. We know that public communication is a vital component of emergency response, whether a hurricane, a no-notice event, or during a global pandemic with a novel, invisible, and deadly virus.

The ability to effectively communicate the threats to vulnerable communities and provide guidance on what prevention steps can be taken could be the difference between life and death.

What public communication issues have you seen as it relates to either the COVID-19 response and other disasters, specifically directed to vulnerable communities?

ANSWER. Emergency planning and implementation frequently assumes that all residents have resources, education, and English language proficiency, as well as physical and psychological capabilities to acquire, understand, and perform necessary tasks during an emergency. These expectations are simply not true for many of the lowest-income and most marginalized households that live in under-resourced communities, have a disability or limited English proficiency, or lack access to public information sources. FEMA has been inexplicably slow to publish health and safety notices and instructions in any language other than English. In Puerto Rico, FEMA struggled to find translators or provide basic forms in Spanish, the predominant language on the island, contributing to delayed disaster assistance after Hurricane Maria.⁶ Although FEMA's internal regulations require the production of such documents, advocates have expressed concern that forms distributed by the agency and its grantees are provided only in English or with few translated versions. Communication of emergencies to the deaf and blind communities is often erratic despite requirements of the law. Emergency broadcasts in some states and localities, for example, feature no sign language interpreters or partially obscured interpretation that makes it difficult for a viewer to fully understand what information is being conveyed. Moreover, emergency communications tend to be highly centralized through government channels, limiting at-risk populations' access to critical information.

Question 3. What steps could federal, state, and local emergency management leaders take to build a more diverse workforce of emergency management professionals and leaders and also take into considerations as to ensure equities of vulnerable populations are taken into consideration during all phases of the emergency management cycle?

ANSWER. A response was not received at the time of publication.

Question 4. We're currently awaiting a GAO study regarding rates of approval and denial for FEMA Individual Assistance, but understand that your organization also leads a coalition of social and data scientists to examine post-disaster housing outcomes—the Disaster Housing Research Consortium.

Can you discuss some of the Consortium's findings regarding FEMA's effectiveness in housing vulnerable populations post-disaster? How collaborative has FEMA been with the Consortium?

Are there any statutory limitations on FEMA sharing this data with Consortium researchers, or is this a policy decision by the Agency? Further, what data collected or analyzed by FEMA should be made publicly available or available to researchers?

ANSWER. Despite the clear need, FEMA often neglects the needs of America's lowest-income disaster survivors and exacerbates housing insecurity. FEMA creates unnecessary and often insurmountable barriers to accessing its programs, leaving many low-income survivors at increased risk of displacement, eviction, and, in worst cases, homelessness. "Fixing America's Broken Disaster Housing Recovery System Part One: Barriers to a Complete and Equitable Recovery"⁷ identifies how our country's disaster housing recovery framework exacerbates and reinforces racial, income, and accessibility inequities at each stage of response and recovery. This report is part of a two-part series released by NLIHC and the Fair Share Housing Center

⁶Davidson, J. 2020. How a lack of diversity at federal agencies can have serious consequences. Retrieved from https://www.washingtonpost.com/politics/how-a-lack-of-diversity-at-federal-agencies-can-have-serious-consequences/2020/02/29/ceec904e-5a65-11ea-8753-73d96000faae_story.html

⁷National Low Income Housing Coalition & the Fair Share Housing Center of New Jersey. (2019). *Fixing America's Broken Disaster Housing Recovery System Part One: Barriers to a Complete and Equitable Recovery*. Available at: https://nlihc.org/sites/default/files/Fixing-Americas-Broken-Disaster-Housing-Recovery-System_P1.pdf

of New Jersey, with critical input from members of the NLIHC-led Disaster Housing Recovery Coalition.

After Hurricane Maria, FEMA denied nearly two-thirds⁸ of the nearly 1.2 million applications filed in Puerto Rico for individual assistance—twice the denial rate in Texas after Hurricane Harvey.⁹ At least 77,000 Puerto Rican households were denied assistance due to title documentation issues. These same issues occurred after Hurricane Katrina, Hurricane Michael,¹⁰ and the California wildfires.¹¹ While advocates worked with FEMA to create a new tool—a sworn statement—to help survivors overcome title documentation barriers, FEMA has refused to notify survivors affected by the issue nor has it made the resource available on its website, at local Disaster Recovery Centers, or on social media. FEMA staff have now indicated that rather than formally adopting a sworn statement, the agency may instead simply refuse to create such documents after future disasters, doubling down on a clearly flawed and failed policy.

After past disasters, FEMA's failure to provide basic transparency—ranging from damage assessments, determination of unmet needs, program design and implementation, grantee and subgrantee performance, and how federal dollars are spent—has hindered efforts to effectively target and distribute aid to those most in need. FEMA has consistently refused to clarify or make public important information about its aid application process. This makes it difficult, if not impossible, to determine who is eligible to receive assistance and why assistance is denied. Freedom of Information Act (FOIA) requests to FEMA often go months or years without being answered. NLIHC filed a FOIA request in December 2018 requesting basic materials, including FEMA's application for assistance, procedure manuals for determining eligibility, and data sharing agreements with HUD and other federal agencies. To date, FEMA has not provided these materials. In other cases, FEMA refuses to provide basic information, claiming grounds of privilege. In recent years, some progress has been made with the release of data after major disasters through FEMA's OpenFEMA portal. These changes, while a welcome development, are not enough and may not be continued.

FEMA's leadership, unfortunately, has ignored the research consortium's requests to allow deeper access to IA data for research purposes, such as evaluating equity in FEMA's response to disasters. FEMA's publicly available data simply identifies applicants by their ZIP code. There is little ability for community groups, policy and research organizations like NLIHC, and academic institutions to obtain detailed data that would allow them to examine trends in specific neighborhoods, such as identifying neighborhood disparities when it comes to FEMA's response.

The Privacy Act requires federal agencies to protect the privacy of individuals by ensuring the confidentiality of an individuals' information. In our opinion, FEMA routinely hides behind this Act. Other Federal agencies manage to share personally identifying information (PII), like an applicant's address, with researchers and organizations capable of managing and protecting such confidential information. HUD, for example, requires those who wish access to PII data to complete a Data License application that is reviewed by headquarters. HUD's requirements are clear, unambiguous, and known by anyone who wishes to apply. FEMA's process of PII-data sharing, in contrast, appears to be arbitrary with little to no transparency. We have encouraged FEMA to look to how other federal agencies, including the Department of Homeland Security and HUD, have operationalized data sharing for research purposes with entities capable of protecting this data.

Basic, essential information about federal disaster response and recovery efforts must be made publicly available in a timely manner. Application and assistance outcomes should be tracked over the long-term to enhance data collection and analysis capabilities for disaster researchers and policymakers. Program enrollment data, de-enrollment data, and other metrics showing the successes and failures of a disaster recovery program should also be collected. This enhanced data can be used to create best practices to be incorporated into future disaster planning and response efforts.

⁸Slate. (2018). *FEMA has rejected 60 percent of assistance requests in Puerto Rico. Why?* Available at: <https://slate.com/technology/2018/06/hurricane-maria-aftermath-fema-rejects-60-percent-of-assistance-requests.html>

⁹NPR. (2018). *Unable to prove they own their homes, Puerto Ricans denied FEMA help.* Retrieved from <https://www.npr.org/2018/03/20/595240841/unable-to-prove-they-own-their-homes-puerto-ricans-denied-fema-help>

¹⁰National Low Income Housing Coalition. (2019). *Impact of Hurricane Michael.* Retrieved from <https://nlihc.org/sites/default/files/Hurricane-Impact-Michael.pdf>

¹¹National Low Income Housing Coalition. (2019). *Impact of the 2018 California Wildfires.* Retrieved from <https://nlihc.org/sites/default/files/California-Wildfire-2018.pdf>

Question 5. While FEMA has been denying an ability to provide temporary sheltering for people in disaster areas who were experiencing homelessness pre-disaster, we have seen instances during COVID response where the Agency deemed such assistance—in the form of temporary and non-congregate sheltering—to be an emergency protective measure and thus reimbursable.

Now that we're more than four months into these declared events, has this allowance from FEMA led to a significant demand for reimbursement from the Disaster Relief Fund from organizations focused on housing and sheltering disaster survivors or other organizations focused on services for those experiencing homelessness?

ANSWER. People experiencing homelessness are among those individuals who have been hardest hit by the pandemic, suffering from high rates of severe illness and death from coronavirus. People who are homeless and contract coronavirus are twice as likely to be hospitalized, two to four times as likely to require critical care, and two to three times as likely to die than others in the general public. The only way to reduce this risk is to move these individuals to safer non-congregate sheltering. While FEMA has worked with states and localities under its Public Assistance (PA) program, a very limited number of people experiencing homelessness have been able to move into temporary motels for self-quarantine and self-isolation. States, local governments, and homeless service providers report high barriers to using FEMA funds to effectively and efficiently moving people experiencing homelessness into hotels.

Housing and homeless shelter and service providers working directly with impacted populations often lack the critical information needed from FEMA to plan and interface with the PA program. FEMA failed to release clear guidance regarding program rules, including rules related to reimbursement eligibility and the use of matching funds. This lack of guidance and distrust of FEMA's reimbursement process led to delays in housing people experiencing homelessness in hotels. FEMA's rigid and narrow interpretations of eligibility unnecessarily complicate the assistance process and, in many instances, prevent people experiencing homelessness from accessing assistance altogether.¹² As authorized by the Stafford Act, FEMA can administer a wider suite of disaster assistance programs designed to be deployed rapidly to address the broad range of challenges faced by individuals during and after a disaster, including housing instability, financial stress, and the need for legal services. Rather than activate existing programs to serve people experiencing homelessness amid the public health crisis, FEMA placed the responsibility of quickly designing and establishing new programs on overburdened state and local governments. As a result, state and local governments have reported significant challenges negotiating leases, operating hotel programs, and overcoming resistance to the programs from local officials and community members.

Question 6. This subcommittee has long been focused on mitigation—the effort to reduce loss of life and property by lessening the impact of disasters and with DRR, we ensured that additional Federal dollars are available for pre-disaster mitigation funding.

How do you believe pre-disaster mitigation funds could be more equitably distributed given the increase in large-scale disasters negatively impacting the most vulnerable communities? Do you think there are steps FEMA should take to direct or re-direct mitigation grant programs to communities most in need to ensure a more equitable future?

ANSWER. Mitigation efforts must be directed to areas directly impacted by disasters before focusing on broader mitigation needs. Above all else, mitigation goals should focus on bringing marginalized and low-income communities up to a basic standard of infrastructure and protection from future disasters, rather than on increasing local revenue. One way to ensure mitigation projects are equitably distributed is to tie funding for mitigation to the level of community need. This would require that social vulnerability, housing, and other needs are addressed during mitigation planning and implementation.¹³ When environmental reviews are required, for example, these reviews should include an assessment of the social vulnerability of the community.

Mitigation must become a standard part of evaluating federal funds for other housing projects, across all federal agencies. For example, at the renewal of HUD funding such as project-based rental assistance, there should be a resident-informed

¹² Karlis, N. (2020). *How bureaucracy kept the Bay Area from housing the homeless*. Retrieved from <https://www.salon.com/2020/06/21/how-bureaucracy-kept-the-bay-area-from-housing-the-homeless/>

¹³ See Flanagan et al., A Social Vulnerability Index for Disaster Management, 8 *Journal of Homeland Security and Emergency Management* 1, Article 3 (2011). Available at: <https://bit.ly/3ePdXvh>

evaluation of climate risk and serious consideration of alternatives to continuing to fund developments in harm's way. In addition, the creation and dissemination of mitigation best practices should be a top priority for policymakers and mitigation planners.

Question 7. We are currently experiencing prolonged response to COVID-19, which can greatly impact our eventual recovery.

How do you envision an equitable recovery from the devastating impacts of the COVID-19 pandemic? How can we improve recovery planning to counteract the disproportionate effects? What do you consider a favorable timeline for equitable recovery and how would you approach such a timeline?

ANSWER. Beyond revealing the inequities of the national disaster response and recovery system, the COVID-19 pandemic has exposed structural failures that perpetuate discrimination rooted in both racism and economic class. Black and Native people—who, even before the pandemic, faced higher rates of homelessness and housing instability—are most at risk of severe illness and death due to the coronavirus, and Black and Latino people are disproportionately harmed by the resulting economic impacts. Without significant federal action, our nation will see a rise in evictions and homelessness, once again, impacting Black and brown people the most. Congress must act to prevent this tragic, costly, and entirely preventable outcome by passing a relief package that includes the essential resources and protections for America's lowest-income renters and people experiencing homelessness included in the "HEROES Act." Congress should also pass the long-term solutions needed to address the underlying causes of homelessness and housing instability that increase the risk of future outbreaks: the severe shortage of affordable and accessible housing for people with the lowest incomes.

The National Low Income Housing Coalition, the National Alliance to End Homelessness, the Center on Budget and Policy Priorities, and National Health Care for the Homeless Council have developed the *Framework for an Equitable COVID-19 Homelessness Response*,¹⁴ which provides guidance for how homelessness systems can leverage the CARES Act and approval of other funding sources, such as FEMA PA, to simultaneously conduct emergency protective measures and plan for recovery-oriented uses of these funds. All components of the framework, which will be continuously updated, include a racial justice and equity lens.

Question 8. What immediate steps could FEMA and its Federal partners involved in disaster relief take to promote equity and improve disaster impacts for vulnerable populations? And, similarly, what steps do you believe Congress must take?

ANSWER. A reformed disaster housing recovery system that is centered on the needs of the lowest-income and most marginalized survivors and their communities must ensure opportunities for resident and public engagement, systemic transparency, full accountability and due process, robust equity and civil rights enforcement, fair mitigation practices, and a focus on increased local capacity and benefit. The federal government must ensure that equity is a central and explicit goal of federal disaster housing response and recovery efforts.

FEMA should take immediate actions to ensure survivors with the greatest needs have access to safe, decent homes while they get back on their feet by activating the Disaster Housing Assistance Program (DHAP), addressing financial barriers that prevent low-income survivors from accessing FEMA's Transitional Sheltering Assistance (TSA) hotel program, and ensuring that people experiencing homelessness prior to a disaster are eligible for the same emergency shelter and housing assistance available to impacted renters.

Congress can take several actions to improve disaster impacts for marginalized communities. Congress should permanently authorize the Disaster Housing Assistance Program and automatically activate it after every major disaster to provide longer-term housing assistance and wrap-around services to low-income survivors. Congress should also enact the "Housing Survivors of Major Disasters Act," (H.R. 2914), introduced by Representative Adriano Espaillat (D-NY), which contains critically needed reforms to ensure that the lowest-income and most marginalized survivors can access essential housing assistance.

Congress should require that FEMA provide basic, essential information about federal disaster response and recovery efforts, including damage assessments, program design and implementation, how federal dollars are spent, the aid application process, and other important information.

¹⁴"The Framework for an Equitable COVID-19 Homelessness Response." Available at: <https://endhomelessness.org/a-framework-for-covid-19-homelessness-response-responding-to-the-intersecting-crises-of-homelessness-and-covid-19/>

Congress should require FEMA to prioritize categorical eligibility, simplify the application and appeals process, and track and report on outcomes to ensure recovery aid reaches those in need.

Congress should also require FEMA, HUD, and other federal agencies involved in disaster recovery efforts to work together and create a single, universal application for aid.

Finally, Congress should enact clarifying legislation to ensure that people experiencing homelessness prior to the disaster have access to the same emergency shelter and disaster relief assistance as other survivors, including rental assistance.

QUESTIONS FROM HON. HENRY C. “HANK” JOHNSON, JR., TO DIANE YENTEL, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NATIONAL LOW INCOME HOUSING COALITION

Question 1. Your testimony illuminates many of the barriers that FEMA creates to equitable housing recovery, creating further evidence that our systems continue to fail the most vulnerable among us.

Are you aware of instances where FEMA’s inadequate housing response has put people experiencing homelessness at greater risk of exposure to COVID–19? What has FEMA’s coordination looked like at the state level to meet housing needs during the pandemic?

ANSWER. While FEMA has worked with states and localities under its PA program, a very limited number of people experiencing homelessness have been able to move into temporary motels for self-quarantine and self-isolation. States, local governments, and homeless service providers report high barriers to effectively and efficiently using FEMA resources to address the health and housing needs of people experiencing homelessness. These barriers include the agency’s narrow eligibility criteria, lack of clear guidance and systemic transparency, refusal to activate its full range of programs, and failure to address permanent housing needs.

Lack of clear guidance from FEMA regarding program rules, including reimbursement eligibility and the use of matching funds, has contributed to delays in moving people experiencing homelessness to non-congregate settings. FEMA has neglected to authorize its full range of assistance programs to address the pandemic, placing the responsibility of quickly designing and establishing non-congregate shelter programs on overburdened state and local governments. As a result, state and local governments have reported significant challenges with hotel negotiations, resistance from local officials and community members, and capacity issues. FEMA has no measures in place to ensure that individuals temporarily residing in hotels and motels are transitioned into permanent housing before PA funding ends. As a result, there is widespread concern that participants will be pushed back into homelessness when FEMA ends its program—a crisis that is preventable and predictable.

Question 2. Would you say that FEMA’s neglect and mishandling of housing relief and recovery worsens our nation’s history of racist and discriminatory housing practices? What would the implementation of anti-racist and anti-class discriminatory housing practices from FEMA look like?

ANSWER. Communities of color are disproportionately harmed by our current disaster housing recovery framework. After disasters, people of color, people with disabilities, and immigrants face increased displacement from the dual threats of disinvestment and speculation, which exacerbate the disparities created by segregation and inequality.¹⁵ Many long-term recovery and mitigation efforts continue a decades-long legacy of underinvesting in communities of color, retrenching segregation and ensuring that these neighborhoods lack the basic infrastructure to protect residents from disasters.

It is critical for disaster recovery planning to go hand in hand with fair housing. Disaster recovery efforts, which often include significant funding, represent a unique opportunity to rebuild in a way that addresses rather than entrenches these disparities. All actions must be explicitly anti-racist: analyzed to determine if they exacerbate, leave in place, or ameliorate existing or historic patterns of segregation and discrimination in housing and infrastructure and remedied accordingly. Given the widespread nature of segregation and inequality in the U.S., it is not enough to state the equitable intent of a disaster recovery program. Explicit requirements for desegregation and adherence to civil rights law must be included in both contractor regulations and agreements with states, local governments, and federal agencies. Making equity explicit strengthens the ability of protected classes to seek

¹⁵ Gretchen Frazee, “How Natural Disasters Can Increase Inequality,” PBS, April 2019. Available at: <https://to.pbs.org/3fwnisu>

legal redress at times when recovery is less than equitable. Federal law should require compliance.

QUESTION FROM HON. JOHN GARAMENDI TO DIANE YENTEL, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NATIONAL LOW INCOME HOUSING COALITION

Question 1. Ms. Yentel, prior to the COVID-19 pandemic, my home state of California was suffering from a severe lack of affordable housing. As millions of Californians lose their livelihoods due to this pandemic and face a systemic housing shortage, Congress must make forward-looking investments in federal programs like the U.S. Department of Housing and Urban Development's "HOME Investment Partnerships Program," which supports a variety of affordable housing activities including: rehabilitation of owner-occupied housing; assistance to home buyers; acquisition, rehabilitation, or construction of rental housing; and tenant-based rental assistance.

In June, I introduced the "HOME Investment Partnerships Reauthorization Act" (H.R. 7312) to increase the authorized funding level for the program from \$2.2 billion to \$6.1 billion annually. Will the National Low Income Housing Coalition consider endorsing my bill?

ANSWER. NLIHC supports increased investments in affordable housing through the national Housing Trust Fund, housing vouchers, and other programs, including the HOME Investment Partnerships program. Before we reauthorize HOME to significantly increase authorized funding, however, we should look at ways to further improve the program so that resources can better serve the lowest-income and most marginalized people and communities. Given our nation's affordable housing crisis, which does disproportionate harm to Black, Native, and Latino renters, we should use any reauthorization bill to examine ways federal programs can advance racial equity. We look forward to working with you to strengthen your bill as it moves through Congress.

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