



## **Salvation and Social Justice**Liberating Public Policy Theologically















7 April 2020

Governor Phil Murphy
Office of the Governor
P.O. Box 001
Trenton, New Jersey 08625

Dear Governor Murphy:

Thank you for your leadership during this challenging public health crisis. We appreciate the information you have been sharing with the public on a regular basis, including the incidence of infection and, tragically, death, due to COVID-19.

We write to urge that you make the following racial and demographic data about the pandemic publicly available in New Jersey:

- Who has been tested, broken down by age, race, ethnicity, municipality, and gender;
- Who has tested positive, broken down by age, race, ethnicity, municipality, and gender;
- The fatality rate, broken down by age, race, ethnicity, municipality, and gender;
- Who is or has been hospitalized, broken down by age, race, ethnicity, municipality, and gender; and
- The incidence of testing, infection, hospitalization, and fatalities among the youth and adult incarcerated populations, broken down by age, race, ethnicity, and gender.

We urge you to release this information for cases to date and in real time as you learn it going forward.

We also urge that doctors and medical professionals who have worked in Black and Latina/Latino communities and have a demonstrated sensitivity to and familiarity with the health conditions of our communities be included on any bioethics panels. In addition, there must be transparency on the framework that will be implemented for making crucial life and death decisions about who will receive critical care and the use of ventilators. We urge that the state health department monitor and provide data on the implementation of this framework.

Public health crises always reveal the cracks in our safety net foundation. And as we are experiencing through this pandemic, these cracks cause earthquakes in our Black and Latina/Latino communities, as well as in other communities of color.

<u>In Chicago</u>, for example, Black people are 70% of those who have died from coronavirus, but are just 29% of the population. <u>In Wisconsin's Milwaukee County</u>, as of last Friday, Black people made up 81% of coronavirus deaths, while representing only 26% of the overall population. <u>In Michigan</u>, also as of Friday, Black people made up 35% of cases and 40% of deaths, while representing just 14% of the population. <u>Detroit</u>, with a majority Black population, has become a hot spot, with a high death toll, as has <u>New Orleans</u>.

In neighboring <u>New York</u>, the epicenter of the virus, the highest concentration of infections has been in low-income neighborhoods of color.

<u>Black people are dying across this country</u> from COVID-19 at strikingly disproportionate rates. That outcome is caused by decades of racism reflected in disinvestment in Black communities, grinding poverty, relentless hypersegregation, redlining and substandard public housing, healthcare, and educational opportunities, police brutality, food deserts, pollution, and landfills.

As a result of these factors, Black people suffer from higher rates of the underlying conditions on which COVID-19 preys: <u>asthma, high blood pressure, diabetes,</u> and more.

Black and Latina/Latino communities, as well as other communities of color here in New Jersey, also confront some of the worst racial wealth disparities in the nation.

While the median net worth for a white family is \$352,070, the latest available numbers show that, for New Jersey's Latina/Latino and Black families, it is just \$7,020 and \$5,900, respectively.

This not only impacts the ability to access proper healthcare but also to take desired precautions.

A disproportionate number of low-wage Black and Latina/Latino New Jerseyans are <u>likely to have "essential"</u> <u>jobs</u> that can't be done remotely and which put them in close contact with others – including in nursing homes, at cash registers, in kitchens, or as part of custodial teams. Black people are also <u>more likely to use public transportation</u> to travel to jobs, making social distancing difficult.

Our youth prisons are another place where the impact of the virus has racial implications. Black kids are almost 21 times more likely to be in prison than white children—the highest disparity rate in America, even though Black and white children commit most offenses at similar rates. As of May 1, 2019, just eight white kids are incarcerated in New Jersey, compared to 113 Black kids, according to state data. In addition, New Jersey has the fourth highest Latina/Latino to white youth incarceration disparity rate in the country. That means if the virus hits youth prison facilities, Black and Latina/Latino kids will be disproportionately affected.

Moreover, racial segregation continues to pervade New Jersey communities and schools. Nearly half of New Jersey's Black and Latina/Latino students attend schools that are <u>more than 90 percent nonwhite</u>. Almost two-thirds go to schools that are more than 75 percent nonwhite.

All these forms of structural racism put Black, Latina/Latino, and other people of color in New Jersey at great risk.

Given this reality, it is likely we will see a disproportionate amount of sickness and death in Black, Latina/Latino, and other communities of color. In fact, the alarming and disproportionate rate of maternal mortality among Black women in New Jersey is a stark indicator of the racial disparities in our state's healthcare system.

Our communities of color are already lacking adequate investment. These conditions will worsen as this pandemic unfolds.

In order for the necessary investment to be made in treating, repairing, and empowering these communities, it is critical that we have the data to inform the required scope and depth of that investment.

We urge you to make the requested information publicly available without delay.

Thank you, again, for all you are doing for New Jersey during these trying times.

We look forward to hearing from you with the requested data.

Respectfully,

Ryan P. Haygood, President & CEO, New Jersey Institute for Social Justice

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Jerry Harris, Vice Chair, New Jersey Institute for Social Justice Board of Trustees

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William T. Rogers, President, Garden State Bar Association

CC: Hon. Sheila Oliver, Lieutenant Governor of New Jersey Judith M. Persichilli, New Jersey Commissioner of Health