To the Members of the House Committee on Energy & Commerce:

Thank you for the opportunity to express my concerns at today’s hearing on COVID-19’s disproportionate impact on environmental justice communities. As many of the Committee’s members know, data continue to reveal a disproportionately higher rate of COVID-19 contractions, hospitalizations, and deaths of African American, Native American (indigenous), and Latinx people in the United States. My organization, the West End Revitalization Association (WERA), based in Mebane, North Carolina, supports policies that will address the historic health disparities that have led to these results.

However, I write today about an issue that has yet to be addressed by Congress. WERA requests that Congress conduct formal oversight and investigations into the management of hazardous and medical waste produced by the COVID-19 pandemic. The growing accumulation of COVID-19 medical, nursing home, and testing waste has yet to be publicly addressed by the Administration, and we hope the Energy & Commerce Committee will be able shine some light on this emerging issue.

For decades, communities of color have lived near landfills and dumpsites. This is troublesome because the amount of waste associated with COVID-19 will only continue to grow. For example, LabCorp and Quest are the international leading COVID-19 diagnostic and testing corporations. The two totaled over $20-billion in assets and more than 4,200 lab sites throughout the country before the pandemic outbreak. With endorsements from the White House, their contracted diagnostics, testing, and new laboratory and research innovations have grown immensely. However, LabCorp and Quest’s necessary public health workload has resulted in a massive amount of COVID-19 public health waste that is going into landfills and incinerators without waste management guidelines.

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It is imperative that Congress set guidelines to address these issues. Together, we must ensure that black and brown communities do not face disproportionate health impacts of COVID-19 medical waste and/or pollution.

I am also concerned about the spraying of human sewage sludge, formally known as biosolids, during the COVID-19 pandemic. For years, many informed lawmakers have been challenged with protests and lawsuits across the nation on this issue. This human sewage and animal manure can carry bacteria and viruses, along with pharmaceutical chemicals, industrial proprietary chemicals, solvents, and manufacturing metals. The impact of biosolids on black and brown communities is an issue in its own right. However, as this pandemic rages on, WERA is particularly concerned about the use of sewage that potentially contains the COVID-19 virus.

WERA demands Congressional leadership on this issue. The CARES Act referenced medical supplies and research 103 times. However, The CARES Act and HEROES Act do not address COVID-19 “medical waste”, hazardous testing waste, handling, transporting, or sustainable disposal. Nor do these bills address the issue of bodily waste. We need strong science to understand the threats of the COVID-19 virus in biosolids, federal guidelines on managing this waste, and easily accessible information that can be disseminated to communities across the nation regarding this issue.

In the next few weeks, WERA will be publishing a detailed report that supports this letter. It was written based on WERA’s Community Owned and Managed Research (COMR) model that has been vetted by the National Institute of Environmental Health Science (NIEHS).²

Thank you for your time and attention. I look forward to a robust discussion on these issues in the future.

Regards,

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The West End Revitalization Association is a member of the Environmental Justice Leadership Forum, a group of 60+ Environmental Justice organizations convened by WE ACT for Environmental Justice. Please include Kerene Tayloe (kerene@weact.org) and Caitlin Buchanan (caitlin@weact.org) on any response to this letter.