

March 3, 2022

Director Rochelle Walensky  
Centers for Disease Control and Prevention

Dear Director Walensky:

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

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

While we share the country's relief as COVID cases and deaths drop from the peak of the latest wave, we have seen this pattern before. When protections that are key to lowering transmission, such as universal masking, are removed too soon after a peak and before low transmission is demonstrably sustained, new variants emerge, causing cases to spike and putting the lives of all Americans – particularly disabled, chronically ill, immunocompromised, people of color, and older people – at greater risk once again. Pandemic policy must recognize that the most effective way to protect the general public is to prioritize those most at risk in all aspects of policy and guidance. Without that focus, it will be impossible to get ahead of the virus in the long-term, end the pandemic, and stabilize the economy. And Long COVID cases resulting from even "mild" infections will continue to rise, with life-altering consequences for hundreds of thousands of people and strain on our health and long-term services and support systems that are not equipped to handle this mass-disabling event. Bureau of Labor Statistics (BLS) data already shows that in 2021 alone, we added around 1.2 million more disabled adults to our communities.<sup>ii</sup> This is more than any other time on record for BLS and does not even take into account the children who have become disabled. Only once case counts and transmission rates have dropped and universal vaccines are available will the pandemic end.

Until that time, all individuals, including people with disabilities, have a right to fully participate in their communities without putting their health and lives at risk. As young children remain ineligible to receive vaccines, people with disabilities and people of color face continuing barriers in accessing vaccines, and millions of immunocompromised individuals are unable to access COVID treatments due to inadequate supply, universal indoor masking remains necessary for the public health of our nation. The new guidance which will drastically reduce indoor masking at this time is contrary to the White House and the CDC's stated goal to protect our community and will exacerbate inequities that lead to our further segregation and cause an even higher risk of severe disease and death.

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

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

Sincerely,

American Association of People with Disabilities  
Autistic Self Advocacy Network  
Be A Hero  
Disability Rights Education & Defense Fund  
Justice in Aging  
Little Lobbyists  
The Arc of the United States  
Mia Ives-Rublee, Disability Justice Advocate  
Matthew Cortland, Disability Justice Advocate

504 Democratic Club  
A Better Balance  
Advancing Health Equity  
American Council of the Blind  
American Foundation for the Blind  
American Geriatrics Society  
Association of People Supporting Employment First (APSE)  
Association of Programs for Rural Independent Living  
Association of University Centers on Disabilities  
Autistic Women & Nonbinary Network  
Bazelon Center for Mental Health Law  
Body Politic  
Brain Injury Association of America  
Californians for Safe Schools  
Caring Ambassadors Program  
Center for Public Representation  
Chinese-American Planning Council (CPC)  
Christopher & Dana Reeve Foundation  
CommunicationFIRST  
Council of Parent Attorneys and Advocates  
Count US IN  
COVID Survivors for Change  
COVID-19 Longhailer Advocacy Project  
Davis Phinney Foundation for Parkinson's  
Detroit Disability Power  
Disability Policy Consortium  
Disability Rights California  
Disability Rights Center of Kansas  
Disability Rights Florida  
Disability Rights Maine  
Disability Rights Michigan  
Disability Rights New York  
Disability Rights North Carolina  
Disability Rights Wisconsin  
Doctors for America  
EndCoronavirus  
Family Voices  
Family Voices NJ  
Family Voices of ND  
Federation for Children with Special Needs  
Freedom from Covid Facebook Group  
Fund for Community Reparations for Autistic People of Color's Interdependence, Survival, & Empowerment  
Health Care Voices

Health Justice

HUNE

Independent Living Resource Center San Francisco

Indiana Protection & Advocacy Services Commission / Indiana Disability Rights

Indiana Statewide Independent Living Council (INSILC)

Justice James Consulting / The World Health Network

Maine Parent Federation

Marked By Covid

Metropolitan Parent Center, Sinergia Inc

Michigan Parent Alliance for Safe Schools

National Academy of Elder Law Attorneys

National Action Network Disabilities Committee New York Chapter

National Association of Councils on Developmental Disabilities

National Association of Social Workers (NASW)

National Center for Parent Leadership, Advocacy, and Community Empowerment (National PLACE)

National Center on Deaf-Blindness

National Coalition for Latinxs with Disabilities (CNLD)

National Council on Independent Living

National Disability Rights Network (NDRN)

National Disabled Law Students Association (NDLSA)

National Down Syndrome Congress

National Health Law Program

National Network for Long COVID Justice

NC Alliance for School Equity and Safety

Neighborhood Access

New England Complex Systems Institute

Not Dead Yet

Organic Acidemia Association

Partnership for Inclusive Disaster Strategies

Patient-Led Research Collaborative

PAVE

Progress Center for Independent Living

Progressive Doctors

RespectAbility

Restore Unto Holiness Ministries

Robin Cogan

Safe Schools for Everyone

San Diegans for Safe Schools

Santee Parents for Immunocompromised Children

Senior and Disability Action

SPAN Parent Advocacy Network (SPAN)

The 145th Street Alliance

The Coelho Center for Disability Law, Policy and Innovation

The Myalgic Encephalomyelitis Action Network (#MEAAction)  
The Parents' Place of MD  
Torrey Pines Elementary School Foundation  
True North Research  
United Cerebral Palsy  
Vermont Family Network  
We All Rise  
Well Spouse Association  
World Health Network / Covid Action Group  
World Institute on Disability

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

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<sup>i</sup> COVID-19 Case Tracker - Autistic Self Advocacy Network (autisticadvocacy.org).

<sup>ii</sup> Roberts, L., Ives-Ruble, M., & Khattar, R. (2022). "COVID-19 Likely Resulted in 1.2 Million More Disabled People by the End of 2021—Workplaces and Policy Will Need to Adapt." Center for American Progress. <https://www.americanprogress.org/article/covid-19-likely-resulted-in-1-2-million-more-disabled-people-by-the-end-of-2021-workplaces-and-policy-will-need-to-adapt/>.