

NAACP of Charleston WV

May 31 ·

The Charleston WV NAACP has submitted a letter to our state leadership including Governor Justice, Senate President Mitch Carmichael, and Speaker Delegate Henshaw requesting additional resources that address COVID-related health disparities in African American and poor communities in WV. The text of the letter is below.

The Honorable Jim Justice, Governor
State of West Virginia;

The Honorable Mitch Carmichael, Senate President
West Virginia State Legislature;

The Honorable Roger Hanshaw, Speaker of the House of Delegates
West Virginia State Legislature

On Saturday May 02, 2020, the Charleston Gazette-Mail featured a front page article; "Forgotten Flock." The sub heading reads; "As COVID-19 tore through a black Baptist church community in North Central West Virginia, state officials remained silent." This article, like so many documented narratives dating as far back as 2002, focuses attention on racial disparities in public health provisions within the African American and poor communities in West Virginia. The lack of attention from medical institutions, politicians and higher education institutions to community and population's health has been made profoundly evident by the devastating impact of the COVID-19 Coronavirus Pandemic.

We acknowledge it as noteworthy that some of the early actions taken by the administration in the beginning days of the Pandemic's assault on the United States are commendable. Nonetheless, the lack of attention shown to the disproportionate negative impact the Coronavirus is having on our State's African American and low income communities is disappointing. The passing comments made during the daily Coronavirus press briefings demonstrate an awareness of national and state data that shows this negative impact. Yet, no substantive plans to address this problem and health disparities within the African American and low income communities have been publicly announced. Data made available, publicly, by a member of the State's Coronavirus Task Force (Secretary Bill Crouch, DHHR) is incomplete with regard to demographics concerning our State's African American population. We are left to conclude that there is an attitude of indifference toward our concerns.

The COVID-19 Coronavirus Pandemic has illuminated what is an equally concerning problem. Recent data indicates that 336,301 West Virginians live in poverty, for a total poverty rate of 19.1 percent of the state's population. This percentage is 5.7 percent higher than the national average. West Virginia had the fourth highest poverty rate among the fifty states in 2017. West Virginia was one of just two states to see its poverty rate increase from 2016 to 2017, according to data released by the U.S. Census Bureau. This level of poverty has a direct negative impact on populations and communities health, education, employment and other social determinants of health. Census Bureau data (June 2018) indicates that West Virginia has 484 census tracts. Many census tracts that have significant levels of poverty were not submitted by state administration to be classified as an "Enterprise Zone."

To address this situation, on behalf of the Charleston Branch NAACP, we request the following:

1. That an Executive Order be issued directing that data on COVID-19 Coronavirus testing within the State be made public on the DHHR Coronavirus Dashboard. Data shown should be by county and include the number of individuals tested, broken out by age, race, gender, and ethnicity; the number of individuals who tested positive for the Coronavirus, broken out by age, race, gender, and ethnicity and likewise the number of deaths attributed to the Coronavirus;
2. That a written plan be publicly disclosed that details the specifics for contact tracing targeted to counties with significant numbers of African Americans and low income populations;
3. That a commitment be made to set aside 20% (\$250,000,000) of the \$1.25 Billion for COVID-19 Coronavirus related activities (expanded testing, contact tracing and other mitigation and treatment schemes) within African American and low income communities. A portion of the \$250,000,000 would include plans for economic/community development, job training, job placement and addressing environmental issues that have a disproportionate negative impact on the health of minority and low income West Virginians;

4. That the Marshall University Minority Health Institute receives adequate funding to fulfill the mission objectives the Institute is tasked to accomplish. Namely, to address poverty, improve community-wide health, stimulate labor force participation and support economic development. The long history of efforts expended to pass legislation that created the initiative to address minority health disparities is well documented. When action was taken to move plans for this legislative initiative from the Department of Health and Human Resources (DHHR) to Marshall's Public Health Department (Dr. Anthony T. Wort, Chairperson), funding provided was shamefully inadequate to accomplish anything meaningful for the African American and low income communities in WV; finally

5. We are requesting that those census tracts with a poverty rate of 20% and higher receive priority for allocations of a portion of the requested \$2.5 million set aside.

We believe these are modest requests given the significant contributions that have been made and continue to be made by our State's African American and low income citizens.

Respectfully Submitted,

Ricardo C. Martin, President
Charleston Branch NAACP

cc: Owens Brown, President
NAACP State Conference of Branches