











To: The Alameda County Board of Supervisors

February 15, 2022

Dear Honorable Board of Supervisors:

Alameda County appears to be on the verge of dropping its indoor masking mandate. That mandate was put in place to reduce the spread of SARS-Cov-2, and is even more critical given the highly transmissible Omicron variant of the virus. We write to urge the county to reconsider this plan. We urge that the indoor mask mandate be kept in place because:

- The county's own agreed upon criteria for the lifting of the mask mandate have not been met;
- A reversal of the indoor masking mandate will disproportionately and adversely impact the County's Black and brown residents and workers;
- Emerging data suggests that a new, more contagious, treatment evading variant of the current Omicron strain (BA.2 sub lineage) is emerging, an effective response to which would require, among other things, continued masking; and
- The County has not replaced a masking mandate with mitigating tools and practices that would help educate communities about their risks of infection and transmission and lessen the opportunity for viral spread.

For these reasons, we believe a lifting of the mask mandate is premature and potentially dangerous. While the County seeks to "get back to normal," data indicate that we are not there yet. Despite the downward trend of COVID cases, the current number of cases still exceeds *all prior waves*, and therefore virus circulation remains high. Availability of treatment is still inadequate, and vaccinations for those under 5 years of age remain unavailable. This is a precarious moment in the trajectory of COVID. We should not be lessening our vigilance.

For your reference, the County adopted three criteria by which to assess whether and when to lift an indoor masking mandate. The three criteria included moderate community transmission rates, low hospitalization rates, and 80% vaccination rate. The first two criteria have not been met. The third criteria, established in the time of Delta, is arguably now too low given decreased vaccine effectiveness against Omicron. Nonetheless, this criteria appears to have been met within many parts of the county, though not among all groups, nor within all zip codes. The fact that two of the three criteria adopted by the County are left unmet, and that the third is not entirely reassuring, should give the County pause before it changes its masking policy.

Premature reversal of the County's indoor masking mandate, like many other COVID policies and practices, almost surely will cause Black and brown and low-income residents of the County to disproportionately bear the brunt of new infections, morbidity and mortality. A lifting of the indoor mask mandate may serve some interests of some groups, but it does not represent sound public health policy for the County's most vulnerable individuals and families. We believe that Countywide policy must take seriously the well-being of these vulnerable persons.

And the County certainly should not be abandoning a proven safety measure – KN94/95 and N95 masks – without offering its residents and works mitigation measures to reduce their risks. It is unclear what increased education the County intends to provide, and what resources it intends to commit, to improving ventilation and air quality for many of the indoor places where persons will congregate, unmasked, for work and leisure. This silence could be deadly. The County needs to do more, not less. It needs to lead, not retreat.

Finally, there may be a valid case for why a dropping of indoor mask mandates now promotes overall well-being. It is conceivable that health professionals, employing the tools in which they are trained, can make that case. But such a case depends upon health professionals being transparent about the underlying data and peer-reviewed modeling and research that supports this case so that the public, including publicly elected officials, may adequately assess their options and make appropriate decisions. It does not appear that a transparent, evidence-based case has been made for the County's proposed lifting of its indoor masking mandate. That should be of concern to everyone. For the reasons summarized above, we do not believe the County should lift its indoor masking mandate. The residents of Alameda County, particularly the county's most vulnerable populations and those at the forefront of high infection and death rates, deserve better.

Respectfully Submitted,

Kim F. Rhoads, MD, MS, MPH, Associate Professor of Epidemiology and Biostatistics, Founding Director, Umoja Health
Damon Francis, MD, Chief Medical Officer, Health Leads
Donna White Carey, MD, Executive Pastor, True Vine Ministries
Michael Lenoir, MD, African American Wellness Project
Noha Aboelata, MD, CEO, Roots Community Health Center
Abner J Boles, III Ph.D., Chair, Leadership Council, Brotherhood of Elders Network
Pastor Michael McBride, Executive Director of Live Free
Donald Frazier, Executive Director, Building Opportunities for Self-Sufficiency™
Aaron Ortiz, CEO, La Familia

cc: Nicholas Moss, MD, Health Officer Colleen Chawla, Director, Health Care Services Agency