August 13, 2020

Governor Gavin Newsom
State Capitol, First Floor
Sacramento, CA 95814

Dear Governor Newsom,

As a member of the Asian Pacific Islander (API) Legislative Caucus and only the second person of Filipino heritage to serve in the California State Assembly, I write to share concerns regarding the disproportionate impact of COVID-19 on Filipino Americans in California, and request you take immediate action in addressing this concern.

Many Filipino Americans are front line workers; in fact, a fifth of registered nurses in California are Filipino who tend to work in the ICU, acute care and surgical units, where COVID-19 patients are treated thereby putting themselves at a greater risk. Preexisting health conditions (asthma, diabetes, and hypertension) are also among the factors contributing to the high number of Filipino American cases and deaths during this pandemic. Additionally, most Filipinos live in multigenerational crowded households which increases the risk of contracting COVID.

Research conducted by The Los Angeles Times and Johns Hopkins University found that Filipino Americans account for at least 35% of COVID-19 deaths in the state’s Asian population. It is also mentioned that the Filipino-American fatality rate for those who contract COVID-19 in Southern California is 40%. However, this data is skewed because data is not disaggregated among the Filipino community. It is my request that the California Department of Public Health report ethnicity by Asian subgroups instead of using ‘Asian American’ as an overarching label.

I’d like to reiterate the following recommendations provided by the API Legislative Caucus:

● Ensure that race/ethnicity and primary language data is based on client self-identification of race/ethnicity and primary language using guidelines from the Institute of Medicine as a minimum standard to classify individuals by six Office of Management and Budget (OMB) racial/ethnic reporting categories.

● Collect data on primary language spoken by impacted individuals to improve community engagement, prevention, testing, treatment, contract tracing and vaccination.

● Immediately implement race and ethnicity categories as prescribed in AB 1726 (2016) to collect disaggregated public health data related to COVID-19.

Sincerely,

TODD GLORIA
Assemblymember, 78th District