

A RESILIENT NATION: 2021 FEDERAL LEGISLATIVE AGENDA



Center for Community Resilience

Milken Institute School
of Public Health

THE GEORGE WASHINGTON UNIVERSITY

WHO WE ARE

The Center for Community Resilience (CCR) at the Milken Institute School of Public Health at the George Washington University works to reduce and eliminate adversities in communities by centering equity at the heart of public policy and building community resilience through practice and program changes. Since the inception of the Building Community Resilience networks in 2015, CCR has become a leader in advocacy efforts, resulting in significant federal funding investments in trauma-informed community supports, along with the newly created Federal Interagency Task Force on Childhood Trauma.

Our aim is to inspire, support and sustain a movement of communities that can address the root causes of childhood trauma, engaging federal, state, and local policymakers on comprehensive solutions driven by research to address the systemic drivers of inequity. We provide targeted strategies to improve the health of communities by enabling cross-sectoral partnerships that align policy and practice with an explicit focus on equity and prevention to cultivate resilient communities. Our work is a solutions-based approach to preventing and mitigating adverse childhood experiences in the context of adverse community environments, what we call the Pair of ACEs.

CCR provides technical assistance, facilitation, analysis and policy guidance to help community leaders, institutions, and collaboratives champion trauma-informed transformation within systems and create measurable, lasting change. Our members include the Building Community Resilience (BCR) networks, the Resilience Catalysts (RC) in Public Health, and the Truth and Reconciliation Project.

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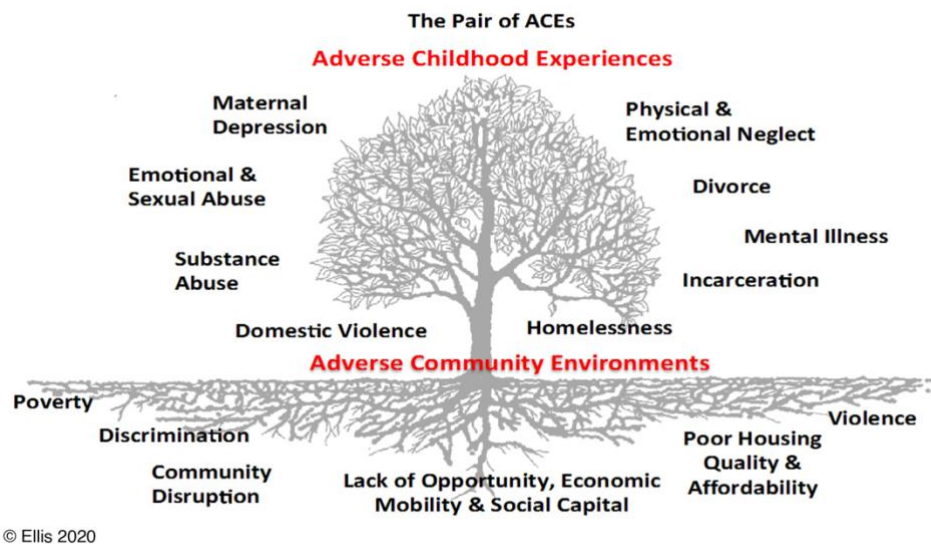
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A Resilient Nation: A Federal Policy Agenda

The Biden-Harris Administration and the 117th Congress are confronting an unprecedented set of interlocking crises not seen in generations. While battling COVID-19 and restoring the American economy will undoubtedly be top priorities for the federal government, there

remains the possibility to build a stronger structural foundation for communities across the nation, particularly communities of color, and address the root causes of deeply entrenched inequity. This policy agenda brings to bear the expertise of the Center for Community Resilience and our communities on the front lines of policy change and addressing long-standing socio-economic and health disparities.

The *Resilient Nation Federal Policy Agenda* seeks to improve the health of communities by enabling cross-sectoral partners to align policy, programs and practice to address adverse childhood experiences in the context of adverse community environments – the Pair of ACEs. The Pair of ACEs tree illustrates the relationship between adverse childhood experiences, experienced at the individual level within a family, and adverse community environments.



Our innovative framing and translation of ACEs, with the explicit focus on equity and prevention, builds on robust activities, programs, policy interventions, and public health practices at the local and state levels. Today, our partners from across 14 states and the District of Columbia are responding to myriad threats to the health and wellbeing of the thousands of children and families they serve. COVID-19 and on-going systemic inequity has put on full display the nation’s most fragile fault lines – race, immigration and economic status. The need for resources to support systems and robust policy remedies for our communities require immediate federal attention.

The Biden-Harris Administration and Congress can quickly accelerate measures that ensure a pathway to equitable recovery from COVID-19, but also dismantle pervasive issues of inequity through laws and policies across the entire federal government.

Building Community Resilience: An Examination of the Nation's Institutions

The Center for Community Resilience envisions a nation of resilient, equitable communities where the voices of all children and families are included and empowered at decision-making tables across sectors, driving practice and policy change that heals trauma across generations. In this spirit, we use our standing as a national technical resource center to evoke a call to action for equity to become the center of public policy in addressing childhood trauma. Adverse childhood experiences in the context of adverse community environments continuously assault the developing minds of children and negatively impact health across the lifespan.¹

A clear and objective examination of the nation's institutions reveals policies designed with the explicit intent of racial oppression, creating inequities beyond racial lines and producing negative place-based and class-based outcomes in communities across the country.² Historically, federal macroeconomic policies have maintained childhood poverty in each facet of American life, which negatively affects the social and cognitive development of the child and the community of the family as a whole. Far too often, policies in the housing, education, and criminal justice arenas embraced racist tactics and reinforced place-based inequities, leaving communities destitute and unable to fully recover. This inequity by design, the cumulative result of social and criminal policies enacted over the course of our nation's history, threatens the efficacy and sustainability of any outcome-focused programs to address inequality. Even today, the COVID-19 pandemic has further exposed those fault lines, reinforcing the race and class divide and the disparate impacts leading to racial inequities across communities.

As Black and Brown communities continue to bear the brunt of inequitable distribution of resources, our Community Resilience framework aligns policy and practice with targeted efforts to chip away at the core of an intentional racist agenda designed to keep marginalized communities on the outskirts of building wealth and sustaining a thriving community for individuals and families. Our work calls on policymakers on the national, local, and state level to confront, examine, and evaluate the roots and drivers of systemic inequity made evident in the persistence of childhood trauma across generations. To this end, we urge Congressional leaders to take action as follows:

CCR Position:

Co-sponsor The RISE from Trauma Act. CCR supports The Rise from Trauma Act, which was introduced as S.1770 in the 116th Congress. This Act establishes grants to create coordinating bodies that would develop strategic plans to address trauma based on community needs, including the creation of clinical and early childhood workforce development programs, toolkits for front-line service workers, and establish the National Law Enforcement Child and Youth

¹ The Center for Community Resilience. [Fostering Equity: Creating Shared Understanding for Building Community Resilience](#)

² Ibid.

Trauma Coordinating Center to assist local juvenile justice agencies. This bill also provides grants to support arts programming for children who have experienced trauma and reporting and guidance-issuing requirements for federal programs addressing trauma.

Co-sponsor The STRONG Support for Children Act. CCR supports The STRONG Support for Children Act, which was introduced as H.R. 8544 in the 116th Congress. The STRONG Support for Children Act would help to prevent adverse childhood experiences (ACEs) and strengthen protective buffers for children and families by establishing two innovative programs to be carried out by local public health departments with grant funding from the Department of Health and Human Services (HHS). These buffers can be achieved through enhanced coordination of supportive services, undoing underlying inequities in systems such as education, housing, health care, employment, and making practices within institutions trauma-informed, culturally specific, and community-based.

Co-sponsor The Strong Child Abuse and Prevention Act. CCR supports The Strong Child Abuse and Prevention Act, which was introduced as H.R. 485 in the 117th Congress. This legislation offers technical assistance by providing professional development to child welfare agencies to improve understanding of and to help address effects of trauma and ACEs in parents and children in contact with the child welfare system, as well as to identify ways to mitigate childhood trauma. The bill expands services for preventing and treating child abuse and also addresses racial bias in the child protective services system.

Co-sponsor the Mothers and Offspring Mortality and Morbidity Awareness Act. CCR supports the Mothers and Offspring Mortality and Morbidity Awareness Act, also known as the MOMMA's Act, which was introduced as H.R. 1897 in the 116th Congress. This legislation requires the Centers for Disease Control and Prevention (CDC) to provide technical assistance and share best practices for collecting data and standardizing reporting in efforts to reduce maternal mortality. Further, CDC will be required to provide grants for state-based collaboratives to improve care immediately before and after birth and improve outcomes for maternal and infant health. The MOMMA's Act also establishes regional centers and allocates funding to specific institutions to address implicit bias and cultural competency in the delivery of health care services.

Co-sponsor the Black Maternal Health Momnibus Act of 2021. CCR supports The Black Maternal Health Momnibus Act of 2021, which was introduced as H.R. 959 in the 117th Congress. This legislation requires a coordinated effort between four federal agencies to address maternal health outcomes among Black women and birthing people of color. HHS must establish task forces to address social determinants of health, maternal mental and behavioral health, and award grants for maternal mortality review committees and innovative maternity care models. Agencies will be required to report on the impact of housing and transportation during prenatal and postpartum periods. The bill also directs the Government Accountability Office (GAO) to report on the perinatal health workforce, maternity care compliance offices, and maternal health outcomes among veterans and incarcerated individuals.

Housing as a Key Factor to Addressing Racial Inequity

A 2019 National Low Income Housing Coalition survey reveals that 85% of Americans believe that access to safe, decent, affordable housing should be a top national priority for citizens, and the president and Congress should take major action to make housing more affordable for low-income households. At face value, the public housing paradigm demonstrates federal and local commitments to remedy issues of unstably housed families by leveraging the instruments of government policymaking and public financing. Simultaneously, the U.S. public housing schema lies at the axis of a seemingly intractable set of visible social inequities – poverty, unemployment, education, lack of public safety, to name a few.

CCR Position:

Co-sponsor the American Housing and Economic Mobility Act. CCR supports the American Housing and Economic Mobility Act, which was introduced as S.787 in the 116th Congress. This bill addresses housing affordability and availability by requiring the Department of Housing and Urban Development (HUD) to provide grants to state and local governments that remove unnecessary barriers to building affordable units and directs state housing finance agencies to construct affordable rental housing and prevent tenant displacement and harassment. Moreover, the legislation includes an approach to help with first-time buyer down payment assistance for lower-income individuals who reside in historically racially segregated areas. The bill also expands fair housing protections to prohibit discrimination based on sexual orientation, gender identity, marital status, source of income, veteran status, or an individual's perceived membership in a protected class.

Recommendations for the Biden-Harris Administration and Congress

Re-instate the U.S. Department of Housing and Urban Development's (HUD) Affirmatively Furthering Fair Housing rule. This rule provides written guidance to help communities meet their fair housing obligations and promote housing choice. However, in 2018, the Trump Administration suspended the implementation of the new rule and weakened many of its provisions related to what constitutes quantifiable actions related to the promotion of fair housing. This effectively removes any meaningful guidance for how states and localities should rectify discriminatory housing practices and undo the harms caused by racial segregation, housing discrimination and continuous disinvestment in affordable housing.

Expand flexible community and economic development grants administered by the Department of Housing and Urban Development to address the Pair of ACES. Congress could expand funding through the Community Development Block Grant (CDBG). The primary goal of the CDBG program is “the development of viable urban communities, by providing decent housing and a suitable living environment and expanding economic opportunities, principally for persons of low and moderate income.” Some localities have announced efforts to support community services and small businesses with existing CDBG funds.

Protect and Expand the National Housing Trust Fund. The National Housing Trust Fund (HTF) provides block grants to states to build, rehabilitate, or preserve housing targeted to extremely low-income households, defined as those with incomes at or less than 30% of the area median income or less than the federal poverty line. These capital investments are needed to build and rehabilitate homes affordable to those at the lowest income level and revitalize distressed communities.

Breaking the Cycle of Mass Incarceration and Police Brutality in America's Criminal Justice System

The death of George Floyd while under police custody sparked nationwide protests to realize racial justice. Too often, over-policing and the related consequences of mass incarceration is the systemic response to crime and violence at the expense of ignoring historic cycles of trauma, structural racism, and the absence of opportunity within communities. States and local jurisdictions are at a critical juncture of reform discussions to counter systems-level discrimination and excessive force against Black and Brown citizens. The Biden-Harris Administration and Congress can begin to course-correct the generations of intentional harm and set America on a path toward a fairer justice system.

CCR Position:

Co-sponsor The Invest in Community Healing Act. CCR supports The Invest in Community Healing Act, which was introduced as H.R. 907 in the 117th Congress. This legislation requires HHS to award grants to community-based organizations to establish or expand programs for the purpose of increasing racial and ethnic minority access to high-quality trauma support services and mental health care. Upon receipt of the grant, community-based organizations would develop innovative culturally specific strategies and projects to enhance access to trauma-informed care and provide access to resources for racial and ethnic minorities who face obstacles in using more traditional services. H.R. 907 would also compel organizations to obtain community buy-in in the development of education and prevention strategies to address law enforcement violence, with priority given to communities who have faced high rates of community trauma from exposure to law enforcement violence and intergenerational poverty.

Recommendations for the Biden-Harris Administration and Congress

Advance meaningful policing reform legislation. Legislation such as the Justice in Policing Act of 2020 sought to address a wide range of policies and issues regarding policing practices and law enforcement accountability, including measures to increase accountability for law enforcement misconduct, to enhance transparency and data collection, and to eliminate discriminatory policing practices.

Incentivize and extend federal resources to develop alternative responder models. Alternative responder models assist in replacing law enforcement as the default first responders when

individuals are experiencing mental health and substance use crises. Diverting these cases to trained health professionals avoids needless entry into the justice system and reinforces a public health approach.

Incentivize companies to employ qualified job applicants who have criminal histories. Black Americans are overrepresented in the criminal justice system due to discrimination and bias in mass incarceration rates. Unemployment rates for formerly incarcerated persons can be five times that of persons who were never imprisoned, with unemployment rates for Black female former inmates at 44 percent and for Black males at 35 percent.³ Policies that might help reduce joblessness among returning citizens contribute to the racial income gap, which plays a key role in the widening racial wealth gap in the United States.

Create a national database to monitor records of police misconduct. There are significant gaps in the collection and analysis of data related to fatalities of civilians involving officers; these gaps make it difficult to assess the scope of systemic problems nationwide, as well as in individual states and localities.

Support promising models concerning sentencing reform. Consider practices such as Washington State’s sentencing review legislation concerning prosecutorial discretion to seek resentencing. The federal government can play a meaningful role in funding and promoting alternative strategies to secure sentencing reform.

Assess federal justice system penalties that criminalize poverty. Congress can advance legislation that ensures that people are not incarcerated due to cash bail requirements for federal crimes. Further, Congress and the DOJ can address federal fines and justice-involved penalties that prevent formerly incarcerated individuals from rebuilding their lives and in some cases precludes their ability to vote.

Firm Commitment to Equity in Education

Evidence of inequity and access across U.S. educational outcomes is a direct result of failed public policies and discrimination that has shaped each tier of education from pre-K through college degree attainment. Under resourced and often highly segregated, many of the nation’s elementary and high school districts remain unable to address comprehensive educational gaps and needs of communities, particularly communities of color. Additionally, educational equity cannot emerge without addressing the needs of special needs students. The special education system for elementary and high school students in the U.S is grossly underfunded, which disproportionately impacts students of color and lower-income families who cannot afford private services to address their children’s unique learning needs. Moreover, at the opposite

³ Citibank GPS. Closing the Racial Inequality Gaps. Available at: <https://www.citivelocity.com/citigps/closing-the-racial-inequality-gaps>

end of the educational strata are compelling data that highlight inequity in terms of college and university matriculation, degree attainment, and disproportionate amounts of debt accrued by communities of color in the United States.

CCR Position:

Co-sponsor the Support Children with Disabilities during COVID19 Act. CCR supports the Support Children with Disabilities During COVID19 Act, which was introduced as S.240 in the 117th Congress. This Act provides FY2021 supplemental appropriations for grants to assist states in providing special education to children with disabilities and for specified early childhood education programs for children with disabilities. Additionally, the bill requires the Department of Education (DOE) to publicly report on its website, and the Department of Health and Human Services (HHS) to release certain expenditure reports related to these funds.

Co-sponsor The Pursuing Equity in Mental Health Act of 2019. CCR supports The Pursuing Equity in Mental Health Act, which was introduced as H.R. 5469 and passed the House in the 116th Congress. The legislation establishes programs to support school-based mental health services and address racial and ethnic mental health disparities. Specifically, the Substance Abuse and Mental Health Services Administration (SAMHSA) must award grants for school- and community-based, mental health services. These services must be trauma-informed and designed to provide comprehensive, culturally appropriate interventions at a school-wide level. Further, the bill reauthorizes the minority fellowship program to support the education of mental health professionals who provide services to racial and ethnic minorities.

Co-sponsor The Mental Health Services for Students Act. CCR supports The Mental Health Services for Students Act, which was introduced as H.R. 721 in the 117th Congress. This Act would allow Department of Education (DOE) to reward grants and contracts for the purposes of implementation of school and community-based mental health programs that build awareness of individual and intergenerational trauma. This bill encourages these grants to be used to incorporate positive behavioral interventions, family engagement, student treatment, and multigenerational supports to foster the health and development of children, prevent mental health disorders, and ameliorate the impact of trauma. Even more so, the bill takes a multi-faceted approach allowing facilitation of community partnerships among families, students, law enforcement agencies, education agencies, mental health and substance use disorder service systems, family-based mental health service systems, trauma networks, and other community-based systems to address child and adolescent trauma, mental health issues, and violence.

Co-sponsor The Keep Our Promise to America's Children and Teachers Act. CCR supports The Keep Our Promise to America's Children and Teachers Act, also known as, the Keep our PACT Act, which was introduced as S. 72 in the 117th Congress. This Act provides funding through FY2031 for grant programs operated by local educational agencies to provide supplementary educational and related services to low-achieving students, including students who attend elementary and secondary schools with relatively high concentrations of students from low-income families.

Recommendations for the Biden-Harris Administration and Congress

Ensure that child-serving systems can provide trauma-informed supports. Social isolation caused by school closures and public health stay-at-home orders, combined with increased economic hardship and stress, are very likely to increase child trauma and exposure to adverse childhood experiences, such as abuse or neglect. Congress could ensure that future funds directed to schools, childcare providers and other child- and family-serving systems can be used to implement trauma-informed supports in those settings and provide mental health supports to children, their caregivers, and the workforce of those systems. In addition, Congress can increase funding for the National Child Traumatic Stress Network, which provides guidance and technical assistance to communities in addressing and preventing child trauma, SAMHSA's Project AWARE (Advancing Wellness and Resilience in Education), and grants implemented by partners in Baltimore such as ReCAST (Resiliency in Communities After Stress and Trauma) that provide services and support to youth and families exposed to trauma through natural or man-made disaster or civil disturbances.⁴ Further, Congress can advance legislation that supports school districts in implementing trauma-informed programming that is conveniently located and accessible to all children and families regardless of immigration status, ability to pay, and prior involvement in the criminal legal system.

Reinstate Obama Administration directive to remedy racial disparities in school discipline. Black students without disabilities are more than three times as likely as their white peers without disabilities to be expelled or suspended.⁵ Promoting effective and appropriate school discipline policies and practices ensuring that students can learn and succeed.

Increase the funding available at the federal, state and local level to provide affordable and high-quality early childhood education for all, including universal Pre-K for children ages 3-4. Additionally, Congress and the Administration can shore up Head Start funding to help them respond to COVID-19-related needs of children and families.

Provide comprehensive solutions that mitigate rising student debt. Patterns of generational racial wealth gaps and high levels of college debt among students of color, particularly among women of color, requires substantive remedy by Congress and the Biden-Harris Administration. The Administration can continue to pause the federal student loan payments, including keeping the interest rate at 0% through the end of the fiscal year and into FY2022. Additionally, the Administration can consider temporary efforts to cancel federally backed student debt for each American. Congress and the Administration could ensure a comprehensive approach to shrink the growing price tag of education by guaranteeing grants to states, Tribal, and territories

⁴ National Center for Healthy Safe Children. *SAMHSA Announces New Grants to Help Individuals and Communities Recover from Trauma*. Available at: <https://healthysafechildren.org/resource/samhsa-announces-new-grants-help-individuals-and-communities-recover-trauma>

⁵ Add Civil Rights Data Collection citation

operating community colleges serving low-income students and making public colleges and universities tuition-free for all families with incomes below \$125,000.

Commitment to Addressing Environmental Racism and the Disparate Impacts of Environmental Burdens in Low-income Communities

Low-income neighborhoods and communities of color are disproportionately affected by environmental burdens, related to poor air quality, climate change, and polluted water. Evidence of inequity across the environmental space follows patterns of residential segregation and underinvestment in green spaces resulting in people of color bearing the brunt of higher disease burden due to living in close proximity to environmental waste. Further, residents of these communities, including vulnerable children, are also not allotted their fair share of basic environmental amenities, such as access to open space, healthy foods, and clean public transportation systems. Inattention to the alarming effects of environmental racism perpetuates poor health among vulnerable low-income communities in the United States.

CCR Position:

Co-sponsor the Environmental Justice Mapping and Data Collection Act of 2021. CCR supports this Act, which was introduced as S.101 in the 117th Congress. This legislation addresses environmental hazards causing adverse health outcomes that disproportionately affect communities of color, low-income communities and Tribal communities. This bill would require the establishment of a Committee to use an equity-centered approach when examining environmental hazards in communities by developing a federal government wide tool for assessing and mapping environmental justice communities.

Tackling COVID-19

COVID-19 remains a deadly and destabilizing pandemic, especially in communities least equipped to navigate an ever-present constellation of associated economic- and health-related challenges. While the Biden-Harris Administration and Congress have moved measures that ensure a pathway to equitable recovery, including implementation of key COVID-19 economic rescue relief package provisions focused on economic supports, eviction prevention, food insecurity, childcare services, and targeted supports for the hardest-hit communities and communities of color, future work to ensure stability and vitality remains. Further, efforts to monitor the success of the American Rescue Plan Act of 2021 and make permanent key provisions of the law remains critical.

CCR Position:

Co-sponsor The Coronavirus Mental Health and Addiction Assistance Act of 2021. CCR supports this legislation, which was introduced as S.135 in the 117th Congress. The Coronavirus Mental Health and Addiction Assistance Act of 2021 would establish grants that provide

programs for assisting individuals in managing mental health and substance use disorders during or in connection to the COVID-19 pandemic. This bill would allow HHS to improve coordination and cooperation with other federal health departments and agencies, including the Centers for Disease Control and Prevention (CDC), to best address the mental health and substance use disorders.

Recommendations for the Biden-Harris Administration and Congress

Monitor stimulus money and ensure that it makes it into the hands of individuals who have not received their direct payments in previous disbursement rounds. The Treasury Department could pay particular attention to those lacking a bank account or permanent address. This focus ensures that relief gets to the most vulnerable, including mixed immigration status families, individuals with state-owned child support arrears, and older children. While CCR members supported targeted checks with income phaseout, this latest installment can be viewed as the next action in a more comprehensive strategy to address the real-time economic troubles facing Americans.

Make permanent the Child Tax Credit. This measure would be a step in the right direction on efforts to address inequality and ostensibly lift 9.9 million children above or closer to the poverty line, including 2.3 million Black children, 4.1 million Latino children, and 441,000 Asian American children.⁶

Examine the long-term impact of unemployment assistance through the end of the fiscal year. Include those in the Pandemic Emergency Unemployment Compensation program who have already exhausted their regular state jobless payments. This would provide much-needed assistance to self-employed persons, gig workers, and independent contractors who are acutely affected by economic uncertainty.

Ensure an equitable recovery by providing flexible funds that can be used to address community-identified drivers of adversity. Congress could extend and expand funding through the Community Services Block Grant (CSBG). Funds provided by the CARES Act through this block grant has allowed communities the flexibility to address community-level drivers of adversity and advance equity in the hardest-hit communities.

Extend certain programmatic and administrative flexibilities. The Department of Health and Human Services and other agencies could make permanent flexibilities that have allowed for the provision of certain services, including telehealth and virtual home visits.

Disaggregate and report data related to COVID-19 and the economic recovery by race/ethnicity. Federal agencies overseeing COVID-19 relief funds could collect and report data

⁶ Chuck Marr. Biden-Harris Child Tax Credit Expansion Would Lift 10 Million Children Above or Closer to Poverty Line. January 21, 2021. Available at <https://www.cbpp.org/blog/biden-harris-child-tax-credit-expansion-would-lift-10-million-children-above-or-closer-to>

disaggregated by race and ethnicity and provide public reports examining the impact of relief on communities of color.

Provide targeted relief to non-profit organizations. Many non-profit organizations, including many mid-sized and larger organizations, have not fully benefited from the Paycheck Protection Program and other assistance programs. Without broader support for non-profit organizations, many organizations that provide crucial services, including mental and behavioral health supports, will be forced to reduce staffing or shut down programs.

Extend relief and recovery support for minority-owned businesses. Congress can extend grants/loans to minority-owned business or businesses in federal designated Opportunity Zones. The Treasury Department could issue guidance to lenders on how to support minority-owned businesses.

Address structural barriers to vaccine distribution for communities of color. COVID-19 has further illuminated the fractured and unequal U.S. healthcare infrastructure. While vaccine hesitancy remains an issue of concern, profound structural barriers such individual and community complexity with making appointments (i.e., no computer, a lack of internet or cellular service to schedule an appointment), access to geographically proximate vaccine distribution sites, and a lack of transportation, particularly in rural areas, continues to impede equitable distribution.⁷ Community feedback and leveraging tools such as the CDC Social Vulnerability Index can refine state, local, and federal government vaccine distribution responses and highlight unique challenges among communities of color. The Administration can leverage the lessons from COVID-19, particularly the challenges and facilitators around medical mistrust in efforts to expand health communication and access to overarching preventative services.

Resources

[Community Implementation of Federal COVID-19 Response: Results and Recommendations](#)

⁷ Akilah Johnson. "Lack of health services and transportation impede access to vaccines in communities of color." Washington Post. February 13, 2021. Available at: <https://www.washingtonpost.com/health/2021/02/13/covid-racial-ethnic-disparities/>; Stacy Wood and Kevin Schulman. "Beyond Politics – Promoting Covid-19 Vaccination in the United States." The New England Journal of Medicine 384, no. 7. February 18, 2021. Available at: <https://www.nejm.org/doi/full/10.1056/NEJMms2033790>