

CHAIRMAN GARY PETERS
Senate Homeland Security and Governmental Affairs Committee

SUBCOMMITTEE CHAIRMAN MARGARET WOOD HASSAN
Subcommittee On Emerging Threats And Spending Oversight

SUBCOMMITTEE RANKING MEMBER MITT ROMNEY
Subcommittee On Emerging Threats And Spending Oversight

Lessons Learned: 10 Years Since the Boston Marathon Bombings

Wednesday, April 26, 2023. 10:00 AM EST
562 Dirksen Senate Office Building, Washington, D.C.

Dear Chairman Peters, Subcommittee Chairman Hassan, and Subcommittee Ranking Member Romney,

I am Richard Serino, and I served as the Deputy Administrator of the Federal Emergency Management Agency (FEMA) from 2009- 2014 and previously was the Chief at Boston EMS where I served for 36+ years before going to FEMA. 10 years ago I sat testifying to this same committee to highlight the preparation that took place before the attack that saved hundreds of lives on that devastating day. Today, I am here to highlight and apply lessons we have learned from the attack to the current emerging threats across the United States.

When I think back to April 15, 2013, I first see my city shining. The streets are filled with millions of residents and visitors from around the world - Patriot's Day, an early Red Sox game and the Marathon came together to create a day like no other in Boston. These are the streets I spent 36 years working on at Boston EMS, the streets where I grew up, and the streets I still call home today.

The second thing I see when I think back is a community that came together in the face of danger in an unprecedented way. In the words of the late Boston EMS Captain, Bob "Sarge" Haley, "Everybody ran the right way that day." EMTs, Paramedics, Police Officers, Firefighters, and civilians all saved lives together.

While nothing can replace those we lost, as a community we take solace that our preparedness saved lives. I often say: It was no accident that Boston was prepared to respond that day, it was no accident that equipment was on site. It was no accident that the patients were equally distributed across hospitals. It was no accident to see that lives were saved with tourniquets. Boston was strong because Boston was prepared.

Some of the lessons we learned from the successes in the response have been directly applied to programs on a national level. We saw that tourniquets worked – and that was part of the formation of the [“Stop the Bleed”](#) initiative. The Boston Public Health Commission on Emergency Preparedness worked with family reunification and mental health support. Their efforts were crucial successes in supporting survivors and their families. We now apply that same level of care in the wake of terrorist events in communities across the world with the organization [“One World Strong.”](#) One World Strong has helped thousands of survivors around the world from - the Pulse Night club shooting to Las Vegas to Uvalde to Manchester, UK to France, and more. These are initiatives formed from the tragedy **by survivors for survivors**, with the leadership of Dave Fortier and others.

We saw phenomenal coordination of leadership across agencies, with everyone working together in their respective silos or as we call them “Cylinders of excellence.” In the years following, many people studied the leaders of the response and the level of coordination. This exploration led to the development of “Swarm Leadership” from [Harvard’s National Preparedness Leadership Initiative](#), preparing hundreds of past, current and future leaders to respond as effectively as those women and men did that 10 years ago.

There were Five key aspects of Swarm leadership principles used during the Marathon response:

1. **Unity of mission:** the mission of those leading the response was to save lives.
2. **The generosity of spirit and action-** what we saw in the community.
3. **Stay in your lane, do your job, and help others succeed.** Each team: Police EMS, and Public health asked “what do you got what do you need”
4. **No ego—no blame.** No one took credit for their combined success or pointed fingers when problems arose.
5. **A foundation of trusting relationships.**

I’d like to offer a special thank you to Mayor Tom Menino and Governor Patrick for their leadership *before, during, and after* the bombing. Mayor Menino and Governor Patrick set the tone long before the bombing in stressing the importance of preparing, practicing, and cooperating with compassion for disasters. Both leaders demonstrated the best of servant leadership and allowed their teams to function at their highest level for the greater good.

Other lessons are less easily captured in a single initiative or organization. Today I want to highlight the need for these lessons to be broadly applied to ensure national security.

After the bombing, we learned the value of recognizing of the impact of the trauma on first responders, families, and the community. **Now more than ever, EMTs, paramedics, police officers, firefighters, health care workers, emergency managers, and public health workers are in need of that recognition and support.** COVID-19 has left a devastating toll on the workforce we depend on in the aftermath of a crisis. Without taking care of this *workforce*, with adequate mental health services, workplace conditions, strong leadership, and cross-functional

collaboration so they do not feel abandoned – we are leaving the United States exposed to catastrophic future attacks being left unanswered both in the context of lives and economic well-being.

In the response to the Marathon Bombing, we also learned how impactful rapid, accurate, and transparent communication is for a whole community response. Twitter was used to communicate crucial information to the entire city. However, **today in the face of cyber-attacks, mis- and disinformation – we have lost both trust and the ability to communicate effectively.** We need to remember the value of crisis communication from the Boston Marathon and institutionalize it across federal, state, local, tribal, and territorial agencies.

Unlike ever before, our local emergency managers and public health workers are dealing with overlapping crises – or poly-crises. It's not just floods, hurricanes, tornados, and wildfires anymore– it's the fentanyl epidemic, it's homelessness, it's immigration and terrorism. Its biosecurity and cyber security threats. **We need to prioritize funding and building stronger public health systems, and stronger emergency management systems and work together on the LOCAL level, with support from the federal level.** Local leaders need ongoing support to maintain the ability to break through the purposeful disinformation aimed at eroding trust – so that they are able to manage everything that is being put on their plate.

Coming out of the COVID-19 pandemic response, with trillions of dollars invested, one could assume that the nation is more resilient to public health threats of concern to national security. In some ways we are. Such as with vaccine development and distribution. But the success of the US COVID-19 vaccine effort didn't happen on its own; it was enabled by decades of long-term investments by the federal government, followed by additional federal investment in the development of the COVID-19 vaccines themselves. The government invested extensively in every aspect of the basic science, preclinical development, and clinical trials for the vaccines; it executed procurement contracts that were critical to creating successful vaccines and ensuring they were available to the US public. But in other ways, our public health system and related emergency response capabilities, and national security posture, are diminished coming out of COVID-19. And will likely get even worse. Here are a few areas of concern [Justin Snair, 2023]:

- Public Health Workforce:
 - 80% increase (80,000 additional full-time employees) needed for adequate infrastructure and minimum services.
 - Local health departments need 54,000 more employees.
 - State departments need 26,000 more employees.
- Underfunding of core public health programs led to under-resourced, understaffed, and overburdened health agencies.
- Loss of trust in public health:
 - Public skepticism towards the White House, CDC, NIH, and state and local public health. (Will the public believe and respond as advised in the next public health crisis?)

- Politicalizing of public health and erosion of legal and statutory authorities in some states and localities. (Will public health have the authority to make essential decisions to protect the public? Or will it be left to political committees?)
- Increasing frequency and severity of disasters:
 - Natural, technological, and social threats are projected to become more frequent and severe, increasing the importance of a resilient public health system. (With the aforementioned challenges, will public health be able to respond to more devastating and more frequent disasters?)

Lastly, the Boston Marathon response showed us the resilience of a community that stands together. Yet today, we live in a fragmented society in the wake of COVID. There is a lack of social cohesion in towns and cities across the country. **How do we bring people together again?** Our nation is left weaker if we cannot recreate that sense of community and purpose that we felt in Boston in April 2013. Emergency Managers are conveners – they bring people together after a disaster. How can we lean on their skillset to help bring people together before a crisis happens to build resiliency?

Let us take the lessons we have learned from the Boston Marathon, and use them to ensure all Americans' health, safety, and well-being. Let us continue to honor the lives lost by preventing future disasters from becoming fatal.

This great moment of reflection on the Marathon Bombing is an opportunity to truly transform the way we recover from COVID and prepare for the next disaster. We can do this by supporting our Public Health, Emergency Management, and EMS workforce; regaining the ability to provide trustworthy communication, and finding meaningful ways to bring people together again.

Recommendations to Improve Public Health and Emergency Management Resilience and National Security

1. Bolster Emergency Managers on the local level with long-term capacity building to confront poly-crisis; especially within the current workforce shortage and distrust.
2. Consistently fund public health and disease prevention to strengthen the nation's ability to respond to future threats.
3. Address social determinants of health and equity issues as a long-term solution to improve public health and emergency management resilience and national security.
4. Increase healthcare spending on public health and prevention (currently only 2.6% of \$3.8 trillion spent on healthcare); increase emergency management funding for prevention and mitigation.
5. Maintain and improve capacities of public health and emergency management between emergencies, similar to military capabilities.
6. Improve the relationship between local/state/tribal/territorial, federal emergency managers and public health officials. Trust in these agencies working together is key to disaster response on local and national levels.
7. Create a National office of EMS.

In conclusion, I urge Congress to apply the lessons learned from the Boston Marathon Bombing to ensure national security. We must recognize and support our first responders, coordinate and communicate across agencies, and institutionalize crisis communication to effectively respond to any crisis that may arise. Thank you for your time and consideration.

Sincerely,
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