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1 **Inequities in Indoor Exposure to Wildfire-Related PM_{2.5} Across the Contiguous United**
2 **States**

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12 **Abstract**

13 Exposure to wildfire smoke has been recognized as a major public health concern, but existing
14 studies have focused on outdoor air, despite the fact that most people spend the majority of their
15 time indoors, especially during wildfires. Here, we estimated indoor wildfire-related fine
16 particulate matter (PM_{2.5}) concentrations across 72,537 census tracts in the contiguous United
17 States for the year 2020, examining inequalities among various demographic groups regarding
18 race–ethnicity, socioeconomic status, and other factors. Our results indicate that, in contrast to
19 outdoor air, there are significant inequalities in indoor exposure. Once wildfire-related PM_{2.5}
20 infiltrates indoor environments, the population-weighted average exposure in disadvantaged
21 communities (DACs) is significantly greater than that in non-DACs. Furthermore, our findings
22 suggest that patterns of inequality at the national level differ from those at the state level. The
23 racial–ethnic groups most affected vary by state, highlighting the need for localized interventions
24 to address wildfire-related PM_{2.5} exposure.

25 **Introduction**

26 Wildfire-related fine particulate matter (hereafter, wildfire PM_{2.5}) has become a critical
27 environmental and public health issue in the United States, particularly due to the intensifying
28 fires in recent years fueled by climate change¹⁻⁴. In the western United States, the contribution of
29 wildfires to daily PM_{2.5} concentrations has increased by up to 5 µg/m³ over the last decade,
30 reversing decades of steady improvements in ambient air quality driven by policy efforts^{5,6}.
31 Toxicological and epidemiological studies suggest that wildfire PM_{2.5} is more toxic than an equal
32 dose of ambient PM_{2.5}^{7,8}. Exposure to wildfire PM_{2.5} is associated with all-cause mortality⁹⁻¹¹, as
33 well as respiratory morbidity, including asthma exacerbation and chronic obstructive pulmonary
34 disease (COPD)¹¹⁻¹⁵. Additionally, wildfire PM_{2.5} adversely affects mental health¹⁶⁻¹⁹, has
35 negative impacts on birth outcomes, including preterm birth and low birth weight²⁰⁻²⁴, and can
36 worsen respiratory infections such as influenza and COVID-19^{25,26}.

37

38 Many previous studies have investigated the exposure and health impacts associated with
39 outdoor wildfire PM_{2.5} while overlooking indoor exposure. However, since people spend most of
40 their time indoors²⁷ and tend to shelter indoors during wildfire events^{28,29}, indoor environments
41 are critical for wildfire PM_{2.5} exposure. Research has shown that in the San Francisco Bay Area,
42 the infiltration factor of PM_{2.5} decreases from 0.4 on non-wildfire days to 0.2 on wildfire days,
43 primarily due to behavioral changes such as closing windows. Despite this reduction, the mean
44 concentration of indoor PM_{2.5} can nearly triple on fire days^{28,30}. Understanding outdoor wildfire
45 PM_{2.5} infiltration and investigating indoor wildfire PM_{2.5} exposure is important for informing the
46 public about effective ways to reduce exposure.

47

48 Additionally, while numerous studies have documented that ambient PM_{2.5} disproportionately
49 affects people of color and socioeconomically disadvantaged populations in the United States<sup>31-
50 38</sup>, there is a limited understanding of inequalities in wildfire PM_{2.5} exposure^{5,39,40}, particularly
51 regarding indoor environments. There is a knowledge gap regarding the extent to which outdoor
52 wildfire PM_{2.5} infiltrates indoors across the contiguous United States (CONUS) at finer
53 resolutions, such as census tracts. This information is critical for understanding the inequality
54 patterns related to wildfire PM_{2.5} exposure.

55

56 To address these knowledge gaps, we seek to answer two research questions: (1) What is the
57 indoor exposure to wildfire PM_{2.5} in the CONUS? (2) Are there any inequalities among different
58 populations? To estimate indoor wildfire PM_{2.5} exposure, we conducted a census tract-level data
59 analysis across the 72,537 census tracts in the CONUS for the year 2020, which was marked by
60 severe wildfires in the United States.^{26, 41} To investigate inequalities, we compared different
61 groups using two measures: (1) population-weighted average (PWA) indoor wildfire PM_{2.5}
62 exposure and (2) concentration curves (CCs) and concentration indices (CIs). We calculated the
63 PWA indoor wildfire PM_{2.5} exposure for six racial–ethnic groups at both the CONUS level and
64 the state level, as well as for disadvantaged communities (DACs) and non-DACs within each
65 state. We applied CCs and CIs to characterize inequalities in indoor wildfire PM_{2.5} exposure
66 across populations with varying vulnerabilities related to social factors such as income, age,
67 minority status, and vehicle access that may affect a community’ ability to prepare for and
68 respond to hazardous events.

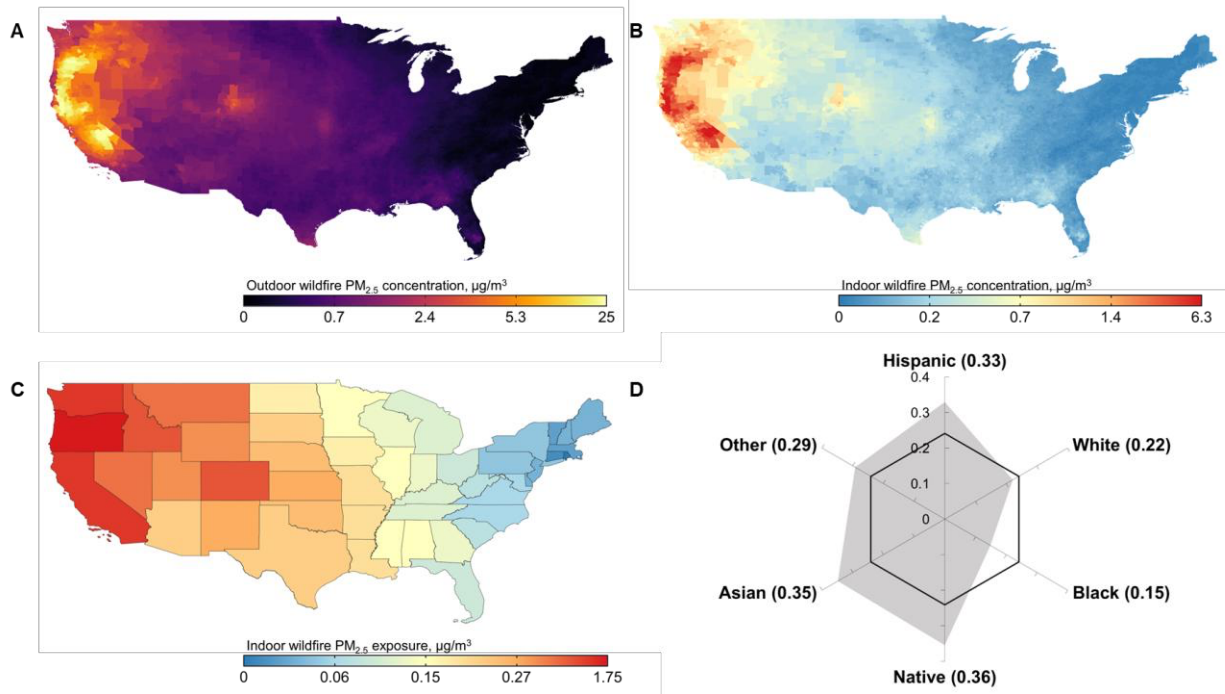
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70 **Results**

71 **Indoor wildfire PM_{2.5} exposure across the contiguous United States (CONUS)**

72 The outdoor wildfire PM_{2.5} concentrations were obtained from Childs et al.⁵ For the year 2020,
73 the estimated annual average outdoor wildfire PM_{2.5} concentrations across each census tract in
74 the CONUS ranged from 0.10 to 25 µg/m³ (**Fig. 1A**). Using this dataset, along with infiltration
75 factors calculated based on climate zones, seasons, and building ages in each census tract (see
76 **Methods**), we estimated annual average indoor wildfire PM_{2.5} concentrations, which ranged
77 from 0.01 to 6.3 µg/m³ (**Fig. 1B**). It is important to note that the World Health Organization
78 (WHO) updated the annual exposure limit for PM_{2.5} concentrations to 5 µg/m³ in 2021⁴². This
79 limit applies to all sources of indoor PM_{2.5}, whereas our analysis specifically focuses on wildfire
80 smoke. Despite this specific focus, two census tracts had annual averages of indoor wildfire
81 PM_{2.5} concentrations that surpassed this recommended threshold. One tract in Mono County,
82 located in the east-central region of California, had a population of 8,169 and reported an indoor
83 wildfire PM_{2.5} concentration of 6.3 ± 5.3 µg/m³. The other tract, which is situated in Mendocino
84 County in the North Coast region of California, had a population of 2,674 and recorded an indoor
85 wildfire PM_{2.5} concentration of 5.4 ± 2.5 µg/m³. Additionally, of the total 72,537 census tracts,
86 3,536 (5%) had more than 1 µg/m³ increase in annual average indoor PM_{2.5} levels attributed to

87 wildfire emissions. **Fig. 1C** shows the PWA indoor wildfire PM_{2.5} exposure for each state. The
 88 highest state-level was observed in Oregon at $1.75 \pm 0.86 \mu\text{g}/\text{m}^3$, followed by Washington (0.89
 89 $\pm 0.41 \mu\text{g}/\text{m}^3$) and California ($0.76 \pm 0.27 \mu\text{g}/\text{m}^3$). The state-level PWA exposure gradually
 90 decreased moving eastward, with the lowest concentration recorded in Rhode Island (0.04 ± 0.03
 91 $\mu\text{g}/\text{m}^3$).



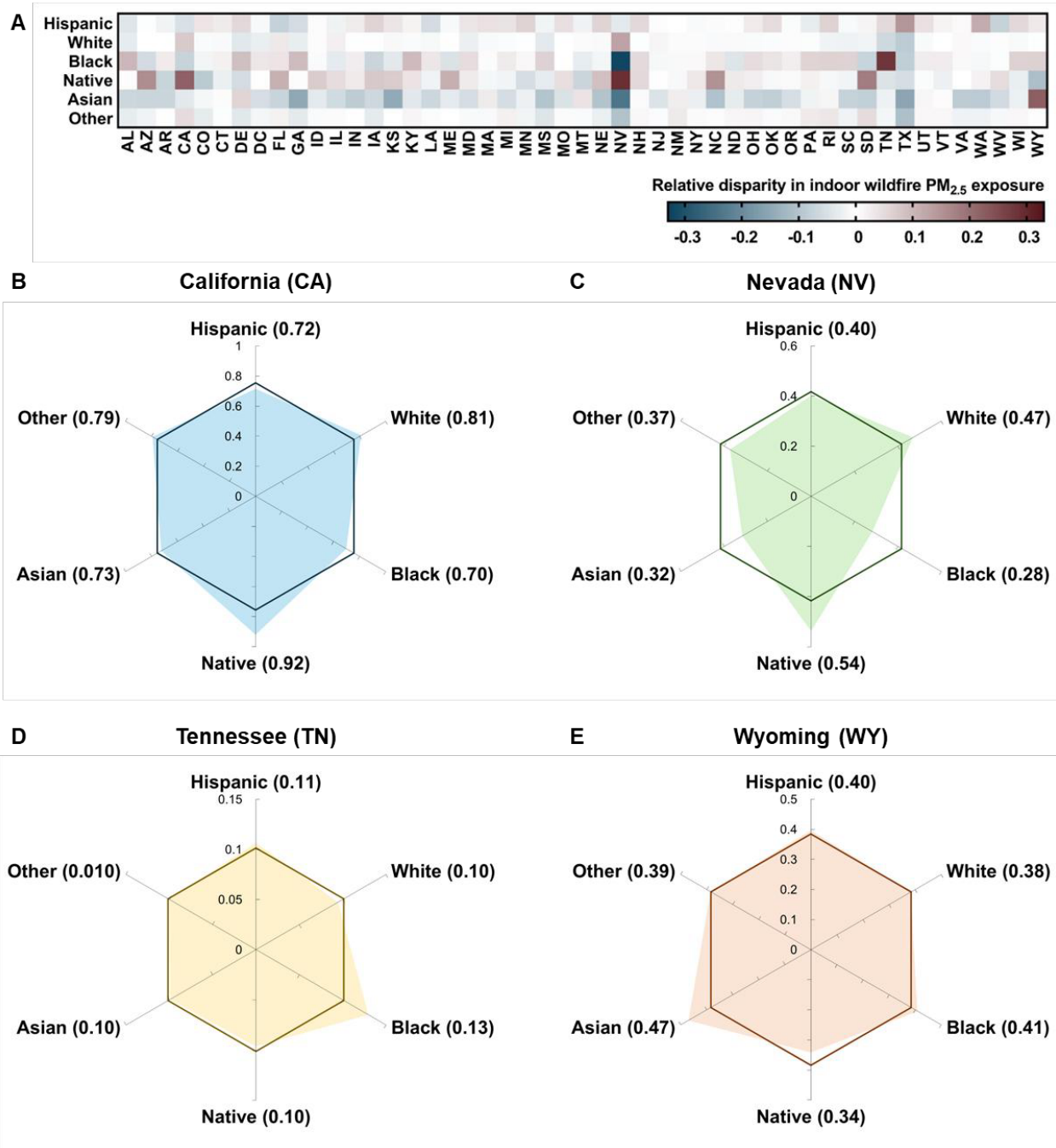
92
 93 **Fig. 1 Estimates of outdoor and indoor wildfire PM_{2.5} concentrations and population-**
 94 **weighted average (PWA) exposure across the contiguous United States (CONUS).** (A)
 95 Annual average outdoor wildfire PM_{2.5} concentrations by census tract for 2020; data sourced
 96 from Childs et al. (2022)⁵. (B) Estimates of annual average indoor wildfire PM_{2.5} concentrations
 97 for the same year and geographic area. (C) PWA indoor wildfire PM_{2.5} exposure by state in the
 98 CONUS; note that the legend scale differs from that in (B). (D) Radar chart depicting PWA
 99 indoor wildfire PM_{2.5} exposure in μg/m³ for different racial-ethnic groups in the CONUS, with
 100 the regular hexagon representing the PWA exposure for the overall population.

101
 102 **Racial-ethnic disparities in indoor wildfire PM_{2.5} exposure**

103 The radar chart in **Fig. 1D** compares the PWA indoor wildfire PM_{2.5} exposure for each racial-
 104 ethnic group to the overall population average for the CONUS, represented by a regular hexagon
 105 with a value of $0.24 \pm 0.06 \mu\text{g}/\text{m}^3$. The PWA indoor wildfire PM_{2.5} exposure, ranked from

106 highest to lowest among racial–ethnic groups, was as follows: Native ($0.36 \pm 0.10 \mu\text{g}/\text{m}^3$), Asian
107 ($0.35 \pm 0.10 \mu\text{g}/\text{m}^3$), Hispanic ($0.33 \pm 0.09 \mu\text{g}/\text{m}^3$), Other ($0.29 \pm 0.08 \mu\text{g}/\text{m}^3$), White ($0.22 \pm$
108 $0.06 \mu\text{g}/\text{m}^3$), and Black ($0.15 \pm 0.04 \mu\text{g}/\text{m}^3$). At the CONUS level, Native, Asian, and Hispanic
109 populations, along with individuals classified as “Other,” experienced above-average PWA
110 indoor wildfire $\text{PM}_{2.5}$ exposure, whereas the White and Black populations had below-average
111 exposure.

112
113 The heatmap in **Fig. 2A** shows relative disparities in indoor wildfire $\text{PM}_{2.5}$ exposure for each
114 racial–ethnic group compared to the state average across CONUS states, revealing that patterns
115 of disparity vary by state. The relative disparity was calculated as the difference between the
116 group’s PWA exposure and the state average, divided by the state average, where a positive
117 value indicates higher exposure for the group than the state average, while a negative value
118 indicates lower exposure. Across all CONUS states, the Black and Native populations each
119 experienced the highest PWA exposure in 17 of the 49 states, followed by the Hispanic
120 population, which had the highest exposure in 10 states (**Table S1**). In many states, state-level
121 patterns are distinct from the national trends observed at the CONUS level (**Fig. 1D**). **Figs. 2B–E**
122 highlight four states where the most affected racial–ethnic group experienced more than 20%
123 greater PWA exposure than the state average. For example, in California (**Fig. 2B**), the Native
124 population had the highest PWA indoor wildfire $\text{PM}_{2.5}$ exposure, $0.92 \pm 0.30 \mu\text{g}/\text{m}^3$, which was
125 22% above the state average of $0.76 \pm 0.27 \mu\text{g}/\text{m}^3$. The White population, which had a PWA
126 exposure of $0.81 \pm 0.28 \mu\text{g}/\text{m}^3$, had the second-highest level, contrasting with the overall trend in
127 the CONUS. In Nevada (**Fig. 2C**), the pattern was similar: the Native population (0.54 ± 0.26
128 $\mu\text{g}/\text{m}^3$) experienced 29% greater exposure than the state average of $0.42 \pm 0.17 \mu\text{g}/\text{m}^3$, whereas
129 the White population ($0.47 \pm 0.21 \mu\text{g}/\text{m}^3$) had 13% greater exposure. In Wyoming (**Fig. 2D**),
130 however, the Asian population faced the highest above-average exposure of $0.47 \pm 0.29 \mu\text{g}/\text{m}^3$.
131 In Tennessee (**Fig. 2E**), the Black population had the highest above-average exposure at $0.13 \pm$
132 $0.07 \mu\text{g}/\text{m}^3$.

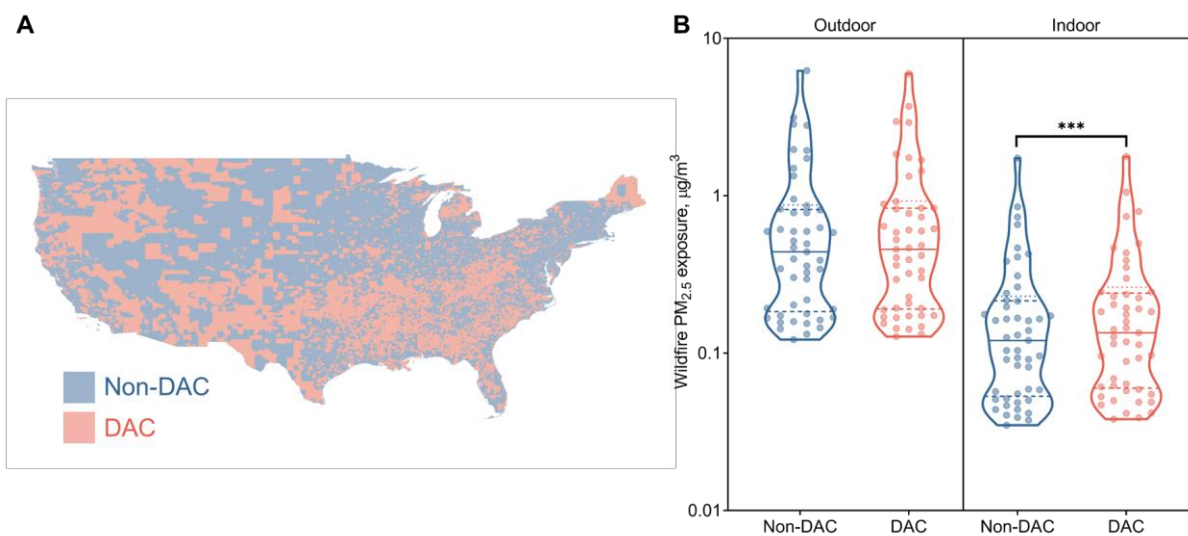


133
 134 **Fig. 2 Racial-ethnic disparities in indoor wildfire PM_{2.5} exposure across CONUS states and**
 135 **selected states. (A)** Heatmap depicting relative disparity of PWA indoor wildfire PM_{2.5} exposure
 136 for each racial-ethnic group compared with the state average exposure across CONUS states. A
 137 positive value indicates higher exposure for the racial-ethnic group than the state average,
 138 whereas a negative value indicates lower exposure. Radar chart depicting PWA indoor wildfire
 139 PM_{2.5} exposure in µg/m³ for different racial-ethnic groups in (B) California, (C) Nevada, (D)

140 Wyoming, and (E) Tennessee. Each hexagon represents the PWA exposure for the overall
141 population in each state. Note that the scales of the radar axes differ across the four charts.
142

143 **Disparities in indoor wildfire PM_{2.5} exposure between DACs and non-DACs**

144 DACs, which have been marginalized by society, overburdened by pollution, and underserved by
145 infrastructure and other basic services, are identified using the Climate and Economic Justice
146 Screening Tool (CEJST)⁴³, a geospatial mapping tool developed by the White House Council on
147 Environmental Quality (CEQ). According to CEJST, 26,278 out of 72,537 (36%) CONUS
148 census tracts are identified as DACs, whereas the rest are identified as non-DACs (**Fig. 3A**). The
149 PWA indoor wildfire PM_{2.5} exposure of DACs in the CONUS was $0.26 \pm 0.07 \mu\text{g}/\text{m}^3$, whereas
150 that of non-DACs was $0.23 \pm 0.06 \mu\text{g}/\text{m}^3$. As shown in **Fig. 3B**, the PWA indoor wildfire PM_{2.5}
151 exposure in DACs of individual states ranged from 0.04 to 1.78 $\mu\text{g}/\text{m}^3$, whereas those of non-
152 DACs ranged from 0.04 to 1.74 $\mu\text{g}/\text{m}^3$. The PWA outdoor wildfire PM_{2.5} exposure across
153 individual states ranged from 0.13 to 5.99 $\mu\text{g}/\text{m}^3$ for DACs and from 0.12 to 6.24 $\mu\text{g}/\text{m}^3$ for non-
154 DACs. A Wilcoxon signed-rank paired test was conducted to compare PWA wildfire PM_{2.5}
155 exposure between DACs and non-DACs in each state for both indoor and outdoor wildfire PM_{2.5}.
156 There was no significant difference between DACs and non-DACs in outdoor wildfire PM_{2.5}
157 exposure ($P = 0.059$). However, the indoor wildfire PM_{2.5} exposure in DACs was significantly
158 greater than that in non-DACs ($P < 0.001$).



159
160 **Fig. 3 Disparities in indoor and outdoor wildfire PM_{2.5} exposure between DAC and Non-**
161 **DAC populations across CONUS states. (A) DAC and non-DAC census tracts identified by the**

162 CEJST across the CONUS. **(B)** Indoor and outdoor PWA wildfire PM_{2.5} exposure of DAC and
163 non-DAC populations in each state. Each dot in the violin plot represents a state within the
164 CONUS. The significance of differences between the DAC and non-DAC populations was
165 assessed using the Wilcoxon signed-rank paired test, as the datasets were not normally
166 distributed. Asterisks (***) indicate significance at $P < 0.001$.

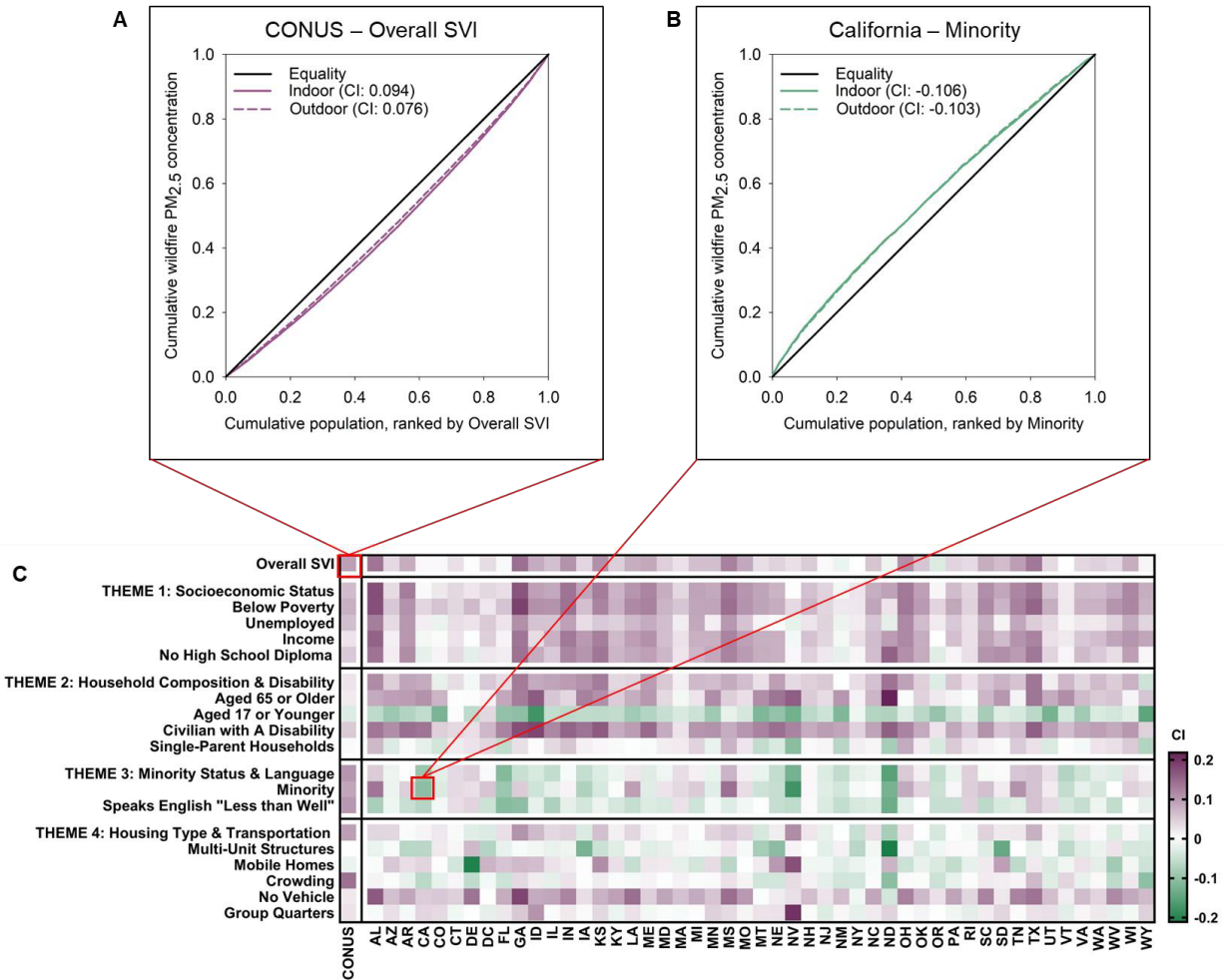
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168 **Inequality in indoor wildfire PM_{2.5} exposure in relation to social vulnerability**

169 **Fig. 4** summarizes the inequalities in indoor wildfire PM_{2.5} exposure in relation to vulnerabilities
170 characterized using concentration curves (CCs) and concentration indices (CIs). These measures,
171 adapted from the Lorenz curve and Gini coefficient, quantify inequalities in environmental
172 exposure by relating the exposure distribution to a social variable, such as minority status⁴⁴⁻⁴⁶. To
173 capture local vulnerability, we utilized the Social Vulnerability Index (SVI) at the census tract
174 level⁴⁷ (see **Methods**). **Fig. 4A** shows the CC for indoor wildfire PM_{2.5} exposure in relation to
175 the overall SVI. The X-axis represents the cumulative population ranked by the overall SVI,
176 from less vulnerable to more vulnerable, whereas the Y-axis displays the cumulative share of
177 exposure, from low to high. The CI value for indoor wildfire PM_{2.5} exposure in CONUS is 0.094
178 (95% confidence interval (CI95): 0.046 to 0.146), indicating that more vulnerable communities
179 in CONUS had a disproportionately higher indoor wildfire PM_{2.5} exposure.

180

181 This pattern is consistent across the other four SVI themes in the CONUS (**Fig. S1**):
182 socioeconomic status (0.065, CI95: 0.007 to 0.116), household composition & disability (0.025,
183 CI95: -0.022 to 0.066), minority status & language (0.103, CI95: 0.009 to 0.213), and housing
184 type & transportation (0.093, CI95: 0.065 to 0.121). Higher CI values indicate greater
185 inequalities. Among the four SVI themes, the greatest inequality in indoor wildfire PM_{2.5}
186 exposure is observed in the minority status & language theme, suggesting that communities with
187 greater vulnerability due to minority status and English proficiency faced disproportionately
188 higher levels of indoor wildfire PM_{2.5} exposure. Additionally, as shown in **Fig. 4A** and **Fig. S1**,
189 the CI values for outdoor wildfire PM_{2.5} exposure are smaller than those for indoor exposure to
190 varying degrees, indicating that, compared with outdoor wildfire PM_{2.5}, the inequality generally
191 increased after the wildfire PM_{2.5} infiltrates indoors.



192

193 **Fig. 4 Inequality in indoor wildfire PM_{2.5} exposure regarding various vulnerability metrics.**

194 (A) Concentration curves (CCs) and concentration indices (CIs) for indoor and outdoor wildfire

195 PM_{2.5} exposure in relation to overall SVI in the CONUS. (B) CCs and CIs for wildfire PM_{2.5}

196 exposure by minority status in California (CA). The black solid 1:1 line indicates equal wildfire

197 PM_{2.5} exposure across different vulnerability levels, corresponding to a CI of zero. CCs below

198 the equality line indicates that disproportionately higher exposure for more vulnerable

199 communities, resulting in positive CI values. (C) Heat map showing CIs for indoor wildfire

200 PM_{2.5} exposure with respect to the overall SVI and four themes including 15 individual factors,

201 for the CONUS and each individual state. CIs range from -0.211 to 0.218; positive values

202 (purple) indicate that more vulnerable communities experience a disproportionately higher share

203 of indoor wildfire PM_{2.5} exposure, whereas negative values (green) indicate that less vulnerable

204 communities are disproportionately affected.

205

206 Unlike the Lorenz curve, which always remains below the equality line and has a Gini
207 coefficient that is always positive, the CC can lie above the equality line, resulting in a negative
208 CI if exposure is disproportionately concentrated among less vulnerable communities. For
209 example, **Fig. 4B** shows the CCs and CIs for both indoor and outdoor wildfire PM_{2.5} exposure in
210 relation to minority status in California. The CI for indoor wildfire PM_{2.5} exposure is -0.105
211 (CI95: -0.164 to -0.063), indicating that minority populations in California bear a smaller share
212 of indoor wildfire PM_{2.5} exposure, whereas the White population experience a disproportionate
213 burden, likely because the majority of those living in areas with greater wildfire potential are
214 White^{48, 49}. The CI for outdoor wildfire PM_{2.5} exposure is similar at -0.103 (CI95: -0.104 to -
215 0.102), suggesting that the infiltration of wildfire PM_{2.5} indoors has little impact on inequality in
216 relation to minority status in California.

217
218 **Fig. 4C** presents CIs categorized by 15 individual factors, their four SVI themes, and the overall
219 SVI, analyzed for both the CONUS and individual states. Positive CI values (shown in purple)
220 indicate more exposure for more vulnerable communities relative to their corresponding
221 vulnerability metrics, whereas negative values (shown in green) indicate less exposure for these
222 groups. This breakdown offers a comprehensive view and local insights into the inequality in
223 indoor wildfire PM_{2.5} exposure. At the CONUS level, more vulnerable communities, as indicated
224 by the overall SVI, experienced a disproportionate burden of indoor wildfire PM_{2.5} exposure,
225 which is also illustrated in **Fig. 4A**. Indoor wildfire PM_{2.5} exposure was disproportionately
226 concentrated among more vulnerable communities across all SVI themes and nearly all
227 individual factors.

228
229 The inequality patterns for Theme 1—socioeconomic status and its individual factors (below
230 poverty, unemployed, income, and no high school diploma)—was consistent for both the
231 CONUS and most individual states, with positive CIs indicating that socially and economically
232 vulnerable communities disproportionately experienced higher levels of indoor wildfire PM_{2.5}. In
233 contrast, the inequality patterns for the other three themes varied by individual factor or state. In
234 Theme 2—household composition & disability—the population aged 65 years or older and those
235 with a disability disproportionately bore the burden of indoor wildfire PM_{2.5} at both the CONUS
236 and state levels, whereas the population aged 17 years or younger experienced a lesser share. The

237 impact from single-parent households varied among states. For Theme 3—minority status &
238 language—more vulnerable groups, including racial–ethnic minorities and those who speak
239 English “less than well”, disproportionately faced increased indoor wildfire PM_{2.5} exposure
240 within the CONUS. However, at the state level, the inequality patterns differ by state. In some
241 states, such as California (see **Fig. 4B**), the White population and those who speak English
242 “well” shared a larger portion of the burden, whereas in Texas, the minority population and those
243 who speak English “less than well” experienced a greater burden. In theme 4—housing type &
244 transportation—most states and the CONUS revealed that individuals without access to a vehicle
245 faced a greater burden of indoor wildfire PM_{2.5} exposure, although the inequality patterns for
246 other factors varied by state.

247

248 **Discussion**

249 Our results address the knowledge gap regarding indoor exposure to wildfire PM_{2.5} and its
250 associated inequalities across the CONUS. We used data for the entire year of 2020 to examine
251 indoor exposure to wildfire PM_{2.5}, with a particular focus on inequality. The results highlight the
252 importance of the indoor environment as a key exposure setting for wildfire PM_{2.5}. For example,
253 3,536 census tracts exhibited an increase of more than 1 µg/m³ in annual average indoor PM_{2.5}
254 levels due to wildfire smoke infiltration. Notably, two census tracts even had annual average
255 indoor wildfire PM_{2.5} levels exceeding the WHO’s guideline limit of 5 µg/m³⁴². Given that there
256 were already existing indoor PM_{2.5} sources, this increase warrants attention, highlighting the
257 cumulative impact of wildfire PM_{2.5} exposure over the course of the year. At the state level,
258 Oregon, California, and Washington exhibited the highest exposure to indoor wildfire PM_{2.5},
259 collectively accounting for 90% of the population exposed to wildfires in the western United
260 States⁵⁰. Although the exposure and health impacts of wildfire PM_{2.5} have been studied in these
261 three states^{7, 8, 19, 20, 22, 40}, few studies have focused specifically on indoor exposure^{28, 30}. Public
262 health advisories often recommend that people stay indoors during wildfire events⁵¹; however,
263 our results show this may not be sufficient to protect health, as people can still be exposed to
264 high levels of wildfire PM_{2.5} indoors.

265

266 Disparities in air pollution exposure are rooted in historical race-based planning⁵². This is also
267 reflected in our results showing that indoor wildfire PM_{2.5} concentrations are higher among

268 people of color across the CONUS and in most states, with the exception of New Jersey and
269 Virginia. A previous study has found racial–ethnic disparities in outdoor wildfire PM_{2.5} exposure
270 in the United States, noting that Hispanic individuals experienced above-average levels, whereas
271 White and Black individuals had below-average levels of exposure⁵. However, our study found
272 that the patterns of racial–ethnic disparity at the state level differ from those observed at the
273 CONUS level. In California, for example, the Native population faced the highest exposure,
274 while the White population and those classified as “Other” (see **Methods**) had above-average
275 exposure, and the Hispanic population had below-average exposure. These findings are
276 corroborated by previous research indicating that Native American and Alaska Native,
277 multiracial, and non-Hispanic white populations consistently faced disproportionately higher
278 outdoor wildfire PM_{2.5} exposure⁴⁰. The CONUS-level results are likely due to the population
279 distribution (**Fig. S2**), with Hispanic, Native, and Asian populations being more concentrated in
280 the western United States, where wildfires tend to be more severe. In contrast, White populations
281 are more evenly distributed across the country, while Black populations are located primarily in
282 the southeastern United States, where wildfire severity and exposure levels are generally lower.
283 Consequently, the disparity patterns observed at the CONUS level largely reflect these national
284 geographic trends and may not capture variations in disparity patterns across individual states.
285 To effectively address the inequalities in wildfire PM_{2.5} exposure related to race and ethnicity,
286 location-specific exposure-reduction strategies are essential. This is also supported by studies on
287 emission-reduction strategies for ambient PM_{2.5}, which indicate that location-specific approaches
288 outperform current regulatory methods (i.e., sector-specific regulations and concentration
289 standards) in reducing pollution burdens and eliminating national inequalities⁵³.

290
291 Our results call for more attention to indoor PM_{2.5} exposure during wildfires. Notably, the
292 differences in indoor wildfire PM_{2.5} exposure between DACs and non-DACs were significant,
293 unlike those in outdoor wildfire PM_{2.5}, where no such differences were observed. This finding
294 suggests that the estimated infiltration factors (considering climate zones, seasons, and building
295 ages in each census tract) exacerbate the disparity between DACs and non-DACs. This is likely
296 because DACs tend to have a higher proportion of older buildings compared to non-DACs (see
297 **Methods**), and the leakiness of a building’s envelope is associated with its age⁵⁴. Compared with
298 census tracts with a median construction year of 2010, those with a median construction year of

299 1970 had 37% greater infiltration factors⁵⁵. Our findings could also potentially contribute to
300 advancing the goals of the Biden-Harris Administration’s Justice40 Initiative by highlighting the
301 importance of addressing indoor wildfire PM_{2.5} exposure in DACs. The Justice40 Initiative,
302 which employs the CEJST to identify DACs, prioritize these communities for government
303 programs and funding based on climate and environmental burdens as well as socioeconomic
304 indicators^{43, 56}. DACs identified by CEJST constitute approximately 34% of the United States
305 population, and Justice40 aims to deliver 40% of benefits to DACs that are marginalized,
306 underserved, and overburdened by pollution⁵⁶. Given that PM_{2.5} is an important air pollutant, our
307 findings suggest that targeted efforts to reduce indoor wildfire PM_{2.5} exposure in DACs could
308 help mitigate health disparities and promote environmental equity in line with Justice40’s
309 objectives.

310
311 The inequality analysis using CCs and CIs provided insights for informing local wildfire
312 preparedness plans by identifying the populations most affected by wildfire PM_{2.5}. Across most
313 CONUS states, indoor wildfire PM_{2.5} exposure was, as expected, disproportionately concentrated
314 in socioeconomically vulnerable communities. Socioeconomic status has consistently been
315 identified as the most significant driver of vulnerability to natural hazards in the United States⁵⁷.
316 These communities require greater attention and targeted interventions.

317
318 In addition, previous research on wildfire hazards in the West Coast states highlighted the need
319 for special attention to elderly individuals, people with disabilities, and those with limited
320 English-speaking skills when developing policies and responses to wildfires⁴⁸. In our study, we
321 found that English proficiency had varying effects on the distribution of indoor wildfire PM_{2.5}
322 across different states. For example, in California, individuals who speak English “less than
323 well” experienced a lower burden of indoor wildfire PM_{2.5} exposure. This can be attributed to the
324 fact that the proportion of the wildfire-exposed population who spoke English less proficiently
325 was generally lower than that of the overall state population⁴⁸. Despite this, it was reported that
326 in the case of the Thomas Fire in California’s Ventura and Santa Barbara counties (December 4,
327 2017, to January 20, 2018), most of the emergency information, including mitigation and
328 evacuation resources, was provided primarily in English. This limited accessibility for non-
329 English speakers, such as Spanish-speaking and Indigenous populations⁵⁸. To address such

330 disparities, equitable language access to preparedness resources and emergency information must
331 be improved, particularly in demographically diverse areas. Moreover, we found that the White
332 population in California faced a disproportionately greater burden of indoor wildfire PM_{2.5}
333 exposure, likely because a majority of residents in areas with higher wildfire risk are White^{48, 49}.
334 Previous research also corroborated that from 2011 to 2018, the wildfire hazard and associated
335 impacts were disproportionately borne by the White population living in the western United
336 States⁵⁹. However, our findings do not imply that minority populations should be overlooked
337 with respect to indoor wildfire PM_{2.5} exposure. They often live in communities that are more
338 vulnerable and less equipped to respond to and adapt to wildfires, even if their areas of residence
339 may experience fewer wildfires than the areas of residence of White populations⁴⁹.

340
341 Overall, our work contributes to the ongoing conversation about addressing wildfire PM_{2.5}
342 exposure and its associated inequalities, with a particular focus on the often-overlooked issue of
343 indoor infiltration of wildfire smoke. Our findings reveal that indoor wildfire PM_{2.5} exposure in
344 DACs was significantly greater than in non-DACs, while outdoor exposure levels showed no
345 such disparity, reinforcing the need for targeted policies addressing indoor air quality.
346 Additionally, our results highlight the importance of prioritizing vulnerable populations,
347 including socioeconomically disadvantaged groups, individuals aged 65 and older, and those
348 with disabilities. Moreover, our study suggests that national racial–ethnic disparity patterns may
349 not fully capture local disparities, emphasizing the need to consider local contexts when
350 addressing these inequalities. Policy development should be tailored to specific communities,
351 such as improving access to emergency information in multiple languages, to effectively support
352 disadvantaged groups and reduce exposure disparities.

353

354 **Methods**

355 **Outdoor wildfire PM_{2.5} concentration data.** We aimed to estimate indoor exposure to wildfire
356 PM_{2.5} at the census tract level in the CONUS for 2020. The outdoor wildfire PM_{2.5}
357 concentrations were sourced from Childs et al.⁵, who provided daily estimates of wildfire PM_{2.5}
358 across 72,537 census tracts in CONUS using machine learning models. This dataset has been
359 widely used in research on inequalities and health impacts related to outdoor wildfire PM_{2.5}^{35, 39,}
360 ^{60, 61}. A limitation of this dataset is the lack of uncertainty estimates, which we addressed by

361 assuming a 20% coefficient of variation (CV)⁶² (see **Uncertainty analysis**). For each census
 362 tract, we calculated the seasonal averages of outdoor PM_{2.5} concentrations for spring (March-
 363 May), summer (June-August), fall (September-November), and winter (December-February) to
 364 align with the seasonal data used to calculate infiltration factors (see **Indoor wildfire PM_{2.5}**
 365 **concentrations**).

366

367 **Indoor wildfire PM_{2.5} concentrations.** Indoor wildfire PM_{2.5} concentrations at the census tract
 368 level were calculated by multiplying outdoor wildfire PM_{2.5} concentrations by infiltration factors
 369 (F_{inf}), which quantify the proportion of outdoor PM_{2.5} that infiltrates indoor environments. Data
 370 for calculating F_{inf} estimates for each census tract were obtained from Lunderberg et al. (2023),
 371 who assessed F_{inf} using data from crowdsourced sensors and a random component superposition
 372 method. This dataset includes (1) F_{inf} values for four climate zones (Marine, Hot–Dry, Cold, and
 373 “Other,” which includes Mixed–Humid, Mixed–Dry, Hot–Humid, and Very Cold) across four
 374 seasons, and (2) F_{inf} values for eight construction year subgroups (1935-1945, 1945-1955, 1955-
 375 1965, 1965-1975, 1975-1985, 1985-1995, 1995-2005, and 2005-2015). In this study, each census
 376 tract was initially assigned a base F_{inf} value corresponding to its climate zone for each season, as
 377 identified using data from the U.S. Department of Energy’s (DOE) Building America Program
 378 (U.S. DOE, <https://www.energy.gov/eere/buildings/climate-zones>). The base F_{inf} was then
 379 adjusted based on the relationship between F_{inf} values for different construction year subgroups
 380 identified by Lunderberg et al. (2023)⁵⁵. Specifically, the percentage increase or decrease in F_{inf}
 381 values was applied by comparing the median construction year of all structures within the tract to
 382 the median construction year within the climate zone using the following equations:

383
$$F_{inf,c} = F_{inf,c,s} \times (1 + P_{yy}) \quad \text{(Equation 1)}$$

384
$$P_{yy} = (F_{inf,yy} - F_{inf,m}) / F_{inf,m} \quad \text{(Equation 2)}$$

385 where $F_{inf,c}$ denotes the final F_{inf} used for census tract c, $F_{inf,c,s}$ indicates F_{inf} for census tract c and
 386 season s without considering the impact of construction year, $F_{inf,yy}$ represents F_{inf} for
 387 construction year subgroups yy, $F_{inf,m}$ is the median value of F_{inf} for all construction year
 388 subgroups, P_{yy} represents the percentage increase or decrease in F_{inf} for construction year
 389 subgroups yy compared with $F_{inf,m}$, with positive values indicating a percentage increase and
 390 negative values indicating a percentage decrease. Data on construction years were obtained from
 391 the National Structure Inventory (U.S. Army Corps of Engineers,

392 <https://www.hec.usace.army.mil/confluence/ansi>), which originally provided median values for
393 each block. We then aggregated these median construction years to derive a single median for
394 each census tract based on the relationships among blocks and census tracts. After calculating
395 indoor concentrations by multiplying outdoor concentrations with F_{inf} for each season in every
396 census tract, the annual average indoor concentration was determined by averaging the seasonal
397 indoor concentrations.

398
399 **PWA wildfire PM_{2.5} exposure.** Disparities in wildfire PM_{2.5} exposure among different racial–
400 ethnic groups, as well as between DACs and non-DACs, were illustrated using a PWA format,
401 which means that the size of each population group was considered in calculations, assigning
402 greater significance to groups with larger populations to more accurately reflect the overall
403 impact or distribution across the total population. The PWA exposure for different groups in the
404 CONUS or in each state was calculated according to Equation 3:

405
$$E_{PWA,g,s} = \frac{\sum_c (P_{g,n/s,c} \times E_{g,n/s,c})}{\sum_c P_{g,n/s,c}} \quad (\text{Equation 3})$$

406 where *PWA* is the population-weighted average, *E* represents the wildfire PM_{2.5} concentration, *P*
407 denotes the population, *g* represents a racial–ethnic group or DACs or non-DACs, *n* denotes the
408 nation, *s* indicates a specific state, and *c* refers to a particular census tract. The population data by
409 race-ethnicity are from the U.S. Census 2016-2019 ACS estimates at the census tract level
410 (<https://data.census.gov/table/ACSDP5Y2019.DP05>). We focused on six racial–ethnic groups as
411 determined by self-identification in the Census: Hispanic (Hispanic or Latino of any race, 18%),
412 White (non-Hispanic or Latino, White alone, 61%), Asian (Asian alone, 5%), Black (Black or
413 African American alone, 12%), Native (including American Indian, Alaska Native, Native
414 Hawaiian, and Other Pacific Islander, 1%), and Other (including some other race and people
415 identifying with two or more races, 3%). We also calculated the relative disparity for each
416 racial–ethnic group by taking the difference between the group’s PWA exposure and the overall
417 population’s PWA exposure, then dividing this difference by the overall population’s PWA
418 exposure. The population data for census tracts classified as DACs and non-DACs were obtained
419 from CEJST⁴³.

420
421 **CCs and CIs.** The CI quantifies inequality in wildfire PM_{2.5} exposure, following the method
422 recommended by the World Bank⁶³. To construct the index, the population is first rank ordered

423 based on a demographic grouping of interest (e.g., the proportion of racial–ethnic minorities,
424 from lowest to highest) using the SVI. The SVI, developed by the U.S. Centers for Disease
425 Control and Prevention (CDC), measures a community’s ability to respond to hazardous events
426 and is traditionally used to help public health officials identify populations in most need of
427 support⁴⁷. The SVI includes variables in a nested hierarchy: the overall SVI, its four dimension
428 or themes (socioeconomic status, household composition and disability, minority status and
429 language, and housing type and transportation), and all 15 subdimensions of individual factors,
430 including unemployment, minority status, disability, etc. Next, the cumulative population is
431 plotted against the cumulative share of wildfire PM_{2.5} exposure estimates to generate the CC.
432 The CI is then calculated using Equation 4:

$$CI=1-2 \int_0^1 CC(p)dp \quad (\text{Equation 4})$$

433 where $-1 \leq CI \leq 1$ and CC denotes the concentration curve, which indicates the relationship
434 between the cumulative population and cumulative wildfire PM_{2.5} exposure; the variable p
435 represents the cumulative rank proportion, which usually ranges between [0, 1]. In the current
436 study, we calculate CIs for the overall SVI, its four themes, and all 15 individual factors, against
437 wildfire PM_{2.5} exposure estimates for both the CONUS and each state.
438

439
440 **Uncertainty analysis.** To address uncertainty in our estimates, we conducted 1,000 Monte Carlo
441 simulations for each calculation. Each dataset was represented by a distribution based on its
442 mean or median values and the associated variation. Specifically, we assume a log-normal
443 distribution⁶² for the outdoor wildfire PM_{2.5} and F_{inf} datasets and a normal distribution⁶⁴ for the
444 population dataset. For outdoor wildfire PM_{2.5}, the source data⁵ did not report uncertainty. To
445 address this, we referenced findings from previous research that evaluated a hybrid machine
446 learning model for measuring concentrations of various air pollutants. For PM_{2.5}, the relative root
447 mean square error was roughly estimated to be 17.5% or lower⁶². Given the differences in
448 modeling algorithms between the source data⁵ and the previous research⁶², we adopted a slightly
449 higher CV of 20% to ensure the robustness of our results. This 20% CV was applied to the
450 seasonal averages of outdoor PM_{2.5} concentrations for each census tract to generate the
451 distributions. F_{inf} distributions were generated using the medium value along with the low and
452 high quantiles, whereas the population distribution was based on the average value and its
453 margin of error.

454 Using simulated distributions for outdoor wildfire $PM_{2.5}$, F_{inf} , and population datasets, we
455 calculated indoor wildfire $PM_{2.5}$ concentrations, wildfire $PM_{2.5}$ exposure, and CIs, along with
456 their mean, median, and associated uncertainties. Indoor wildfire $PM_{2.5}$ concentrations and
457 exposure levels are reported as mean \pm standard deviation, while CIs are represented by median
458 values with 95% confidence intervals to reflect uncertainty (detailed data are provided in **Data**
459 **availability**).

460

461 **Data availability**

462 The input datasets related to this paper are publicly available. Wildfire $PM_{2.5}$ concentration data
463 can be accessed at https://www.stanfordecholab.com/wildfire_smoke. The demographic data
464 used in this study are available at <https://data.census.gov/table/ACSDP5Y2019.DP05>. The CDC
465 SVI database can be found at <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>. The
466 White House CEQ CEJST to identify DACs can be accessed at
467 <https://screeningtool.geoplatform.gov/en/downloads#3/33.47/-97.5>. The construction year data
468 can be found at <https://www.hec.usace.army.mil/confluence/insi>. The climate zone data are
469 available at <https://www.energy.gov/eere/buildings/climate-zones>. We compiled the input
470 datasets and primary datasets generated during calculations, which are available at
471 <https://doi.org/10.5281/zenodo.13371454>.

472

473 **Code availability**

474 The MATLAB code needed to reproduce all the results in the paper, along with all the data used
475 to generate the figures in both the main text and the Supporting Information, are available at
476 <https://github.com/leileiab/fire-justice.git>.

477

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482 construction.

483

484 **Author contributions**

485 J.L., X.L., and Y.Z. designed the research. J.L., X.L., and Q.Y. collected data and performed the
486 analysis. J.L. visualized the results. Y.Z. supervised the research. J.L. and X.L. wrote the
487 manuscript and all authors edited the manuscript.

488

489 **Competing interests**

490 The authors declare that they have no competing interests.

491

492

493

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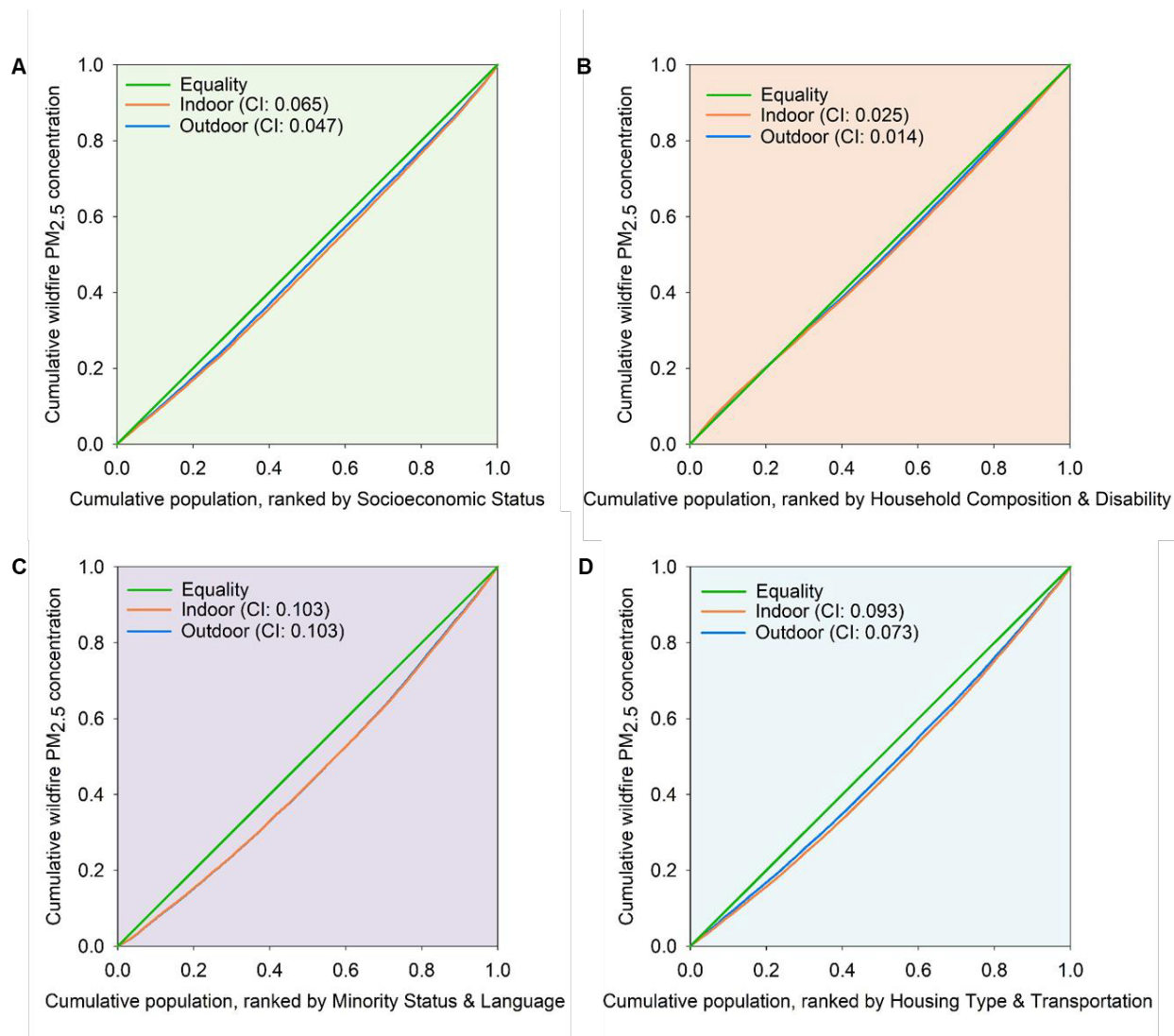
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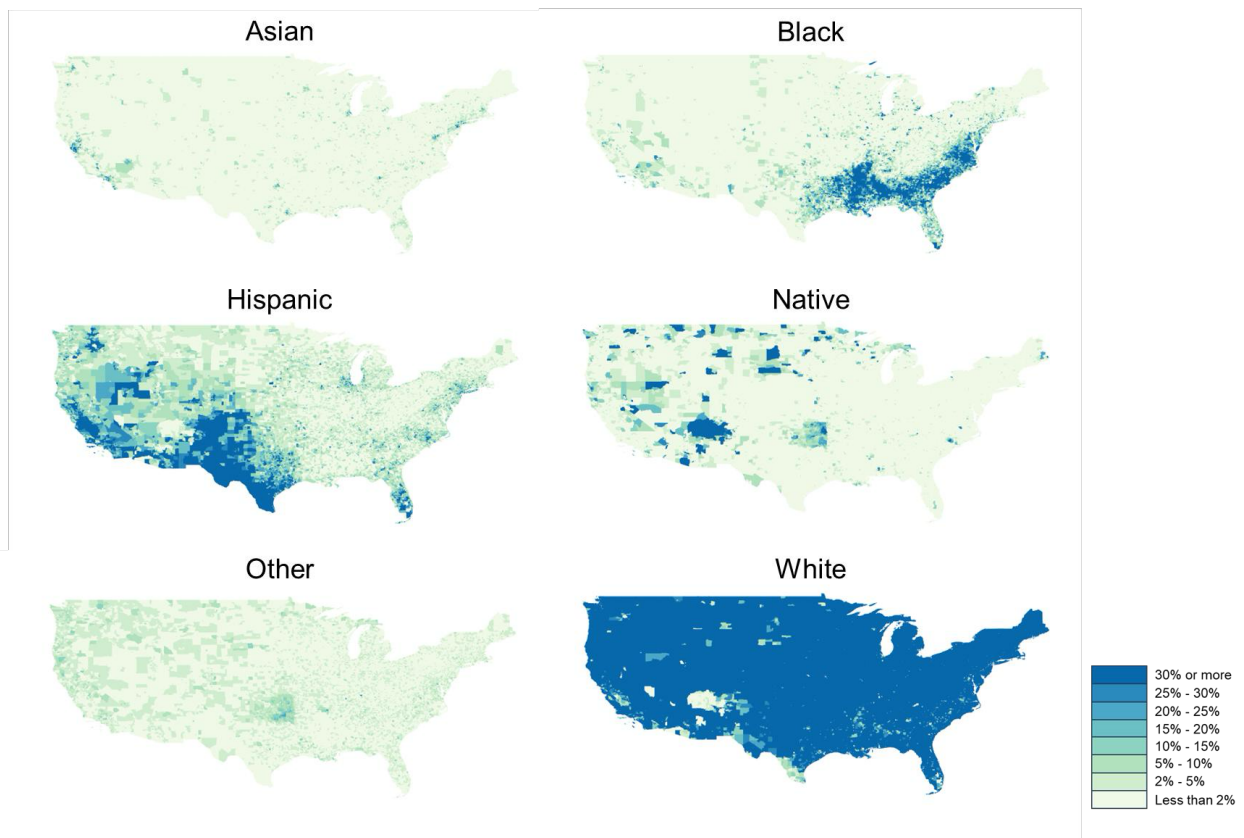
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656

657 **Fig. S1** Concentration curves and CIs (indicated in brackets in the legends) for both indoor and
 658 outdoor wildfire $PM_{2.5}$ concentrations in relation to (A) socioeconomic status, (B) household
 659 composition & disability, (C) minority status & language, and (D) housing type & transportation
 660 in the CONUS. In each plot, the orange and blue lines represent indoor and outdoor wildfire
 661 $PM_{2.5}$ concentrations, respectively. The green 1:1 line indicates equal wildfire $PM_{2.5}$
 662 concentrations across different vulnerability levels, corresponding to a concentration index of
 663 zero. When the concentration curve falls below the equality line, it signifies that more vulnerable
 664 communities experience a disproportionate share of the wildfire $PM_{2.5}$ burden, and the
 665 concentration index is positive

666 **Figure S2**



667

668 **Fig. S2** Population distribution of different racial-ethnic groups as a percentage of the total
669 census tract population across the CONUS. Source: U.S. Census 2016-2019 ACS estimates at the
670 census tract level (<https://data.census.gov/table/ACSDP5Y2019.DP05>).

671 **Table S1** Relative disparity in the percentage of PWA indoor wildfire PM_{2.5} exposure for each
672 racial–ethnic group, compared to the state average exposure across all CONUS states. The
673 racial–ethnic group with the highest exposure is highlighted in red. Mean ± standard deviation
674 values for PWA indoor wildfire PM_{2.5} exposure can be accessed at
675 <https://doi.org/10.5281/zenodo.13371454>.

	Hispanic	White	Black	Native	Asian	Other
CONUS	0.3646	-0.0828	-0.3855	0.4694	0.4451	0.2097
Alabama	-0.0429	-0.0348	0.0988	0.0018	-0.0693	-0.0317
Arizona	-0.0030	-0.0003	-0.0614	0.1577	-0.0725	-0.0200
Arkansas	-0.0208	-0.0011	0.0272	-0.0744	-0.0724	-0.0022
California	-0.0528	0.0731	-0.0762	0.2194	-0.0390	0.0484
Colorado	0.0350	-0.0081	-0.0172	-0.0923	-0.0142	-0.0336
Connecticut	0.0263	-0.0090	0.0190	-0.0275	0.0031	-0.0048
Delaware	0.0525	-0.0398	0.0879	-0.0607	0.0575	-0.0396
District of Columbia	-0.0121	-0.0292	0.0324	-0.0021	-0.0571	-0.0162
Florida	-0.0790	0.0295	0.0369	0.1081	-0.0747	0.0177
Georgia	-0.0599	-0.0303	0.0930	0.0029	-0.1517	-0.0373
Idaho	0.0028	-0.0053	-0.0072	0.0700	-0.0374	-0.0070
Illinois	-0.0226	0.0197	-0.0355	0.0467	-0.0627	0.0046
Indiana	0.0247	-0.0025	0.0242	0.0287	-0.0882	-0.0018
Iowa	0.0596	0.0013	-0.0725	0.0749	-0.0677	-0.0359
Kansas	0.0337	0.0083	-0.0390	0.0702	-0.1473	-0.0002
Kentucky	0.0161	-0.0080	0.0937	0.0387	-0.0403	0.0138
Louisiana	-0.0603	-0.0104	0.0330	-0.0197	-0.0690	-0.0067
Maine	-0.0111	0.0006	-0.0496	0.1095	-0.0364	-0.0012
Maryland	0.0345	-0.0264	0.0472	0.0259	-0.0592	-0.0082
Massachusetts	0.0393	-0.0088	0.0037	-0.0137	0.0264	-0.0100
Michigan	0.0375	-0.0054	0.0263	-0.0178	-0.0593	0.0191
Minnesota	0.0604	-0.0021	0.0110	-0.0576	-0.0247	-0.0188
Mississippi	-0.0190	-0.0369	0.0617	-0.0339	-0.1030	-0.0439
Missouri	0.0416	-0.0013	-0.0004	0.0432	-0.0498	0.0050
Montana	-0.0215	0.0045	-0.0328	-0.0719	0.0379	-0.0076
Nebraska	0.0597	0.0064	-0.0154	0.0871	-0.1034	-0.0271
Nevada	-0.0370	0.1261	-0.3226	0.2893	-0.2401	-0.1055
New Hampshire	0.0528	-0.0034	0.0508	0.0525	0.0053	0.0101
New Jersey	-0.0040	0.0126	-0.0124	0.0003	-0.0473	-0.0057
New Mexico	-0.0003	0.0052	0.0083	-0.0105	0.0230	0.0279
New York	-0.0091	0.0045	0.0084	0.0319	-0.0267	0.0065
North Carolina	0.0047	-0.0093	0.0324	0.1508	-0.1055	0.0035

North Dakota	0.0025	0.0067	-0.0451	0.0277	-0.0330	0.0124
Ohio	0.0272	-0.0069	0.0470	0.0226	-0.0790	0.0127
Oklahoma	0.0463	-0.0059	0.0353	-0.0112	-0.0842	-0.0076
Oregon	-0.0065	0.0033	0.0221	0.0062	-0.0565	0.0080
Pennsylvania	-0.0317	-0.0051	0.0590	0.0189	-0.0209	0.0280
Rhode Island	0.0615	-0.0201	0.0623	-0.0125	0.0129	0.0329
South Carolina	-0.0095	-0.0216	0.0603	-0.0177	-0.0771	-0.0202
South Dakota	0.0143	-0.0177	-0.0733	0.1796	-0.0828	0.0478
Tennessee	0.0507	-0.0655	0.2798	-0.0479	-0.0233	-0.0153
Texas	0.1451	-0.0881	-0.0845	-0.0579	-0.1559	-0.1098
Utah	0.0406	-0.0084	0.0256	-0.0067	0.0112	0.0106
Vermont	0.0151	-0.0008	0.0253	-0.0255	0.0036	0.0110
Virginia	0.0071	0.0086	0.0079	-0.0006	-0.0884	-0.0224
Washington	0.1142	-0.0080	-0.0125	0.0170	-0.0899	-0.0223
West Virginia	-0.0783	0.0022	-0.0052	0.0470	-0.0631	-0.0124
Wisconsin	0.0525	-0.0083	0.0622	-0.0295	-0.0261	0.0108
Wyoming	0.0306	-0.0033	0.0635	-0.1115	0.2223	0.0021

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