We Can Slow The Pandemic!

Neighborhoods, families, labor unions, merchant associations, big store chains, farm coops, and other important non-government forces can help slow the pandemic by organizing and engaging with health departments and elected officials and with each other. Friends, neighbors, families, and workers know the best ways of getting things done in their connections with each other. Most health departments and elected officials just issue orders to American society without establishing long-term relationships with its important parts, the parts that actually make things happen in the real world.

The purpose of this pamphlet is to help members of the public and of these important non-governmental forces of civic society to exercise their immense powers to slow transmission of COVID-19.

1. Why We Must Slow the Pandemic

COVID-19 threatens the lives and long-term health of us all. By early December 2020, it had become the top killer of Americans and killed more Americans in 2020 than heart disease or cancer. It leaves many survivors with long-term or even permanent health damage ranging from inability to concentrate to blood clots that threaten vital organs and erode ability to do ordinary daily tasks such as shopping for groceries. COVID-19 is highly contagious. The tiny droplets (aerosol) of spit and mucus that leave our mouths during speech and our noses through exhaling carry the virus and can remain in the air for several minutes or even hours, depending on air currents and ventilation.

*How Infection Spreads*

COVID-19 spreads like any other epidemic. Diseases spread between large cities and between large and smaller cities through long-distance travel patterns. This spread from large to other cities is called "hierarchical diffusion" and, because of its slow progression, deceives officials and residents of areas distant from “hot spots” into believing that they won’t have a problem. Airplanes, trains, long-distance bus routes, cars, and trucks bring the disease from high- to low-incidence cities.

Once the disease has reached a city, it spreads through neighborhoods and out into the surrounding suburbs through local travel such as commuting to work, shopping trips into the city, social visiting between city and suburb, and entertainment/recreation that draws between city and suburb. Contagion between suburbs also occurs. This mode of spread is called "spatial diffusion".

Finally, infection at the local level spreads among family members, friends, neighbors, congregants of houses of worship, co-workers in work sites, and attendees of places of assembly such as taverns, restaurants, stores, fitness centers, movie and live theaters, nursing homes, and clinics. This is called "network spread".
With regard to local infection spread, a simple calculation raises a serious objection to such rules as ‘groups of ten or less are okay’. Suppose a community has a 5% infection rate. Then the probability that nobody in a group of ten is infected is 0.95 times itself ten times. That value is about 0.60. That is, forty percent of the groupings of ten people will likely become ‘superspreader events’, and the rate of infection within the community may rapidly increase well beyond the initial 5%. In other words, each grouping of 10 has a 40% chance of resulting in infection transmission, a very high risk indeed.

2. The Power of the People

Health departments and many elected officials ask us to:

1) Wear masks to keep from infecting others if we are infected. Many infected people have no symptoms, so everyone should wear a mask.
2) Keep people not in our households at a distance to avoid COVID transmission
3) Wash our hands frequently and whenever we come home to get rid of germs on our hands that we could rub into our eyes and infect ourselves.
4) Stay home to avoid infection
5) Not travel to avoid taking infections to other cities or bringing them back from other cities
6) Not have big family gatherings or parties to avoid COVID transmission
7) Not congregate closely in houses of worship to avoid COVID transmission.
8) Quarantine if infected to keep from infecting others.

Most people obey these requests. The health departments and elected officials too often insult and punish groups that don’t. These authorities too often fail to have two-way conversation with our communities and usually have not engaged with them over the long-term as part of long-term pandemic preparation. These authorities forget that the real power to get things done lies in the families, communities, groups of workers, merchants, religious congregations, corporations, agricultural coops, and other forces of American society.

To curb this disease, we have to take things into our own hands and be our own leaders. If a vaccine becomes available soon, we have to organize to encourage our family, friends, and neighbors to get vaccinated. We have to keep monitoring our people in case the virus mutates in the future and renders the vaccine a weak shield.

We also have to start a conversation with the health departments that continues respectfully and without end. COVID-19 is only one of a series of pandemics and epidemics that will stretch into the future. The flaws in responses to the COVID pandemic should teach us what we have to do in our particular communities and organizations for rapid response to a public health threat.

3. Exercising Our Power: Individuals and Groups

We can prevent or greatly weaken further waves of COVID-19. As individuals, families, communities, and civic organizations (labor unions, trade associations, farm coops, block associations, merchants, etc.), we can use the information that the health
authorities give us in ways that make sense to us and to our families and communities. We also must educate the health authorities about how they can engage with us without making us back away from them because of their lack of respect and understanding.

Right now, immediately, we can decide not to travel for holidays or on any trips that are not absolutely necessary. Traveling for special cancer treatment or heart operation is necessary. Traveling for sister Betty’s 30th birthday party is not necessary. Betty can have a Zoom party and get sent presents by USPS.

Right now, we can make using a mask outside of our homes an automatic action. We can wash our hands frequently. We can keep a distance from the other people on the grocery checkout line.

We have the power to slow the spread of COVID-19 right now, as individuals.

Even better, we can participate in health councils in our block associations, family clans, labor unions and work sites, houses of worship, trade associations, and other organizations of American society. Through these councils, these organizations can engage with the larger population to slow COVID-19 spread in ways that respect the history and culture of the community. Health empowerment groups have been successful in slowing the spread of AIDS/HIV, in reducing rates of low-weight births, and in helping people eat wisely and exercise. These councils can operate via telephone or the Internet so that they themselves don’t end up as disease spreaders.

Groups have enormous powers. They can influence the behavior of their members and of their members’ families and friends. They get the attention of elected officials much more easily than an individual can. They can command engagement of the health authorities. When they form broader coalitions, they can move mountains of bureaucracy.

When family members or friends or co-workers die from COVID-19, mourn them, and organize to stop these unnecessary deaths. When we end up without jobs because of pandemic shutdowns and have to use food pantries to keep alive, feel the rage and sorrow, and organize to stop the soaring rates of infection that trigger the shutdowns.

Most elected officials and health department scientists and doctors are frightened (some even paralyzed) and don’t know what to do except issue these orders. They are also afraid of many communities with “strange” languages, customs, religions, socioeconomic classes, and darker skin colors than European. We in those communities have to teach them how to connect with us. We have to demand that they respect and engage with us.

Many organizations in polluted communities such as the Love Canal Homeowners Association have forced respect from and engagement with the authorities. COVID-19 is a contagious pollutant that rips through communities, especially poor and working class “ethnic” communities. The next pandemic will do the same if we don’t organize and demand the respect and connection that we deserve and must have if the disease (whatever it is) will be controlled.
COVID-19 is just the most recent pandemic to inflict illness, death, and economic weakness on the world. The many ways that governments and corporations injure and disturb natural ecosystems make future pandemics sure to happen. Global climate change, clearcutting forests, pesticides, factory farming animals, farming single plant crops such as oil palms and corn in huge swaths, penetrating natural habitat for mining and oil/gas drilling, use of wild animals for food and traditional medicine—all these contribute to increased contact between infected animals, such as virus-carrying bats, and humans who bring the infections into their neighborhoods, workplaces, and markets. Until we halt these disturbances, waves of pandemics will arrive and afflict us.

As individuals and as organized communities -- unions, trade associations, merchant groups, farm coops, houses of worship, block associations, family clans--, we can control this pandemic and future pandemics. We want our children in schools, our jobs, our transportation systems, the presence of our families and friends, our neighborhood hangouts, our institutions like zoos, sports, museums, theaters, and all those things that allow us to live and thrive. We have to control this and future pandemics to have those things.

Who Produced this Pamphlet?

The Pandemic Thinktank produced this pamphlet. The Thinktank is a small group of health professionals fighting the repeating patterns of flawed interactions between people and groups who should prevent and control epidemics (elected officials, health departments, and civic forces such as neighborhoods, labor unions, religious institutions, and merchants).

Contact: Deborah Wallace, Ph.D. debwallace445@gmail.com