

Weekly Checkup

Back to the Balance Beam: The COVID-19 Resurgence

CHRISTOPHER HOLT | JULY 30, 2021

Three weeks ago the Biden Administration—and to be fair most of us—celebrated if not the end of the pandemic, at least the beginning of the end. Now less than a month later infections are on the rise, the Delta variant is dominant, and masks and testing are back for even vaccinated individuals. The dam also seems to have broken on vaccine mandates, long seen as too controversial to pursue.

On Tuesday the Centers for Disease Control and Prevention (CDC) updated its guidance for vaccinated individuals, recommending that masks be worn indoors for people residing in areas that have been designated as high or substantial risk for COVID-19 transmission. The CDC is also changing its guidance for schools and recommending that fully vaccinated individuals who have been exposed to COVID-19 be tested for potential breakthrough infections.

Even more controversial, an increasing number of hospital systems are instituting vaccination requirements for their employees. Following suit, early this week New York City, the State of California, and the Veteran's Administration all announced plans to mandate employees be vaccinated. And on Thursday, President Biden announced that all federal workers and contractors will be required to either get vaccinated or face regular testing among other constraints. Of course, there will be legal challenges. And while courts have so far sided with hospitals, one legal obstacle to vaccine mandates is the fact that none of the COVID-19 vaccines have received full market approval—which isn't expected until the fall—and are allowed only for emergency use.

Like many of those decrying the latest guidance changes, Senator Ted Cruz criticized the CDC this week for being inconsistent in its guidance. Cruz pointed out that it was only a few weeks ago that the CDC officially lifted its recommendation that mask be worn by fully vaccinated individuals, only to reinstate it now. And as mentioned, the CDC has also rapidly changed directions on masks in schools and testing of vaccinated individuals. When looking at the overall approach to the pandemic, Senator Cruz's complaint isn't entirely without merit. I've previously written that public health officials' inconsistency in message, failure to be fully forthcoming with information, and sudden changes in recommendations have been a huge problem throughout the pandemic. It has led to distrust of official recommendations, especially on the part of those already inclined to distrust government officials and experts.

But Senator Cruz and other critics of the current wave of requirements are overlooking a key distinction: CDC and other officials are responding in real time to an ever-changing reality. As new mutations, like the Delta variant, develop and we learn more about them and how they differ, guidance will have to change to keep up. In a world where vaccine supply was sufficient across countries and vaccine hesitancy was not curtailing the effort to achieve herd immunity, such on-the-fly recommendation setting might not be necessary. But with just under 50 percent of the U.S. population vaccinated, and only 14 percent of the world population fully vaccinated, public health officials will have to continue to update guidance to reflect changing reality.

Everything around COVID-19 has become politicized, because, well, everything these days seems to be a matter for political warfare. Yet I truly doubt that President Biden is eager to enforce vaccine mandates or to have people re-mask just a month after declaring a national reopening as part of the Fourth of July celebrations.

I'm sympathetic to appeals to personal liberty, frustration over government restrictions, and complaints about a lack of transparency from public health officials. It will, however, take a collective effort to end the pandemic. Freedom has limits—key among them is when the exercise of one's individual freedom infringes upon someone else's freedom. Our choice of whether to mask or get vaccinated has implications for those beyond ourselves and our families. Governments must balance personal liberty with the common good. It's a difficult balance for any society to strike, and more often than not we fall off the balance beam. But perhaps in this case the government is making a good-faith effort to try to protect citizens and not orchestrating a grand conspiracy to undermine liberty.

CHART REVIEW: MATERNAL MORTALITY

Jake Griffin, Health Care Policy Intern

Maternal mortality has been on the rise in the United States over the last few decades despite continuous advancements in health care. The maternal mortality ratio is defined as the number of maternal deaths per 100,000 live births during a specified time period, and essentially depicts the risk associated with a single pregnancy. As the graph below shows, the maternal mortality ratio in the United States increased from 14.5 to 20.1 between 2000-2019, a more than a 33 percent increase. Maternal cardiovascular conditions are the number one cause of maternal mortality and have been linked to a number of risk factors, including hypertension. As the graph below shows, however, the percent of women with hypertension decreased between 2000-2019, although the number of women with hypertension increased overall due to population increases. This trend indicates that other factors must be at play in driving the increase in maternal mortality. Improvements in prenatal and postpartum care will need to be supplemented by efforts that identify and address these contributing factors if the upward trend in maternal mortality is to be reversed.

