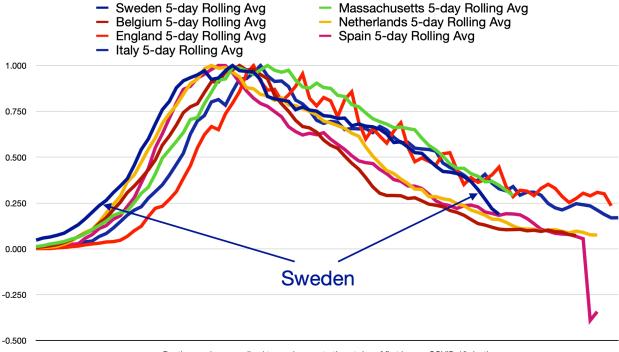
Are COVID-19 Orders Effective?

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Deaths from COVID-19 as of May 26, 2020 by Selected States that had government data available online

| | Belgium | England | Massachusetts | Netherlands | Sweden | Spain | Italy |
|-------------------------|------------|------------|---------------|-------------|------------|------------|------------|
| Population | 11,492,641 | 56,286,961 | 6,891,578 | 17,418,465 | 10,343,403 | 47,100,396 | 60,317,116 |
| Deaths/1M population | 819 | 592 | 971 | 340 | 395 | 566 | 546 |
| Total Deaths | 9,413 | 33,303 | 6,693 | 5,919 | 4,085 | 26,681 | 32,955 |



Deaths per day normalized to maximum, starting at day of first known COVID-19 death

The graph above tells a great deal about COVID-19 and the efficacy of mitigation measures taken to quell the death toll.

Did the lockdown do anything? Did closing the economy save lives? Do social distancing and wearing masks have any net positive effect?

All 7 state curves on this graph are normalized to "1" in order to visualize a comparison fairly. Curve smoothing using a 5-day rolling average was also implemented for better visualization. The most important thing to notice in this normalized graph is that 7 states (the State of Massachusetts and 6 "countries" as we call them in the U.S.) have equivalent curves of daily COVID-19 deaths.

The equivalence of shapes makes a good argument that Sweden, which has practiced only light mitigation measures, is no better or worse than all the other states that have enacted strict government orders and closed economies. It actually appears as though Sweden is doing a little better than most.

There is no noticeable effect on any state curve from orders to social distance or wear face masks.

There is no precipitous drop-off or sudden change in curve shape from the standard SIR curve common in epidemiology.

This objective comparison demonstrates that Sweden's simple safety measures are all that was ever needed, though the media writes stories of Sweden's demise every single day for months.

INTRODUCTION

Sweden is the stray antelope that left the safety of the herd. Three things can happen if a herd animal strays. Either the stray gets nervous and returns to the herd. The herd gets nervous and joins the stray. Or the stray becomes prey.

Sweden isn't joining the herd's strict mitigation measures. And Sweden certainly hasn't become prey to COVID-19 beyond any other country with a significant outbreak. So, why hasn't the herd joined Sweden yet? Other states have made no course corrections despite data and science pointing to consequences of strict measures outweighing benefits.

The media has been less than honest in their assessment of Sweden's venture away from the herd. One might think that the media herd is nervous to see Sweden prove that a much diminished set of recommendations is all that was ever needed.

MEDIA BIAS

The *National Review* headline on May 30, 2020 reads, "Sweden's COVID Death Rate Now Ten Times Higher than Norway's." (McCormack, 2020) McCormack fails to mention that Sweden has nearly double the population of Norway, nearly double the urban living density when looking at the top three urban areas of each state, and has comparatively much more international travel to ignite an outbreak. (Wikipedia, 2020) Comparing Sweden to Norway is like comparing Massachusetts to Oklahoma or Iowa ... or like comparing apples to cigars.

Business Insider headline on May 24, 2020 reads, "Sweden's former health chief says the country's coronavirus strategy 'hasn't been the smartest' and it should've spent at least a month locked

down." (Brueck, 2020) Fear, panic, and bias is on display in the first three lines of Brueck's news piece. "Sweden was the only country that remained fully open as the novel coronavirus tore through Europe. Now, it seems the nation is paying a deadly price for its choice. Sweden has one of the highest coronavirus death rates of any country - per capita, it's now worse than any other in Europe." This appears to be an outright prevarication. The graph shows Sweden is in the middle of the other 6 states in the sample and has an equivalent curve. In direct contradiction to Brueck's claim, the actual truth is in the table above the graph, taken directly from government statistics. The table shows mortality rate as a percentage of population. Sweden has the second lowest deaths per million population count in the sample set of 7 states. Most states are 40% to 100% worse than Sweden making Brueck's comments absurdly inaccurate or simply not truthful. She must be comparing apples to cigars like McCormack did by way of Norway, Finland, Denmark.

BBC News Daily headline reads, "Coronavirus: What's going wrong in Sweden's care homes?" (Savage, 2020)

CNN health headline reads, "Sweden is still nowhere near 'herd immunity,' even though it didn't go into lockdown." (Kennedy, 2020)

The New York Times headline reads, "Sweden Stayed Open. A Deadly Month Shows the Risks." (Leatherby, 2020)

Every day mainstream media writes negative articles about Sweden's strategy on COVID-19. The articles contain outright lies, extreme hyperbole, and misleading comparisons meant to downplay Sweden's success. Facts and truth seem to escape the storytelling media.

COMMENTS ON GRAPHING

Before you call "foul" on the graph because it is normalized to "1" and does not consider population size or area, please consider the following. Sweden has a population 50% larger than Massachusetts and comparable to Belgium. The Stockholm urban area has about 1.5 million people, Gothenburg has about 600K, and Malmö has over 300K. Belgium's top three metropolitan areas rank 1.2 million, 526K, and 262K by population. Suffolk County Massachusetts, which contains Boston, has a population of 804K and Worcester County Massachusetts has a population of 831K. Middlesex County Massachusetts is the highest at 1.6M, but that county is spread out more and it can be argued that it doesn't resemble a major metropolitan area. (Wikipedia, 2020) Thus, the normalized curve and states chosen for comparison are certainly fair.

The important point to note with these statistics is that density of living population is comparable with Sweden. Sweden is neither an outlier in total population nor density of urban living. Norway and Finland are poor comparisons due to both density of urban living and total population disparity with Sweden.

If, however, you insist that Sweden should be compared based on population, then Sweden is doing far better than most states in the sample. If stringent mitigation measures actually worked, Sweden would be doing far worse than other states in the sample set.

Lastly, regarding a graphing anomaly, Spain's curve finishes by going negative. This is due to the discovery of significant over-counting of deaths due to COVID-19. Spain discovered 1,915 duplicate entries and mistaken causal attributions errantly added to the COVID-19 death total over time. They made the correction on May 25, 2020.

MEANS OF SPREAD

COVID-19 is like other viruses in that it spreads more quickly through cities and regions of denser population. Other viruses such as influenza and rhinovirus spread mainly through commonly touched surfaces, especially in community resources such as taxi, train, and subway handles, door handles, office coffee pots, and other hand to surface items.

The most pertinent and informative anecdotal explanation and advice is from Dr. David Price at the Weill Cornell Medical Center in New York City. (Price, 2020) Price said, "I work at one of the premier hospitals in New York City. Our hospital is almost exclusively a COVID-19 hospital. The transmission of the virus is almost exclusively from your hands to your face. There's also a small thought that it can be aerosolized ... that it can kind of exist a little bit in the air. The thought at this point (regarding aerosols) is that you actually have to have very long sustained contact with someone. And I'm talking about over 15 to 30 minutes in an unprotected environment meaning you're in a very closed room ..."

"Become a hand nazi. ... keep them (your hands) clean and you will not get this disease. ... you have to start psychologically working on the connection between your hands and your face ... those two things combined will prevent the transmission of disease in your family in 99% of cases," Price said.

Regarding masks, Price said, "Any mask will do. This is not, preventing the disease. This is training you (to not touch your face)." Though he says to wear a mask to prevent you from touching your face, he smiles in the video while saying that the mask does not prevent anything, but rather is a psychological means of training you to not touch your face.

The population does not know the true purpose of the mask. People believe the mask is stopping aerosolized droplets from entering or exiting a person's mouth or nose. Many doctors know that masks do nothing to prevent aerosols; and some know that people are inclined to touch their faces and masks more often while wearing one. Why are we wearing masks if people don't know the purpose and are not aware that they're not to touch the mask or their faces?

Regarding means of spread, consider this. If spread is 99% through hands to surface contact, then hands to face contact, why are we not focused on that? Why are 6 feet distancing and masks required through executive order when, at most, they might prevent 1% of transmission, while people continue touching handles and their faces? Ergo, masks do nothing to prevent spread because the public is not informed as to their purpose. Masks and social distancing are distractions from the real spreader of COVID-19, which is contact surfaces and hands to face.

MITIGATION MEASURES

States that are not Sweden have chosen stringent mitigation measures to combat the spread of COVID-19. These are orders to shelter-in-place, ordered closure of all non-essential businesses, economic "lockdown," social distancing to 6 feet or 1.5 meters, orders to wear face coverings in public, closed schools, and no gatherings of more than 10 people.

Sweden's measures include "arm's length" social distancing, gatherings of no more than 50 people, and optional distance learning, while schools, bars, pubs, casinos, nightclubs, restaurants, and all other businesses have been open along with Sweden's entire economy.

Notice again that there is no change in shapes of the curves though mitigation measures were enacted at various points in time. If the stringent measures had any significant effect, the curves would be very different from Sweden, which clearly had a significant outbreak along with the rest of the sample set.

SUMMARY

The graph demonstrates no change in shape from a standard SIR (Susceptible, Infectious, Recovered) epidemiology curve and no difference in shape from Sweden's curve.

Relative to states with comparable urban living density, Sweden is near the top performers and comparable with the Netherlands. Both have under 400 deaths per million population as of May 26, 2020.

Masks do not stop aerosolized virus, but people are ordered to wear them anyway and they don't know why they're wearing them.

Social distancing of 6 feet does nothing to stop COVID-19, but people are ordered to keep their distance anyway.

Hands to a contact surface and then to face is the leading cause of infection and spread, but we don't hear much about it. People wearing masks are touching their masks and then touching handles and think they are safe because they are wearing a mask.

CONCLUSION

It is common thinking (herd thinking) that the strict executive orders put on the people, through invocation of civil defense law, must be for our own good because the science and data say so. But there is no science or data that shows the measures to be effective. In fact, there is plenty of science and data to show just the opposite - that these measures do not work.

That is why the curves are all the same including Sweden. Social distancing and masks certainly don't have a discernible effect. One would think the lockdown would have stopped the spread as people didn't go to work anymore and touch things like door knobs and coffee pot handles. However, people still need to go food shopping and pump gasoline.

As a last note, and in light of the riots and civil unrest, ask yourself if the lockdown, shutdown, social distancing, and mask wearing have any bearing on people's state of mind and behavior. Would George Floyd have been laid off from two jobs if not for the lockdown? He's dead now. Would he have been tempted to go back to vices he was trying to quit if he wasn't sitting at home with nothing to do for two months? Would the cop (I won't name him) have been agitated enough to use extreme force had it not been for two months of chaotic lockdown? How many people are being killed as a direct result of these useless measures we're told are meant to save us from ourselves? How many homicides, suicides, overdoses, spousal and child abuse cases, and other maladies would have happened if not for the ineffective measures meant to save us?

This failure of government needs to stop immediately, but the herd is too conned and too invested in the hysteria to give up the story and make a course correction toward civilization.

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