



REGION 1 HAMMER & DANCE

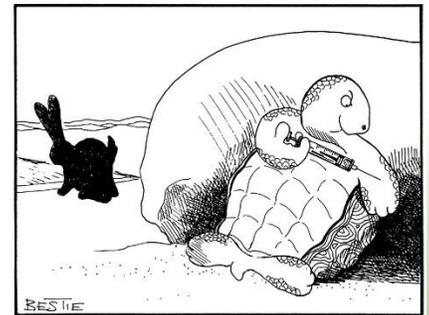
July 8, 2020

United for Ministry in the Days of COVID-19.

The Social Service Agencies
and Synods of Region 1.

Dave Brauer-Rieke, Consultant

Region 1 Lutheran Disaster Preparedness & Response
971-255-9331 dave@climateimagination.com



It was hoped that this summer might be a time of calm and recovery on the coronavirus front. That is to say, the country had hoped to have the virus somewhat contained and the economy re-engaged before a feared 'second wave' of infections arrives this coming fall. Such has not been the case.

[The New York Times reports that](#) "The U.S. now ranks with Brazil, Sweden and Peru as having one of the world's most rapid virus growth rates." "The Dance" - that is to say, our attempts to return to normal in everyday life - does not appear to be going well in the U.S. The New York Times goes on to claim that "[In many places, Americans continued to socialize in proximity, without masks.](#)" Our laxity in the face of this global pandemic is showing.

This week we will re-engage the statistics for the geography of the Pacific Northwest. How are we doing here on the home front? And what does it imply for the ministries we share and the ways we mutually support one another?

*But in the end the
truth will out.*

(The Merchant of Venice 2:2)

This Week:

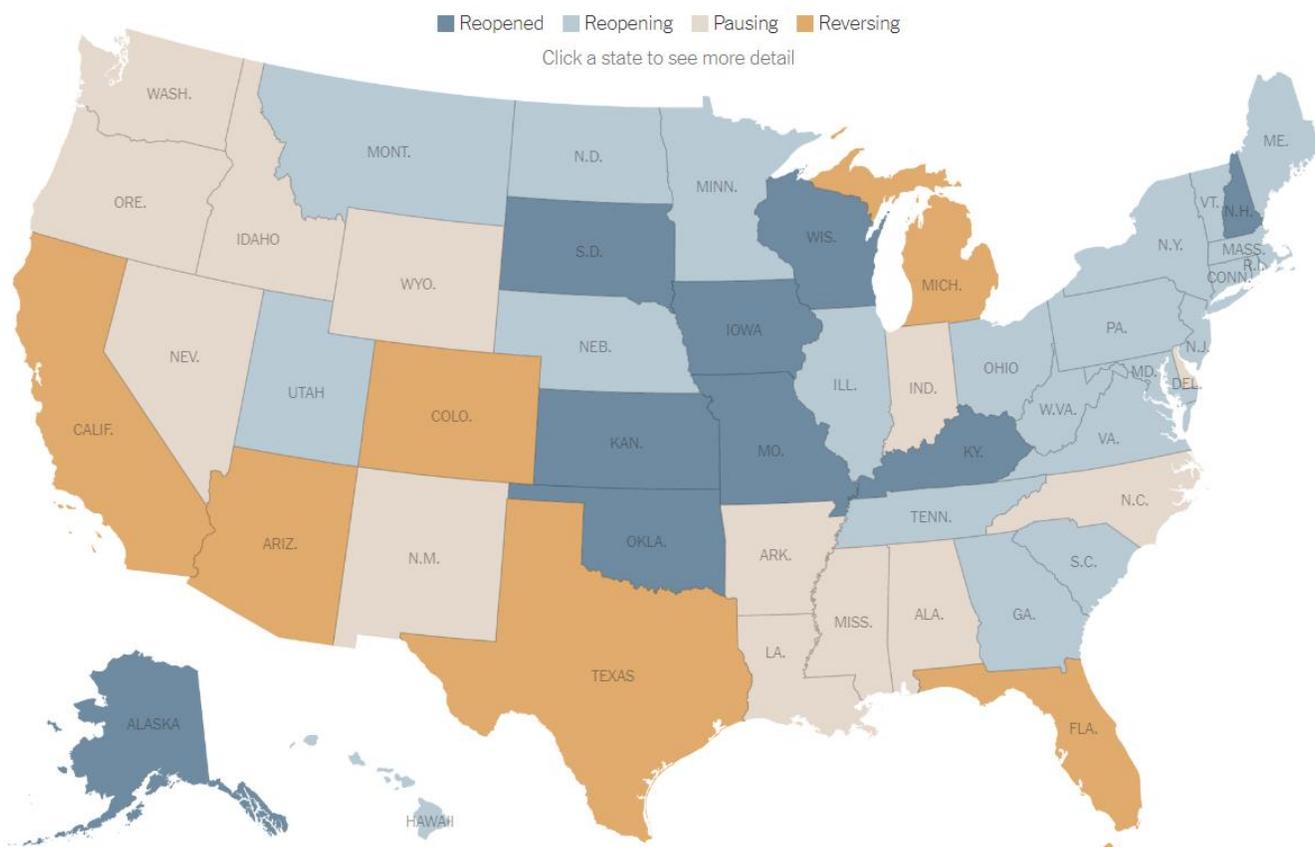
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Dave Brauer-Rieke

The Big Picture

By Jasmine C. Lee, Sarah Mervosh, Yuriria Avila, Barbara Harvey and Alex Leeds Matthews
Updated July 6, 2020

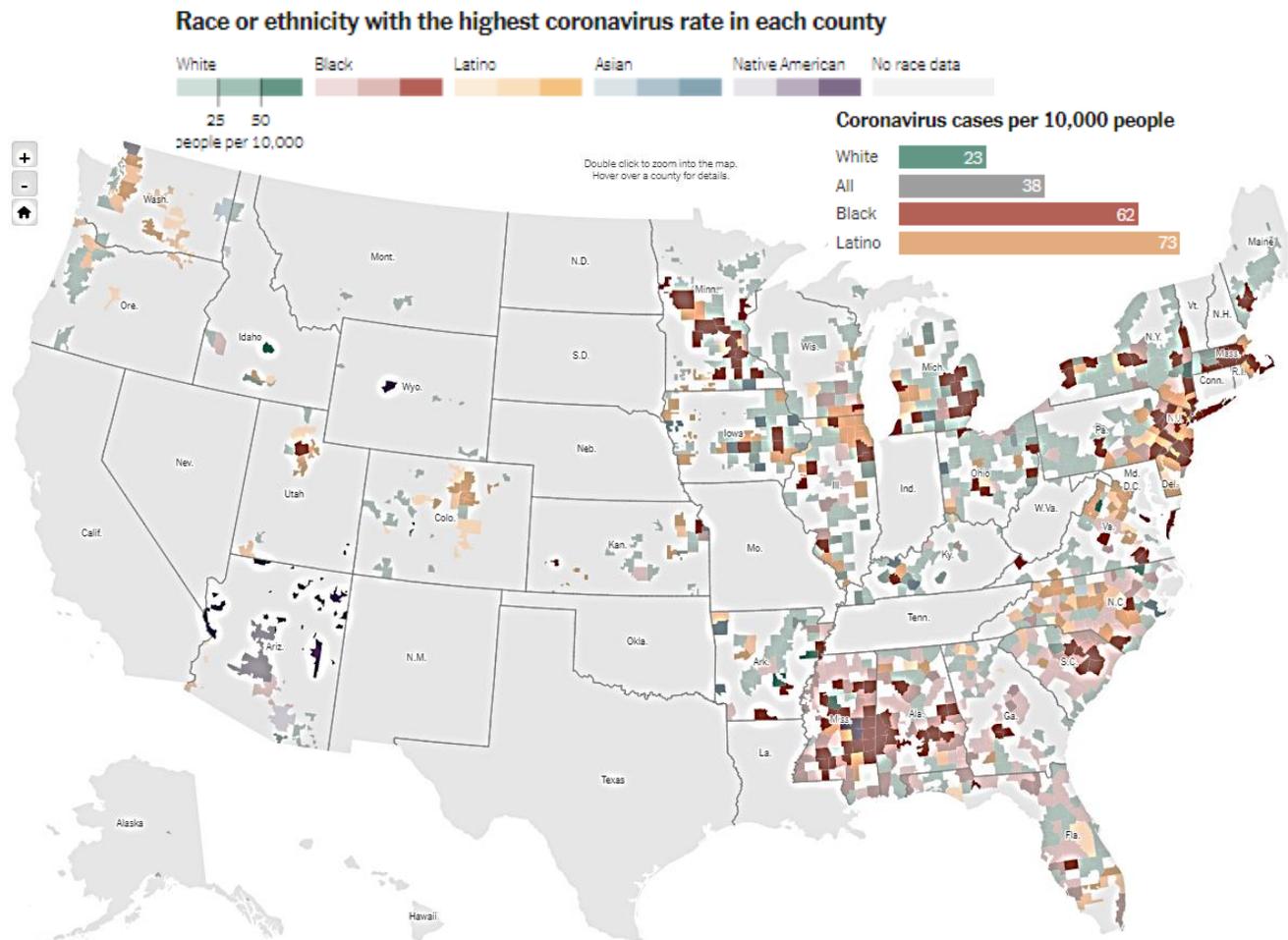


This July 6, 2020 map from the [New York Times](#) shows six states that have reversed their reopening progress due to run-a-way coronavirus infection rates. In addition, 13 states have chosen to pause their reopening plans, three of which are in the Pacific Northwest.

Each case is different, of course, as infection “hot spots” may cluster around individual workplaces, counties, or businesses. Contract tracing helps states localize such hot spots (if in fact they exist.) The individual state information pages (4-8) include a map indicating counties of concern. In the case of all 5 “Region 1” states, **CovidActNow** suggests that contact tracing is insufficient to stop further spreading. Testing, however, appears to be sufficient for all states except for Idaho. Infection rates are on the rise in all 5 states.

As Synods and Community Service Agencies open offices and churches (to both business and worship) **it would seem prudent to have plans in place for shutting things back down should these trends continue. What will be your indicators for taking such actions?** It may be helpful to associate such decision with State declarations, or it may not. State officials must navigate political realities which often reflect concerns other than public health. How will we in the church respond? ❖

Impacts of a History of Racial Oppression



A [July 5, 2020 article in the New York Times reports](#), “Latino and African-American residents of the United States have been three times as likely to become infected as their white neighbors, according to the new data ... And Black and Latino people have been nearly twice as likely to die from the virus as white people, the data shows.”

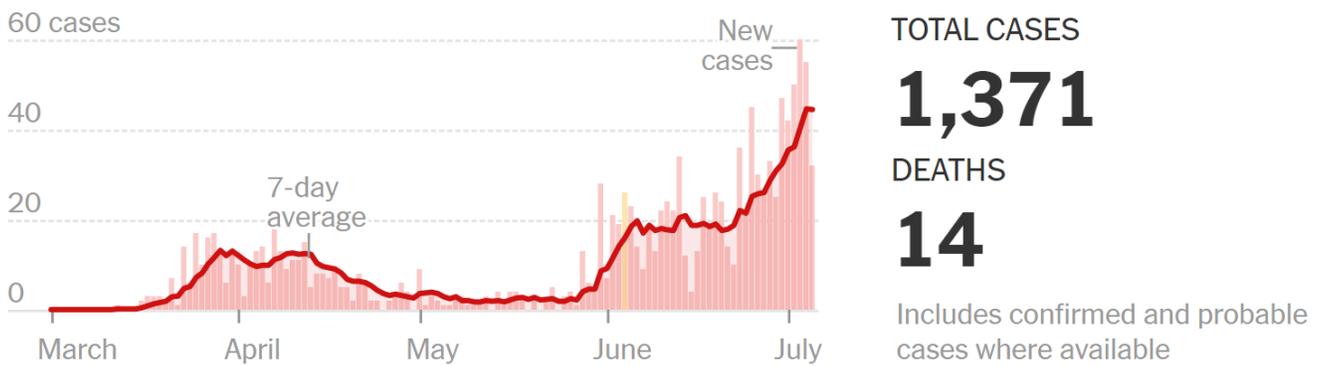
The disparities persist across state lines and regions. They exist in rural towns on the Great Plains, in suburban counties, like Fairfax County, Va., and in many of the country’s biggest cities. “Systemic racism doesn’t just evidence itself in the criminal justice system,” said Quinton Lucas, who is the third Black mayor of Kansas City, Mo., which is in a state where 40 percent of those infected are Black or Latino even though those groups make up just 16 percent of the state’s population. “It’s something that we’re seeing taking lives in not just urban America, but rural America, and all types of parts where, frankly, people deserve an equal opportunity to live — to get health care, to get testing, to get tracing.”

Once again it is evident how disasters reveal human vulnerabilities and inequities. **The work of disaster preparedness and response in Region 1 has a much to do with addressing such inequities as it does being two weeks ready or having a family plan in case of an emergency. When the emergency is “now” response is preparation.** Financial equity and justice in any community is essential to a vibrant response to natural disasters. ❖

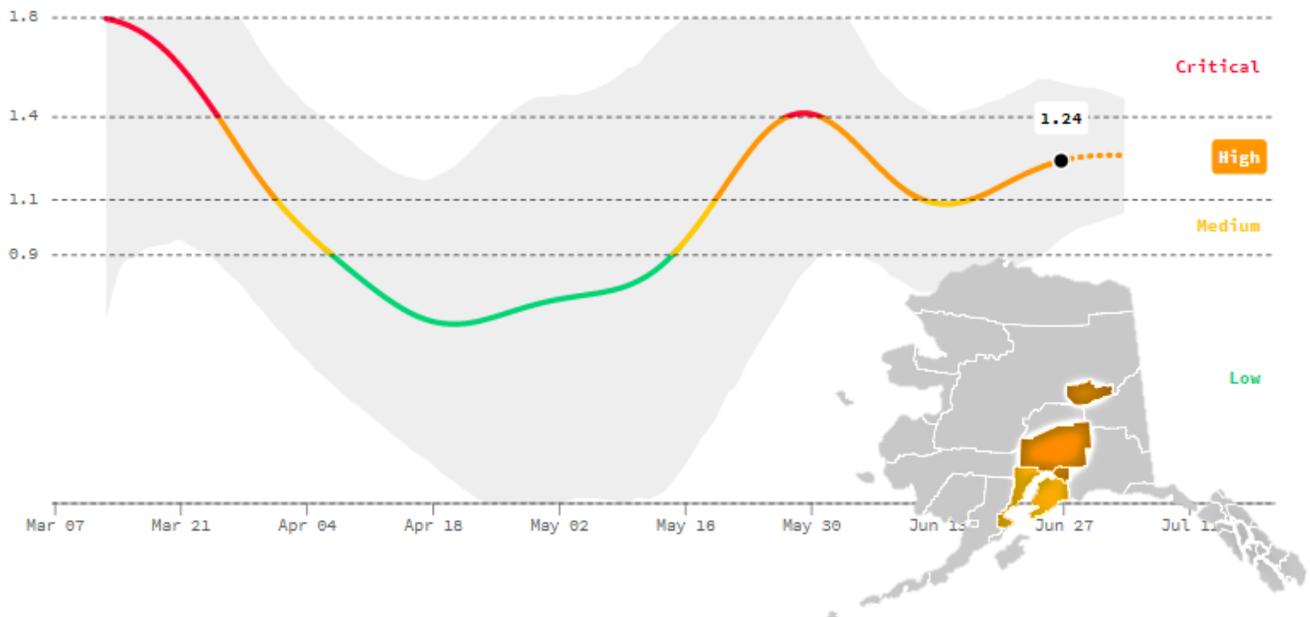
Tracking COVID-19 in ELCA Region 1

Alaska is seeing an increase in the rate of COVID infections. [A July 2, 2020 report from Alaska Public Media states that](#), "Alaska recorded 50 new coronavirus cases from Wednesday, but no new deaths or hospitalizations. It's the biggest one-day increase in infections in Alaska since the pandemic began, breaking [the prior record set earlier this week](#)." The following graph (for all states) is [from the New York Times](#):

By The New York Times Updated July 6, 2020, 2:13 P.M. E.T.



[COVID ActNow states that](#) "On average, each person in Alaska with COVID is infecting 1.24 other people. As such, the total number of active cases in Alaska is **growing at an unsustainable rate**. If this trend continues, the hospital system may become overloaded. Caution is warranted." Sufficient testing is being done and there is ICU headroom for possible increases. There does not appear to be enough contact tracing to stop the spread of COVID, however.



Washington is seeing an increase in the rate of COVID infections. [A July 5, 2020 KOMO News report states that](#), "Washington state health officials reported 656 new cases of coronavirus Sunday - nearly twice as many as the day before and the third-highest daily increase since the start of the pandemic. The additional new infections pushed the total number of cases to 35,898 statewide. Five more fatalities also were reported from COVID-19, bringing the total number of deaths in Washington to 1,359."

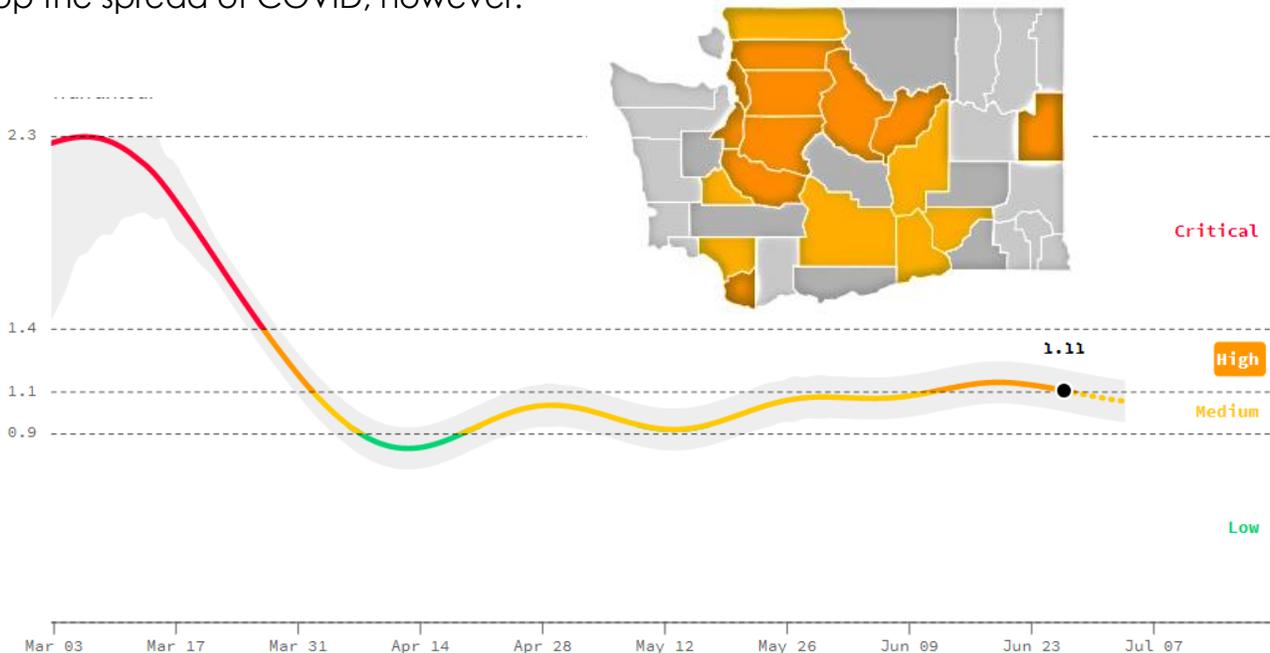
By The New York Times Updated July 6, 2020, 2:13 P.M. E.T.



TOTAL CASES
37,596
DEATHS
1,360

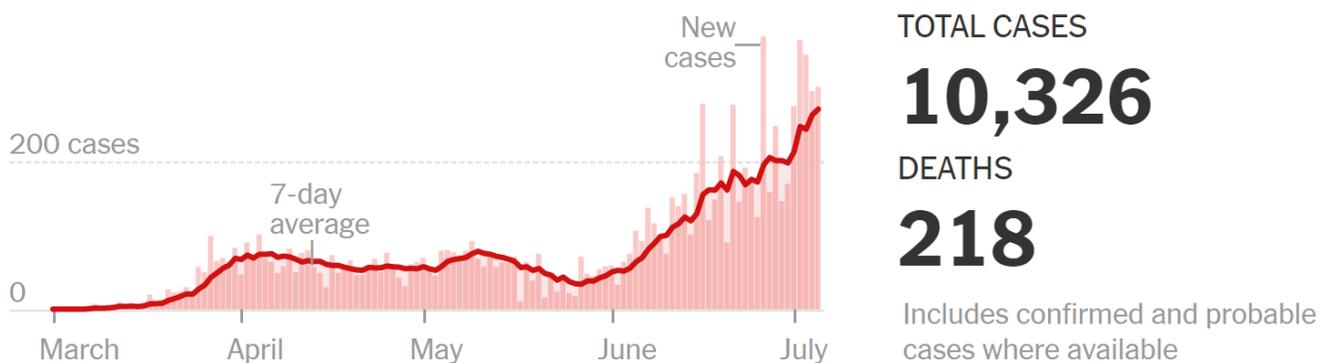
Includes confirmed and probable cases where available

COVID ActNow states that "On average, each person in Washington with COVID is infecting 1.11 other people. As such, the total number of active cases in Washington is **growing at an unsustainable rate**. If this trend continues, the hospital system may become overloaded. Caution is warranted." Sufficient testing is being done and there is ICU headroom for possible increases. There does not appear to be enough contact tracing to stop the spread of COVID, however.

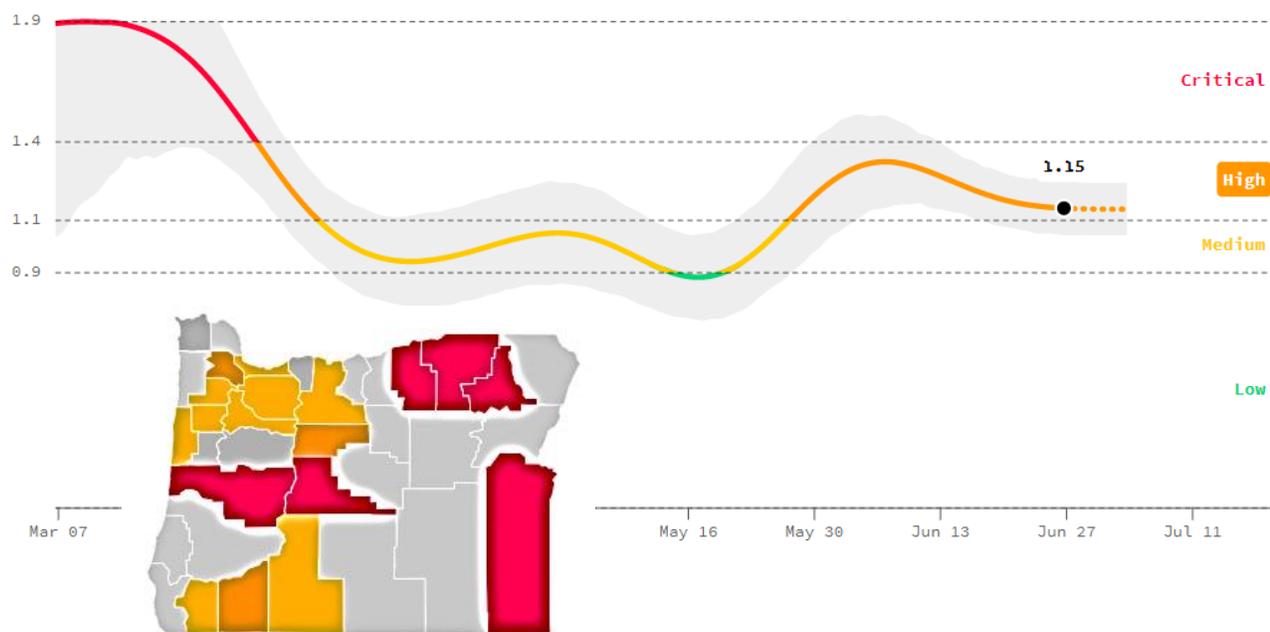


Oregon is seeing an increase in the rate of COVID infections. [A July 6, 2020 Oregon Public Radio update states that](#), "[The Oregon Health Authority](#) reported 168 new confirmed and presumptive coronavirus diagnoses Monday, bringing the state to 10,395 known cases. The health agency didn't report any new coronavirus-related deaths. The number of people confirmed to have died from the virus in Oregon is 215. Monday's reported cases follow a milestone marked Sunday, with Oregon's coronavirus case numbers surpassing 10,000."

By The New York Times Updated July 6, 2020, 2:13 P.M. E.T.

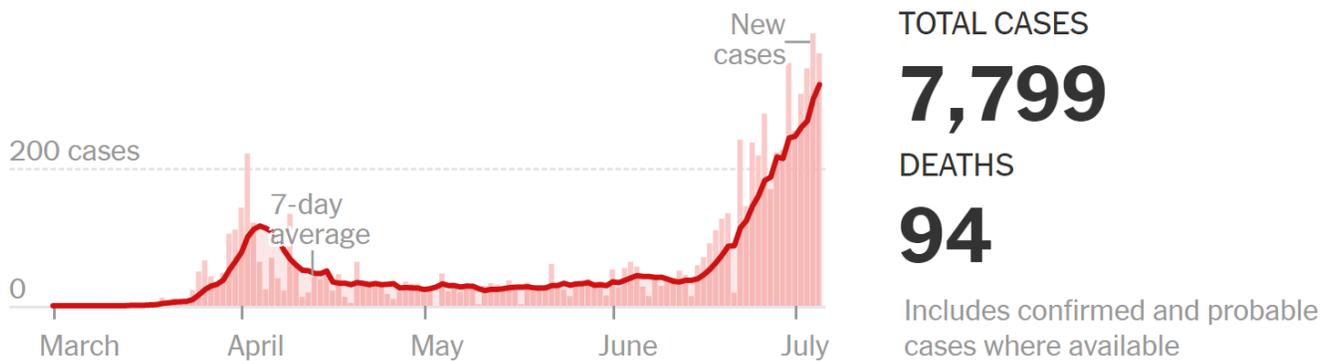


[COVID ActNow states that](#) "On average, each person in Oregon with COVID is infecting 1.15 other people. As such, the total number of active cases in Oregon is **growing at an unsustainable rate**. If this trend continues, the hospital system may become overloaded. Caution is warranted." Sufficient testing is being done and there is ICU headroom for possible increases. There does not appear to be enough contact tracing to stop the spread of COVID, however.

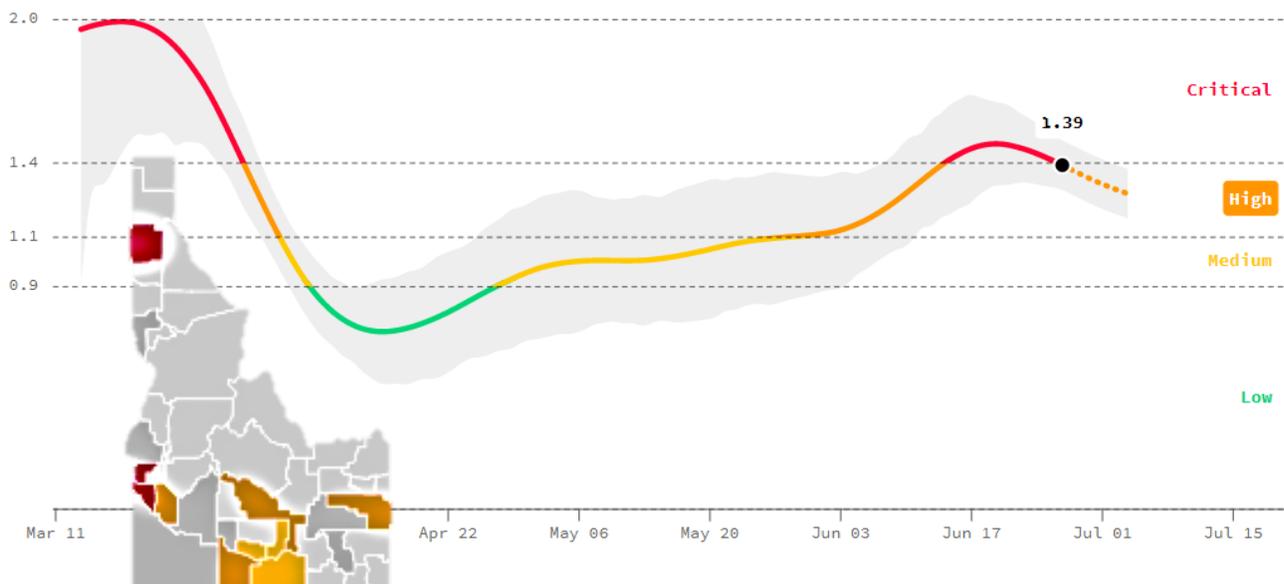


Idaho is seeing an increase in the rate of COVID infections. [A July 5, 2020 Boise Public Radio update states that](#), "State health officials said 365 new cases of COVID-19 were confirmed by lab test results Sunday. Since Friday, the state has announced 1,141 new cases; the fastest jump of 1,000 cases or more since the pandemic was first identified in Idaho in mid-March. According to state data, 7,144 Idahoans have contracted the virus. Ada county has more than 1,000 cases more than any other county in the state."

By The New York Times Updated July 6, 2020, 2:13 P.M. E.T.

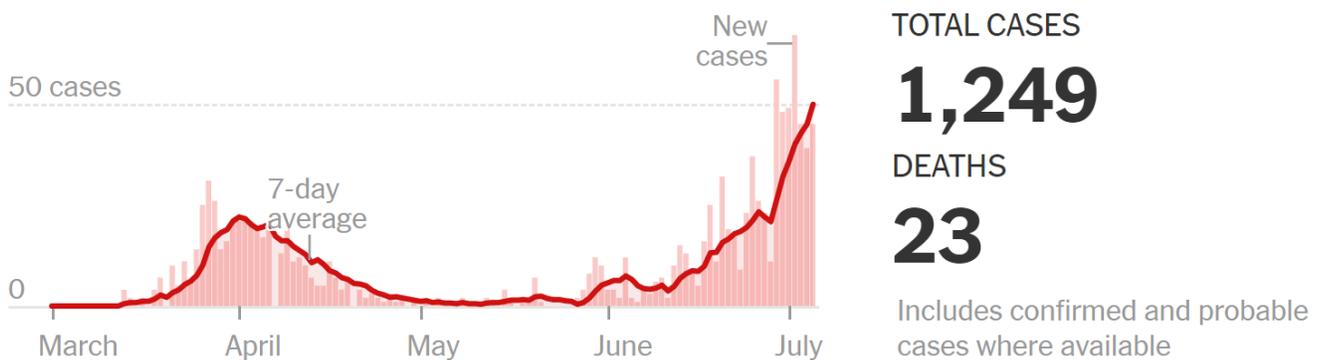


COVID ActNow states that "On average, each person in Idaho with COVID is infecting 1.39 other people. As such, the total number of active cases in Idaho is **growing at an unsustainable rate**. If this trend continues, the hospital system may become overloaded. Caution is warranted." Sufficient ICU headroom is available for possible increases. However, **insufficient testing and contact tracing is a concern**.



Montana is seeing an increase in the rate of COVID infections. [A July 6, 2020 Montana Free Press update states that](#), “As of Monday, July 6, Montana reports a total of 1,249 confirmed COVID-19 cases, including 37 new cases since yesterday, 548 active cases, and 23 deaths from the disease. State officials also report that 112 of the cases have resulted in hospitalizations, with 20 patients currently hospitalized, and 678 patients considered recovered.”

By The New York Times Updated July 6, 2020, 2:13 P.M. E.T.



[COVID ActNow states that](#) “On average, each person in Idaho with COVID is infecting 1.39 other people. As such, the total number of active cases in Idaho is **growing at an unsustainable rate**. If this trend continues, the hospital system may become overloaded. Caution is warranted.” Sufficient testing is being done and there is ICU headroom for possible increases. There does not appear to be enough contact tracing to stop the spread of COVID, however.

