



The Real Problems Behind Covid

By Economist Debra J. Roubik, VisionEcon

"The important thing is not to stop questioning. Curiosity has its own reason for existing..." Albert Einstein.

I want to begin by clarifying three things. First, I AM NOT a doctor. I am an economist, statistician, research analyst and business consultant. Second, in my 40-year career, none of my clients have represented more than a few thousand dollars of my income. Hence, I have no reason to predispose my research to protect or advocate for anyone. In fact, most of the time, I have given my services away for pennies on the dollar—if not pro bono. Third, I am a research analyst through and through. I won't simply buy into a philosophy simply because it is repeated and accepted by EVERYONE. That is one of the warning signs of simplistic thinking.ⁱ Instead, I RESEARCH the hell out of everything I believe.

So, let me state what all of my research has illuminated about Covid.

It is not just making people sick—it is KILLING our spirits. It is killing integrity, and hence trust. It is killing courage by instilling fear. It is killing our freedom to question, by squelching anyone who disagrees with what one of my mentors referred to as "conventional wisdom". It is killing faith by replacing transparency with censorship. It is killing the democratic process with elitism. Yes, it is killing us. But, not just physically. It is killing us mentally. Killing us emotionally. And, it is killing us spiritually.

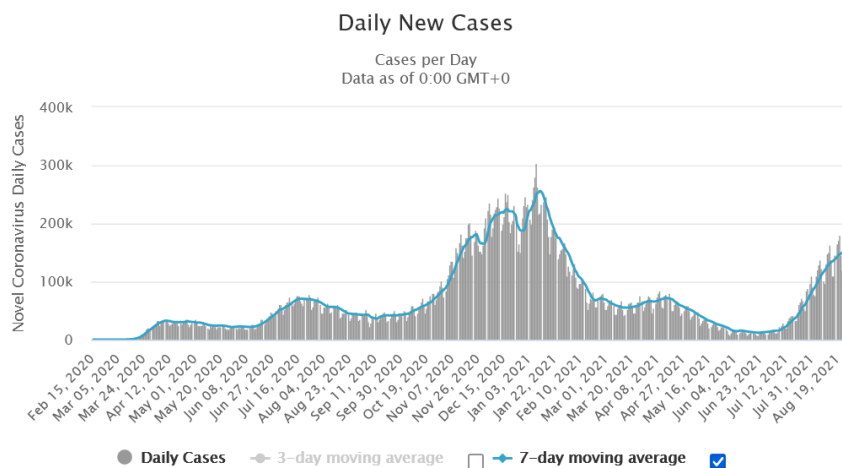
Yes, It Has Been Killing Us Physically

There is no doubt that the numbers are alarming and are climbing once again. However, as Dr. Scott M. Peck in the Road Less Traveled and Beyond eloquently stated, "Doubt, I believe, is often the beginning of wisdom"ⁱⁱ.

So, let's dig in and look at the story behind the numbers.

First, according to worldometer.info, the new case numbers are increasing in the U.S. The weekly average of new cases as of August 26, 2021 is up from June's low of 11,995. In addition, the weekly average is up from last summer's high of 70,271. But, as you can ascertain from the below graph—they are not as high as the record on January 11 of 255,830.

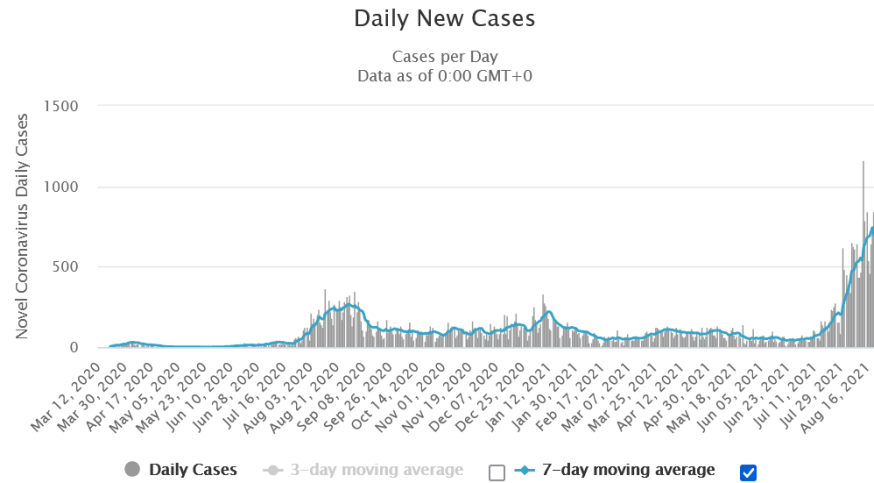
Daily New Cases in the United States



Source: <https://www.worldometers.info/coronavirus/country/us> ⁱⁱⁱ (August 26, 2021).

While some have said this surge in transmission has been caused by states with low vaccination rates—Hawaii does not follow that logic. With vaccination rates at 73.6% for one dose as of August 26, 2021^{iv}, the state has the third-highest vaccination rate of all 50 states. And, nonetheless, the state’s new case numbers are increasing with even more tenacity than during the previous two waves.

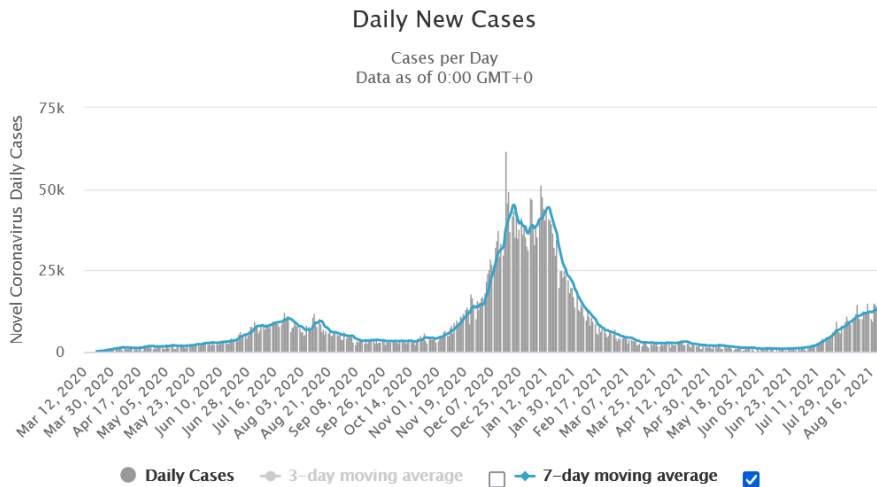
Daily New Cases in Hawaii



Source: <https://www.worldometers.info/coronavirus/country/us> ^v (August 26, 2021).

California has the 10th highest vaccination rate among the 50 states (68.1% for one dose) and is experiencing a resurgence along with the nation. The weekly average is up 27% from the seasonal high of last summer.

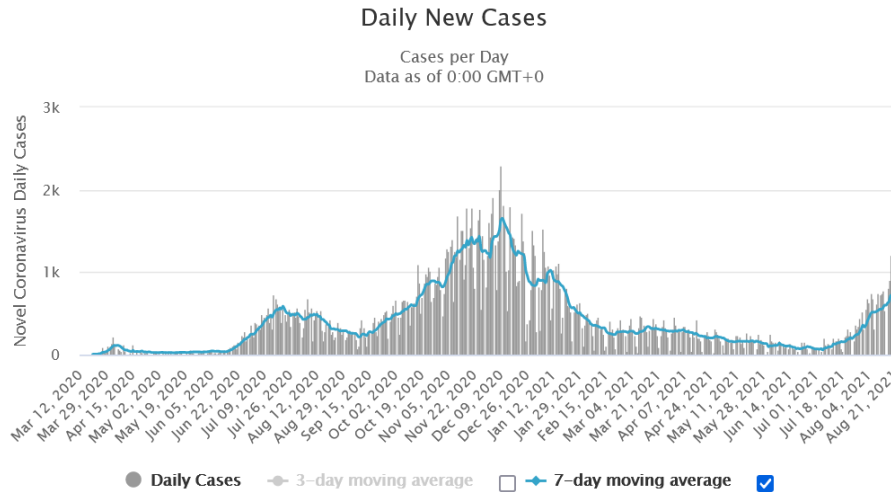
Daily New Cases in California



Source: <https://www.worldometers.info/coronavirus/country/us> ^{vi} (August 26, 2021).

Then, on the other end of the spectrum, Idaho is dead last of all 50 states at 43.6% with one dose. And, the seasonal increase in the weekly average for new cases is 22%-- less than the climb in California.

Daily New Cases in Idaho

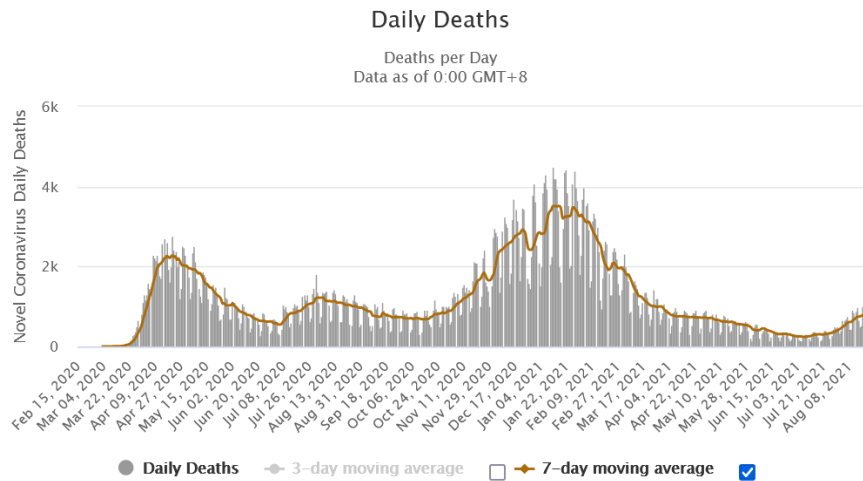


Source: <https://www.worldometers.info/coronavirus/country/us>^{vii} (August 26, 2021).

So, there is more to the story than just vaccination rates. The proliferation of new cases is caused by the culmination of multifactorial effects. One is seasonal. One reflects the extent of travel across borders. Another could be obesity rates. Another factor that has been considered is poverty rates. One is household size. This is a multi-dimensional problem that should not be convoluted as simplistic and one-dimensional as vaccines.

While cases are worrisome, the most important indicator in our fight against Covid is the number of deaths. Below is a graph of the daily deaths for the U.S.

Daily New Deaths in the United States



Source: <https://www.worldometers.info/coronavirus/country/us>^{viii} (August 26, 2021).

Daily deaths have dropped from a peak of 4,475 on January 12, 2021 to 1,287 as of August 25, 2021. So, gratefully, this new variant is not as deadly. While some would argue that the drop in death rates is solely due to the vaccination of approximately half of our nation—let's do the math.

The death rate from Covid would be calculated as:

$$\text{Death Rate} = \text{Total Deaths} / \text{Total Cases}$$

And, this could be broken down into the vaccinated (VAX) versus not-vaccinated (UNVAX).

$$\text{Death Rate} = (\text{Deaths(VAX)} + \text{Deaths(UNVAX)}) / (\text{Cases(VAX)} + \text{Cases(UNVAX)})$$

$$\text{Death Rate} = \text{Deaths(VAX)} / (\text{Cases(VAX)} + \text{Cases(UNVAX)}) + \text{Deaths(UNVAX)} / (\text{Cases(VAX)} + \text{Cases(UNVAX)})$$

There is a concept in calculus called the limit that allows us to estimate the value of a function such as that above when a specified variable gets very close to a specified number. In this case, we want to know what would the death rate be if no one who had been vaccinated died. So we want to know, what happens to the Death Rate as the Deaths(VAX) approaches zero.

Mathematically, this implies:

$$\begin{aligned} \text{Limit (Deaths(VAX)} \rightarrow 0) &= \text{Deaths(UNVAX)} / (\text{Cases(VAX)} + \text{Cases(UNVAX)}) \\ &= \text{Deaths(UNVAX)} / (\text{Total Cases}) \end{aligned}$$

Since we know that the death rate for the vaccinated is not zero, we can assume that the current death rate overestimates the death rate for the unvaccinated. (This is because currently, there are deaths from the vaccinated that are also included in the numbers.)

Calculating death rates on January 12, 2021, August 9, 2021 and August 25, 2021 (the latest data pulled from Our World in Data), we produce the following results.

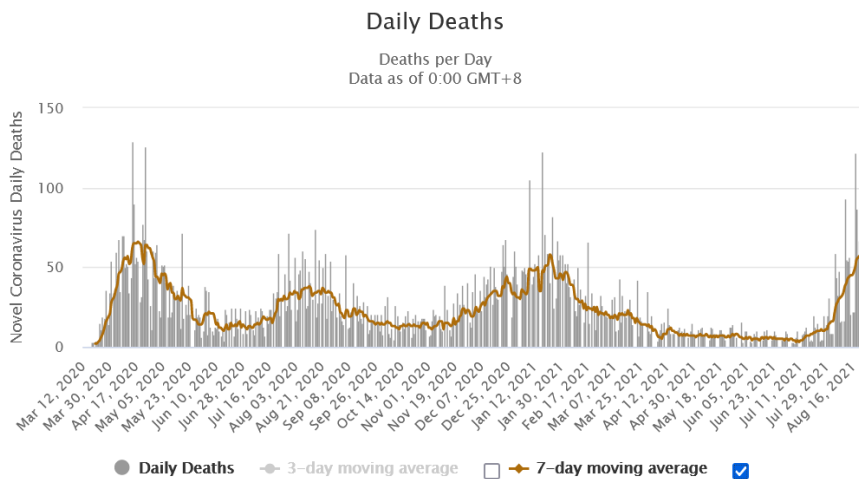
Country	Date	Total Cases	Total Deaths	Death Rate
USA	1/12/21	22,927,766	387,807	1.7%
USA	8/9/21	35,948,131	617,321	1.7%
USA	8/25/21	38,223,029	632,272	1.7%

Source: <https://ourworldindata.org/coronavirus-source-data> ^{ix} (August 26, 2021).

Hence, even though cases are increasing, if we assume that all of the deaths are due to the unvaccinated, the death rate has not changed since January.

Once again—let’s look at the media’s favorite scapegoat battle cry right now—Louisiana. During the first wave, the weekly average number of deaths reached 66 on April 18, 2020. This last wave has produced a weekly average of 61 deaths on August 25. While this is still unacceptably high, it is not worse than when the Coronavirus first hit the state.

Daily New Deaths in Louisiana

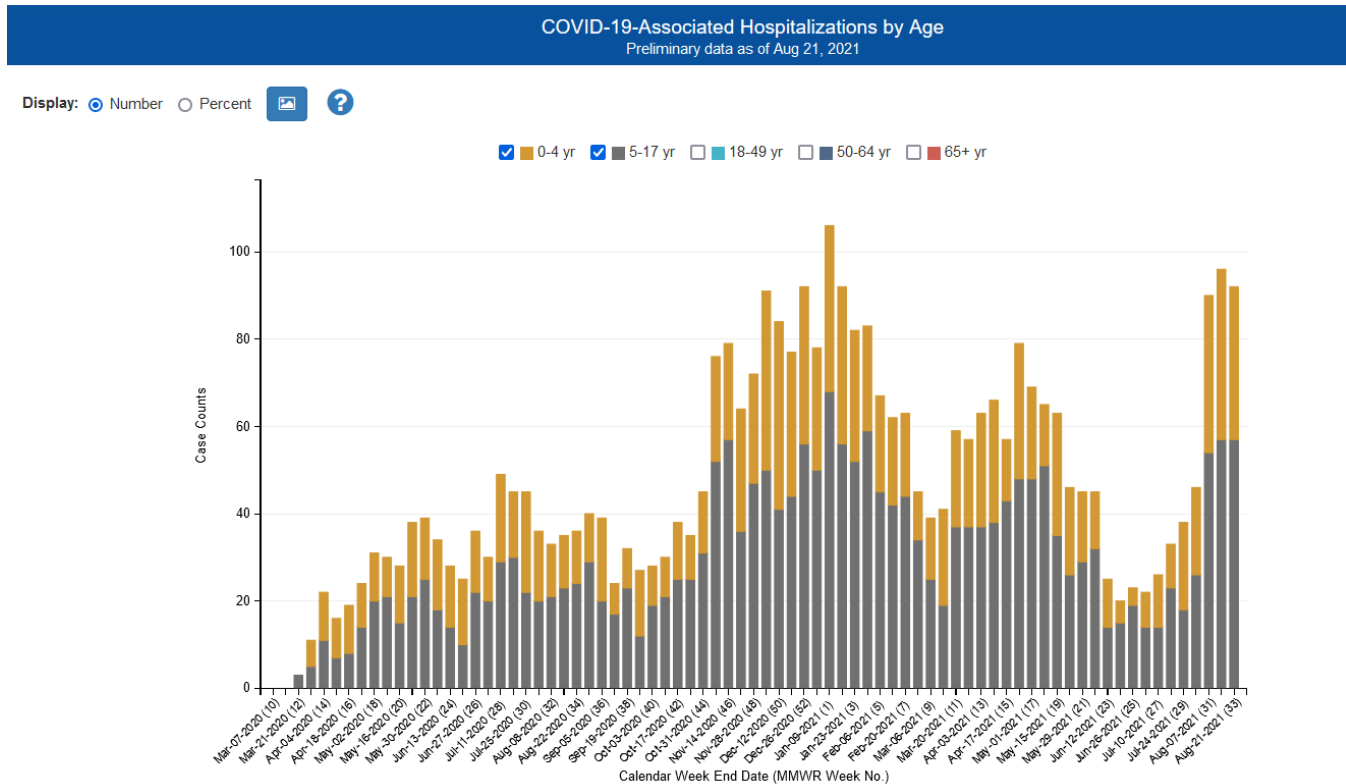


Source: <https://www.worldometers.info/coronavirus/country/us> ^x (August 26, 2021).

But, Disturbingly, It is Killing Us All Mentally

Nonetheless, people are dying and those deaths instill fear in all of us. But, disturbingly, we are being manipulated by that fear. And that fear is stifling our intellectual logic. Some of this manipulation is being done by the media—some is being done by the government itself. And fear-mongering is present on both sides of the red and blue spectrum.

For instance, let's look at another story the media, the medical community and the CDC have been spreading. According to news releases, pediatric hospitalizations are increasing at rates unseen in prior waves.



Source: https://gis.cdc.gov/grasp/covidnet/COVID19_5.html (August 21, 2021).

As you can see in the above graph, hospitalizations for children were higher during the second wave from December to January than they are now. In fact, the peak of 106 children for the week ending January 9 was 10% higher than the recent peak on August 14 at 96.

This makes you question why the media makes it seem as though the situation for children has suddenly become so dire? Maybe their emphasis on Louisiana children holds up? Let's examine those numbers.

The following data published by the American Academy of Pediatrics suggests that Louisiana is 15th in child mortality from the contracting of Coronavirus as of August 5, 2021. New York is first for child death rate from Covid. Why has the media focused on Louisiana instead of New York, Colorado (second highest) or Hawaii (fourth highest)?

Is it because their myopic focus on vaccination rates doesn't hold up for those states? New York's vaccination rate is 16th highest, Colorado is 21st and Hawaii's is 3rd highest.

All of this mental gymnastics is simply meant to illustrate that the media, medical establishment and/or government do not want us to think multi-dimensionally or multifactorially. It is NOT all about vaccines. There are multiple factors involved in childhood cases just as there are multiple factors involved in overall cases.

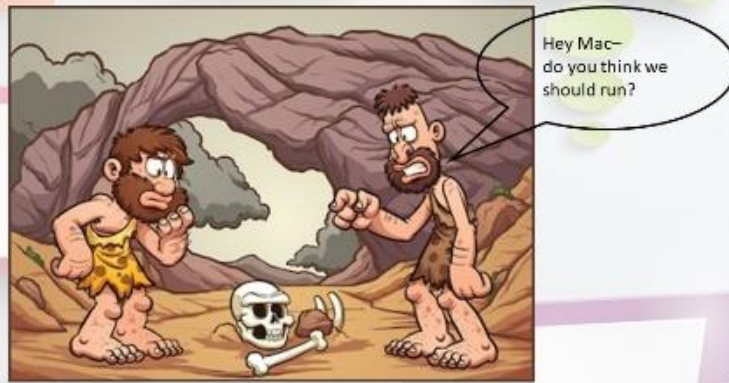
	States with Available Data	Age range	Cumulative Child Deaths from Covid	Deaths of All Ages	Percent Children of All Deaths	Percent Deaths of All Child Cases
1	New York	0-17	29	33,559	0.09%	0.03%
2	Colorado	0-19	18	6,963	0.26%	0.02%
3	Arizona	0-19	34	18,289	0.19%	0.02%
4	Hawaii	0-17	1	535	0.19%	0.02%
5	Nebraska	0-19	4	2,259	0.18%	0.01%
6	Washington	0-19	10	6,145	0.16%	0.01%
7	Delaware	0-17	2	1,833	0.11%	0.01%
8	Maine	0-19	1	900	0.11%	0.01%
9	Maryland	0-19	11	9,842	0.11%	0.01%
10	Nevada	0-19	6	5,953	0.10%	0.01%
11	Oregon	0-19	3	2,877	0.10%	0.01%
12	Illinois	0-19	21	23,476	0.09%	0.01%
13	Tennessee	0-20	12	12,783	0.09%	0.01%
14	Louisiana	0-17	9	11,129	0.08%	0.01%
15	Alabama	0-17	8	11,510	0.07%	0.01%
16	Indiana	0-19	10	13,610	0.07%	0.01%
17	Virginia	0-19	8	11,546	0.07%	0.01%
18	Georgia	0-17	12	18,764	0.06%	0.01%
19	North Dakota	0-19	1	1,541	0.06%	0.01%
20	California	0-17	30	64,206	0.05%	0.01%
21	Connecticut	0-19	4	8,296	0.05%	0.01%
22	Iowa	0-17	3	6,193	0.05%	0.01%
23	Massachusetts	0-19	8	17,714	0.05%	0.01%
24	Mississippi	0-17	4	7,613	0.05%	0.01%
25	Missouri	0-17	5	9,798	0.05%	0.01%
26	Pennsylvania	0-19	15	27,890	0.05%	0.01%
27	New Jersey	0-17	7	23,906	0.03%	0.01%
28	Kansas	0-17	2	5,268	0.04%	0.00%
29	Minnesota	0-19	3	7,683	0.04%	0.00%
30	Oklahoma	0-17	3	7,531	0.04%	0.00%
31	Wisconsin	0-19	3	8,302	0.04%	0.00%
32	Arkansas	0-17	2	6,230	0.03%	0.00%
33	Kentucky	0-19	2	7,362	0.03%	0.00%
34	Ohio	0-19	7	20,530	0.03%	0.00%
35	Florida	0-15	7	39,079	0.02%	0.00%
36	North Carolina	0-17	3	13,724	0.02%	0.00%
37	Alaska	0-19	0	385	0.00%	0.00%
38	DC	0-19	0	1,149	0.00%	0.00%
39	Idaho	0-17	0	2,210	0.00%	0.00%
40	New Hampshire	0-19	0	1,389	0.00%	0.00%
41	South Dakota	0-19	0	2,050	0.00%	0.00%
42	Vermont	0-19	0	260	0.00%	0.00%
43	Wyoming	0-18	0	786	0.00%	0.00%

Source: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>^{x1} (August 12, 2021).

Unfortunately, Covid has instilled such fear that most of us can no longer think multi-dimensionally. Research has shown that when presented with threatening situations—our amygdala is activated. The amygdala is a portion of our brain that is involved with evaluating the environment, determining whether stimuli are important and helps to generate the appropriate emotional and physical responses. When the amygdala sends messages down neural pathways it literally bypasses the cortex, which is the analytical portion of our brains.

This process improves our chances of survival in threatening situations. Flight or fight can be kicked in faster. And, let's face it—our bodies have been designed and strive for survival.

The amygdala works to assure our survival.



Source: "Analytical Thinking," Debra Roubik, August 13, 2019.

As the above slide suggests, our goal to survive tends to override our cortex such that we run when we need to run, or fight when we need to fight! However, we have been stuck in survival thinking for almost two years. As a result, many of us have trouble accessing our "Type 2 Thinking" which is pertinent to solving problems. This "Type 2 Thinking" was explored by Nobel Prize Winner Daniel Kahneman, in his book Thinking Fast and Slow. Kahneman defines System 1 Thinking as automatic with little or no effort and no voluntary control. System 2 Thinking requires attention and effort to engage our mental activity and sometimes includes complex computations. The key is to recognize when System 1 is running the show and when we really need to put in the effort to activate System 2 Thinking as in the research above.

Thinking well implies using both System 1 and System 2 Thinking. When we do learn to use both systems of thought—we will inevitably encounter paradox. A paradox is a "statement contrary to common belief, or one that seems contradictory, unbelievable, or absurd but may actually be true in fact.^{xiii}" Instead of dealing with the discomfort of paradox, many of us have stopped truly thinking altogether. Or, at least thinking with integrity. The word "integrity" comes from "integer" which represents a numerical value of wholeness and completeness. To think with integrity, we must be able to absorb holistic and hence, multi-dimensional thinking about a problem. We cannot simply fall back on single-minded and simplistic criteria or intellectual bigotry.

As Scott M. Peck stated in the aforementioned book, "I am astonished by the number of well-educated people who offer or see simple-minded explanations for complicated phenomena."

In order to think with integrity, we need to be alert to sources that do not apply both System 1 and System 2 thinking, sources that offer simplistic explanations and sources that do not embrace multi-dimensional thinking.

The Death of Emotional Intelligence

Can you see the hypocrisy?



I am finding it very perplexing that each side of the Covid policy debate can not seem to see the hypocrisy in their own arguments, or the possible validity of their dissenters' arguments. This ability to see the perspective of another is known as empathy. And, empathy is one of the components of emotional intelligence according to Daniel Goleman, psychologist and author of Emotional Intelligence^{xiii}.

Let's use an example of emotional intelligence with Covid. Most research now verifies that the vaccinated can still contract and transmit Covid^{xiv}. And, there does not appear to be much difference in the viral load transmitted.^{xv}

However, the symptoms and the stages of Covid tend to be more moderate for the vaccinated. Therefore, the only difference between the vaccinated and unvaccinated is that the unvaccinated are taking a chance that their own stint with Covid will be more serious, prolonged, land them in the hospital, or worst-case scenario, end up in their own death. That is their choice. They may have many reasons for that choice. Maybe they are concerned about the long-term effects of infertility or antibody dependent enhancement (ADE) and want to wait out to evaluate the long-term effects that may not become apparent for years. Maybe they believe natural immunity is healthier than a macromolecule that has been manipulated with enzymes and electrodes. Maybe the fact that the composition of the Coronavirus itself, and the vaccine, were known and patents were filed prior to the pandemic. This may raise concerns about the purity of the intentions of the government and the pharmaceutical conglomerates. Or, maybe they believe that the elderly, those with comorbidities, and the globally impoverished are most vulnerable and vaccines should be targeted to them. There could be many, multi-dimensional reasons for their choice.

So, instead of laying moral judgment upon those with differing viewpoints—we all need to seek to understand others' perspectives. We need to display emotional intelligence through empathy. If you want the freedom to choose what is right for your own body—you must acquiesce to give others that choice as well. That is the paradox of freedom.

The Death of Emotional Resiliency

Many generations have defining moments during their lifetimes that shape their emotional resiliency. Unfortunately, the Covid experience has highlighted the emotional fragility of our current generations. A meta-analysis of 308,596 participants across 54 studies suggested that suicide ideation increased 10.81%, suicide attempts were up 4.68% and self-harm events increased 9.63% in comparison to the period prior to the COVID-19 pandemic^{xvi}.

Most clinicians have stressed that youth are especially sensitive. A study of pediatric visits to emergency rooms shows higher rates of suicide attempts in February, March, April, and July 2020 as compared with the same months in 2019^{xvii}. While many assume this impact will be short-term—it may not.

In a systematic review of 63 studies with a total of 51,576 participants, the social isolation and loneliness such as that from Covid could increase the risk of depression for up to 9 years later^{xviii}. Many youths may end up dealing with these symptoms for years on end.

What is Happening to the U.S. Spiritually?

I love how one pastor I listened to talked about a "Scare- City" perspective. He mentioned that if you ascribe to this mindset—you will tend to live in fear and lack.

Instead, one principle espoused in Good to Great by Jim Collins is known as the "Stockdale Principle^{xix}." Admiral Jim Stockdale was a prisoner of war during the Vietnam War. For eight years he was detained and tortured. Stockdale answered, "I never lost faith in the end of the story... I never doubted not only would I get out, but also that I would prevail in the end and turn the experience into the defining event of my life, which in retrospect, I would not trade."

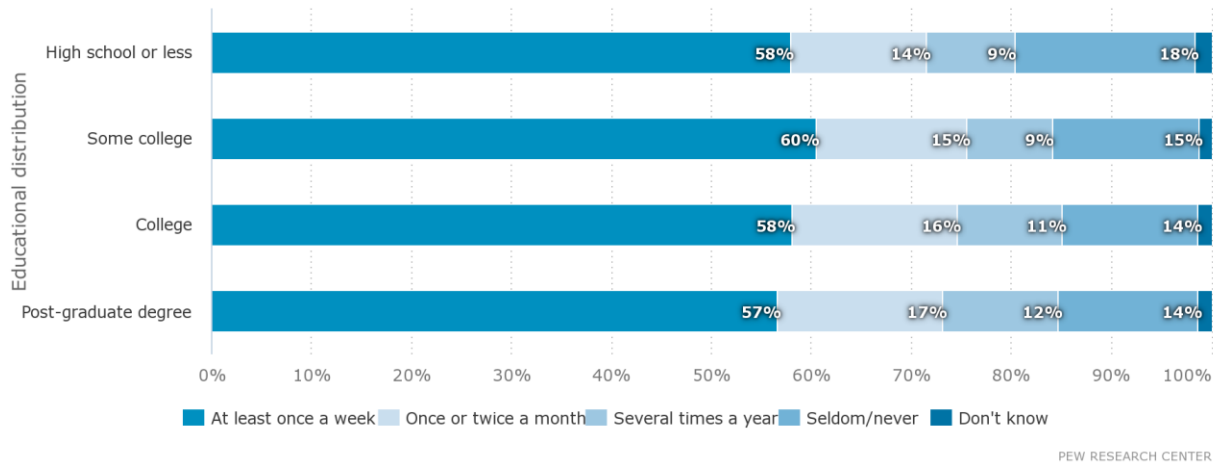
Having faith has a powerful impact on people's lives. A vast, comprehensive study of these dynamics was completed by Dr. Harold G. Koenig, a psychiatrist for the Departments of Medicine and Psychiatry at Duke University Medical Center. His article entitled "Religion, Spirituality, and Health: The Research and Clinical Implications" is a meta-analysis of 3300 studies from 1872 to 2010^{xx}. (A meta-analysis is a process that aggregates the data from multiple studies, completes statistical analysis to find communal results and overall trends.)

Dr. Koenig uncovered that in his research that of the 32 randomized clinical trials, 22 (69%) reported that a religious or spiritual intervention reduced anxiety more than a standard intervention or control condition. You can check his definition of religious/spiritual (R/S) in his article referenced below. In addition, of the ten high-quality studies examining R/S and immune function-- seven (70%) reported significant inverse associations with infection/viral load. This implies that as religious or spiritual intervention increased, infection and viral load tended to decrease.

Hence, this virus has forced us to recognize the drastic spiritual decline occurring in our country. A landmark Pew Research Study on Religious Landscapes suggested and many other studies have since confirmed, as educational level increases—spiritual peace and wellbeing decline. And, Generation X is the most "faithless." According to that same study, 68% of Generation X (who are now 41 to 56) either do not believe in God or do not know.

Frequency of feeling spiritual peace and wellbeing by educational group

% of adults who feel a sense of spiritual peace and wellbeing...



Source: <https://www.pewforum.org/religious-landscape-study/compare/frequency-of-feeling-spiritual-peace-and-wellbeing/by/educational-distribution/>^{xxi} (August 26, 2021).

While someone can be spiritual without believing in God—the point is the same. The spiritually enlightened tend to exude more peace and well-being.

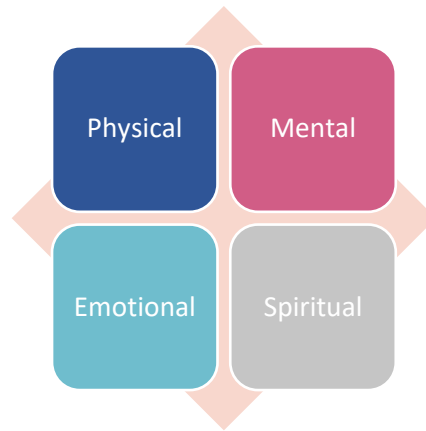
So, The Real Problems With Covid...

The true problems with Covid are not just that the virus is killing us physically. We need to remember that we are multi-dimensional beings, not just physical beings. We have thoughts, emotions and a soul (or spiritual essence). While most studies of Covid 19 tend to look at the effects in the one, physical dimension of our lives—the virus has affected all four.

Second to the physical impacts, the most potentially long-term problem is that, as a nation, we have let fear override our thinking. We have not been taught skills to contain our emotions and instead, activate System 2 Thinking in more calculated, analytical ways.

Third, through judgmentalism and our loss of empathy, we are losing emotional intelligence. We have also lost emotional resiliency. With these losses will come more relational and mental health issues within our country in the long run.

Finally-- we have lost our way spiritually.



Sometimes Obstacles Present Opportunities

But these problems could easily be solved by assuring that our citizens are presented with new life skills for these types of challenges. These skills would give us an understanding of how our brain works, how to question what we think, what to do when our emotions are triggered and how to apply System 2 Thinking. We also need to do a better job at teaching emotional intelligence, including empathy and resiliency. Lastly, our spiritual leaders need to reach out to educated, Gen X parents who are operating with no spiritual compass. By presenting the studies above along with providing parenting support, leaders could encourage parents to see how spirituality is just as important as education in providing a healthy life for their children.

Just maybe, by instituting these changes and grasping a faith like that of Admiral Stockdale, Covid could help us all return to a stronger, healthier state of being.

AUTHOR'S NOTE: It is of the author's opinion that the different style guides for references are a waste of time and energy. I vow to give credit where credit is due. The information needed to find a source will be provided with simple commas separating each piece of information.

ⁱ M. Scott Peck, M.D., *The Road Less Traveled and Beyond*, Simon & Schuster, 1997.

ⁱⁱ M. Scott Peck, M.D., *The Road Less Traveled and Beyond*, Simon & Schuster, 1997.

ⁱⁱⁱ World <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{iv} The Washington Post, "Coronavirus Health", accessed on August 26, 2021, <https://www.washingtonpost.com/graphics/2020/health/covid-vaccine-states-distribution-doses/>

^v <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{vi} <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{vii} <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{viii} <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{ix} <https://github.com/owid> accessed August 26, 2021

^x <https://www.worldometers.info/coronavirus/country/us/> accessed August 26, 2021

^{xi} The American Academy of Pediatrics and the Children's Hospital Association, "Children and COVID-19: State-Level Data Report", accessed August 26, 2021, <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

^{xii} M. Scott Peck, *The Road Less Traveled and Beyond*, (New York: Simon & Schuster, 1997).

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- ^{xvii} Hill RM, Rufino K, Kurian S, Saxena J, Saxena K, Williams L. Suicide Ideation and Attempts in a Pediatric Emergency Department Before and During COVID-19, *Pediatrics*, 2021 Mar;147(3):e2020029280. doi: 10.1542/peds.2020-029280, Epub 2020 Dec 16. PMID: 33328339, accessed August 9, 2021 <https://pubmed.ncbi.nlm.nih.gov/33328339/>
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- ^{xix} Jim Collins, *Good to Great*, (New York: Harper Collins, 2001).
- ^{xx} HG Koenig, Religion, spirituality, and health: the research and clinical implications, *ISRN Psychiatry*, 2012;2012:278730, Published 2012 Dec 16. doi:10.5402/2012/278730, accessed on August 9, 2021 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3671693/>
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