Human and Economic Impact

- Post Graphic: How unemployment claims exploded in just two weeks
- Map It: “Where has it spread in the U.S.?“ | April 1, 2020
- Map It: “States Reporting Cases of COVID-19 to CDC” | April 1, 2020
- Graph It: The Coronavirus by the Numbers
- Student Activity: Compare and Contrast | Data Reveals Lives
- Student Activity: After the Pandemic
Data, Decisions and Debates

As covid-19 spread from Asia to Europe and the U.S., numbers of confirmed cases rose. Infectious disease specialists encouraged persistent hand washing and social distancing. Schools closed, six-feet apart (vs. six-feet deep) was required rather than expected, and all-but-essential businesses shuttered.

Keeping people safer and less likely to become infected required limits on personal movement, loss of income for many, distance learning and homeschooling for families, and 24/7 living together. Workers in hospitals and makeshift coronavirus facilities, grocery stores, trash collection, media, nursing homes and mortuaries were among those deemed essential. Some restaurants switched to take-out and delivery to survive. Millions of other Americans filed for unemployment benefits.

Maps and graphics in this resource guide give snapshots of the impact of novel coronavirus on humans and economies. Using them and more recent online resources allow for comparison and contrast activities, examining trends and making data-based conclusions.

As weeks have passed, ethical debates arose. Who gets a ventilator? Who is sent home to recover? Should places of worship remain closed? When can businesses open? How fast can we return to normal? What changes will result in the economic and human interaction arenas?

Whether the health of the economy or the well-being of individuals should determine what mayors, governors and the federal government decided was next. Should restrictions be reduced slowly? Data and daily experiences required decisions and engendered debates.
How unemployment claims exploded in just two weeks

Thursday’s jobless claims report set a new record, nearly doubling the prior week's sky-high figures.

This chart does not cover all unemployed people in America, only those with unemployment insurance claims, Seasonally adjusted.

On Feb. 29, a 58-year-old man near Seattle became the first announced U.S. coronavirus death.

On March 13, President Trump declared a national emergency. On March 19, California became the first state to issue a stay-at-home order.

Over 2 million of last week’s claims are still being processed.

The rest are now counted as part of the existing claims.

Source: U.S. Department of Labor

March 15 to March 21
5.1 million

March 22 to March 28
11.7 million new claims filed

Height of the
Great Recession
The first week of June in 2009 saw the highest tally of total unemployment claims.

May 31 to June 6, 2009
Total number of people claiming unemployment
7.2 million

New claims from that week
6.6 million

People already claiming unemployment benefits
596,000

March 1 to March 7, 2020
Total
1.9 million

March 8 to March 14
282,000

211,000 new claims
1.7 million existing claims

March 15 to March 21
2 million

3.3 million

Over 2 million of last week’s claims are still being processed.

2.1 million claims still being processed

The rest are now counted as part of the existing claims.

3 million existing claims

March 22 to March 28
6.6 million

Source: U.S. Department of Labor

Alyssa Fowers/The Washington Post
Where has it spread in the U.S.?  

Confirmed cases: 199,092  
Reported deaths: 4,361

- Washington: 5,484 cases
- California: 8,700 cases
- New York: 83,712 cases
The disease caused by the novel coronavirus has killed at least 10,459 people in the United States between February 29 and April 6, 2020. The first reported case was a 58-year-old man near Seattle.

The death toll from covid-19 began to rise steadily in early March, then more sharply as the disease spread to every state and most U.S. territories.

**New deaths reported per day**

![Graph showing new deaths reported per day from February 29 to April 8. The data shows a steady increase with a sharp rise around March 28.]

**New reported cases per day**

On April 6, a total of 355,523 cases had been reported since Feb. 29. Because testing was slow to begin in the U.S., health officials agree that the number of reported cases is much slower than the actual number of people who have the disease.

![Graph showing new reported cases per day from February 29 to April 8. The data shows a steady increase with a sharp rise around March 28.]

**YOU DO THE NUMBERS**

Using the above two bar graphs, compare and contrast the data of these dates for reported cases and for deaths. In your comparison and contrast, include the four days on which the most deaths and the dates of the highest number of reported cases occurred.

- a. March 14
- b. March 21
- c. March 28
- d. April 6
**Compare and Contrast | Data Reveals Lives**

*You will be using several informational graphics to complete these questions.*  
*Be sure to use the correct graphic. Please answer on your own paper.*

1. Data presented in narrative form can be very complicated to decipher. With the right chart or graph, the numbers can be communicated more quickly and effectively.  
   Read “How unemployment claims exploded in just two weeks.”
   
   **A.** To the far left, data is given about the Great Recession. Why is this information helpful to readers?
   **B.** Before reading the chart, you learn that the “chart does not cover all unemployed people” and numbers have been “seasonally adjusted.” Who are likely not to have filed claims? What does it mean to be “seasonally adjusted”?
   **C.** Compare the number of unemployment claims from March 1-7 with that of March 15-21. What was the percent of increase?
   **D.** Between March 15-21 and March 22-28, 6.6 million new claims were filed. Why are there so many new claims?
   **E.** The chart also indicates the number of claims that were being processed. How many claims remain to be processed in the March 22-28 week? What does this mean for the people who have filed claims?
   **F.** Put the 6.6 million new claims into perspective. What is the population of the city or town in which you live? How does 6.6 million people compare with the population of your hometown? What is the population of the largest city in your state? How does it compare to the 6.6 million?

2. Using a map to present data about the same topic or issue as found in each state is another approach. State three pieces of information you get from reading “Where has it spread in the U.S.? | April 1, 2020,” informational graphic.

3. Compare and Contrast the Post map (#2) with “States Reporting Cases of COVID-19 to CDC” Provide three areas of information.

4. Go to The Post’s website. Look for the graphic titled “U.S. deaths reported per day.” Click on it. Depending on the day you visit this page, you will find a direct statement of the number of people who have died from coronavirus — 23,649 and total reported cases — 582,000 (“Data as of Apr. 14 at 9:48 a.m.). There is a bar graph of Deaths and Cases. The Post has added a pull down feature to select U.S. states and territories — see “Show by” box. There is also a link to coronavirus orders in each jurisdiction. Select a state. Summarize what you learn about coronavirus-related deaths and cases?

5. Create a graphic to communicate data about an aspect of the coronavirus outbreak.
6. Review the above informational graphic.
   A. What does the horizontal line at the top indicate?
   B. There is not a key to what size of “dots” represents. What number occurs most often and may be used to set a representative size for number that dots reflect?
   C. At what date is the line between “antiquity” and “modern”?

7. Take a look at pandemics by the numbers.
   A. What is the earliest recorded pandemic? How many are believed to have died?
   B. What pandemic is responsible for the most deaths?
   C. Which modern pandemic is responsible for the most deaths?

8. New World smallpox arrived in the New World with explorers. Who were the inhabitants who died?
   What is the estimated number of deaths?

9. Which of the five flus resulted in the most deaths?

10. Which of the pandemics and the numbers do you find most interesting? Explain your response.
After the Pandemic

If history is any guide, not much will change in the wake of the covid-19 pandemic. During the influenza scourge of 1918, disorder was everywhere. As one American letter writer suggested, “The whole world seems up-side down.” Roughly 1 in 4 Americans caught the disease, and as many as 2.5 percent of them died. Almost half the fatalities were people between 20 and 40 years old — the very adults relied on as parents, breadwinners and leaders. Desperate to control the pandemic, public health officials prohibited public gatherings and closed schools, churches and other institutions. They even placed restrictions on funeral services: Many communities prohibited anyone other than adult members of the immediate family to attend, and the bodies of the deceased were routinely barred from being taken into churches or chapels.

When the pandemic subsided, people rushed to regain their sense of equilibrium and normalcy: While Americans had proved remarkably compliant with health officials’ initial demands, they were reluctant to keep those restrictions on their lives — even as many communities faced a subsequent wave of the illness.

Certain habits did change. Americans never returned to the common drinking cup, outlawed during the crisis and previously common in schools, offices and railway cars; they frowned on public spitting. Public health leaders celebrated their success in providing basic education on sanitation and personal hygiene. But the deaths of 675,000 Americans did not spur a remaking of the health-care system. Progressive era reformers had failed to create a national health insurance program, and despite the pandemic, their efforts withered in the 1920s.

As influenza ransacked their communities, many Americans clung to the familiar, adhering to established ways of doing things. Men and women faced pressure to respond to the pandemic according to gendered norms. In letters and diaries from the time, women openly discussed their fears and their experiences of loss; because they were assumed to be innately self-sacrificing and skilled at caregiving, women were called upon to be nurses. Men, meanwhile, were expected to exhibit only strength and stoicism; they expressed guilt and shame when illness required them to take to their beds. People of color continued to face segregated health care: Philadelphia opened emergency clinics for white residents but did nothing for its African American community. Eventually, a local black physician organized their care. In Richmond, African American patients could visit the new emergency hospital, but they were relegated to the basement until the staff secured another, separate space for their treatment.

The pandemic did not disturb the social and economic inequities it had made visible. And yet, while knowledge of the past is essential to understanding the present, history is rarely a reliable predictor of the future. We need not repeat the mistakes of those who came before.

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Think About It

How has life changed for different professions?

What changes have taken place in a doctor’s visit?
READ AN EXAMPLE

The Touring Life

I put an end to the after-show meet-and-greets on the last tour, in early March, when things started to get serious. It hit me after the first performance, as friends of friends all came backstage together and squeezed me into the middle of a squirmy little clique for 10 minutes of photos. Three weeks later, I'm still thinking, “If I get sick, I’ll know who to blame,” although surely that window has closed. I finished the tour on March 14 with nary a handshake or hug. Issues that had never been issues began to crystallize. My tour manager started obsessively wiping down my microphones with alcohol: before sound check, after sound check, before the show, after the show. No more salad bars for lunch, ever (particularly any like the one at the Southern casino several years ago that considered M&Ms a fruit).

As for signing albums and pictures and odd things people bring to me after shows, that tour manager keeps a platoon of Sharpies in his jacket pocket so I don’t have to borrow anyone’s pen. It feels selfish to stop autographing things altogether. I’ve always thought that if someone uses their discretionary income to buy something I made, and they ask me to sign it, it is the gracious thing to do, but alcohol-wiping album covers is not a bad idea.

One venue put a sign on my dressing room door warning everyone but the cleaning crew to stay out, which was reassuring. I started looking at the open bowls of nuts and chips and guacamole in the green room as if they were petri dishes of proto-virus. After this is over, I will totally rewrite the tour rider to ban open bowls of food.

All those things seem like the granular view of the overprivileged. I freely admit I have that, and I am that. But I’m also on the board of the Artist Rights Alliance, which is focused on the dire circumstances many middle-income and already struggling musicians find themselves in, thanks to canceled tours, festivals and recording sessions, as well as shuttered music classes, where many musicians supplement their income by teaching. If the federal government offers assistance, we hope musicians and performers will be included.

I can’t help thinking there is a Darwinian reset taking place, but it remains to be seen what evolutionary advantage is paramount — a sense of community and compassion, I hope. Performers become screens on which people project their needs, and perhaps the reflection we offer can be more “us” and less “me.”

At the same time, I’ll envision a future on the road minus photo bombs and green room petri-snacks.

Rosanne Cash
@rosannecash, a Grammy Award-winning singer and songwriter, has released 15 albums. She is the author of “Composed: A Memoir.”
YOUR ASSIGNMENT

Think about the changes that have taken place in your life, that of the families in your community and around the globe.

How do you think these might change or modify the way we do things or our culture might change?

Write a personal essay of 300-500 words. Be sure to include examples as Rosanne Cash did in her essay. In a personal essay you can use the first person and be friendly in tone.