

POLICY BRIEF

COVID killed, but so did the response

When stopping the spread of the COVID virus mattered most, Washington state officials failed badly

Todd Myers, Director, Center for the Environment

August 2021

Key Findings

- 1. State mortality data show that the governor's restrictions may have increased the number of deaths by 50% during the COVID pandemic.
- 2. While some lock-down requirements may have helped, they were not as meaningful as has been claimed, and states that imposed fewer restrictions had lower per-capita death rates.
- 3. The strict lock-down restrictions imposed a health cost of their own, with state data showing that for every two deaths from COVID, there was an additional excess death not caused by COVID.
- 4. Since the start of the pandemic, the Inslee Administration consistently failed to meet its own goals to contain the spread of the coronavirus.
- 5. Despite announcing that "more testing" was key to limiting COVID, state testing rates actually declined three months into the pandemic.
- 6. As COVID cases spiked in November 2020, the state contact tracing program collapsed, achieving less than 10 percent of its own goal.
- 7. With each new failure, state officials were consistently in denial, claiming they were doing "better than expected," saying the poor numbers were "actually quite encouraging," or claiming their own numbers were wrong.
- 8. The consistent pattern of failure and denial by state officials is a clear lesson that in future crises, more responsibility and faith should be put in the hands of the people, since the public directly pays the price for the repeated failures of state politicians.



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- 3 Introduction
- 4 Section 1 The hidden health cost of COVID lock-down restrictions
- 5 The mixed data on economic lock-downs and the mask order
- 6 Section 2 State agencies missed self-imposed targets for testing, contact tracing, and vaccinations, while the Inslee Administration consistently denied the failures, even calling the poor performance, "encouraging"
- 7 COVID Testing
- 8 Contact tracing
- 10 Vaccine rollout
- 11 Conclusion

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Introduction

After 15 months of using emergency orders to impose COVID-related restrictions, Washington state Governor Inslee reduced some – but not all – of the controls intended to stop the spread of the illness. The governor claimed success, naturally, highlighting the one statistic he feels vindicates his dictates: the COVID per capita death rate. Washington has one of the lowest per capita COVID mortality rates in the country.

However, examining the overall data shows the state's role in keeping the COVID-related death rate low was very small. Indeed, most of the state's actions to fight COVID were incompetently administered, as measured by the state's own metrics. And the harsh restrictions imposed by the state likely increased the overall death toll.

Low COVID mortality rates in Washington state are primarily a result of positive actions by individuals. The governor himself acknowledged this when rates increased in certain parts of the state. When that happened he admonished citizens for being unsafe, blaming them, not his own policies, for the negative health trend. At times and in places where rates were low or falling, on the other hand, he has taken the credit for the positive results.

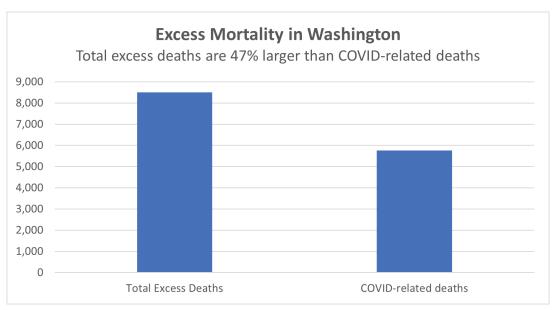
The governor's claim that he should get credit for the low death rate is reminiscent of a comment by former Chicago Bulls basketball center Stacey King on a night when teammate Michael Jordan scored a playoff record sixty-nine points in one game. King told reporters, "I will always remember this as the night that Michael Jordan and I combined to score seventy points." Despite the poor performance of state agencies and the restrictions, the governor attempted to claim the public's success as his own.

In this Policy Brief, I will look at the data from the first 15 months of the governor's emergency rule to measure the impact of the illness, the lock-down restrictions, and the actual results of government policy. In the first section, I examine the governor's claims of success. In the second section I examine that state's failures, based on its own announced goals, in the areas of testing, contact tracing and vaccine distribution.

Section 1 – The hidden health cost of COVID lock-down restrictions

While the public's focus has (understandably) been on COVID-related deaths, there has also been a high, and largely unnoticed, health cost imposed by the lockdown restrictions.

The direct toll of COVID has been significant and serious. The federal Centers for Disease Control (CDC) reports that 5,902 people in Washington died from the illness from early 2020 through June 27, 2021. Many others continue to suffer from health problems even after recovery.



Source: National Center for Health Statistics, Centers for Disease Control and Prevention (CDC)

Excess mortality data back up that finding.² There is a regular yearly pattern to mortality, with the number of yearly deaths declining in the summer and increasing in the winter. That pattern was broken in 2020, with a large increase in the number of deaths in March and April 2020. The total number of deaths remained well above the average of recent years each month as 2020 progressed.

Based on the average of 2017-19, there are about 57,113 deaths annually in Washington state. In 2020, there were 62,553 total deaths, about 5,440 more than usual. From January 1 through May 29, 2021 there were an additional 3,061 excess deaths, for a total of 8,501 excess deaths during 2020 and the early months of 2021.

According to the CDC, only 5,765 of those are COVID-related. In other words, there were about 2,736 more deaths than usual that were not directly related to COVID. The cause of those additional deaths is unclear, but they indicate there was a significant health cost to the changes experienced during the past year.

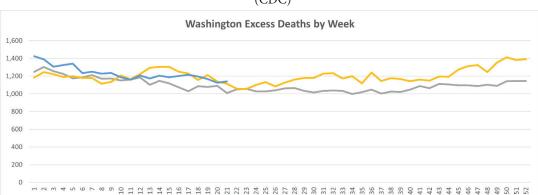
^{1 &}quot;Weekly provisional counts of deaths by state and select causes, 2020-21," National Center for Health Statistics, Centers for Disease Control and Prevention (CDC), June 27, 2021, at https://data.cdc.gov/NCHS/Weekly-Provisional-Counts-of-Deaths-by-State-and-S/muzy-jte6.

² Ibid.

In other words, for every two COVID-related deaths, COVID-related lock-down restrictions contributed to an additional death.

When considering the record of the government response in Washington state, we should not ignore the cost paid by the 2,700 people who died not of COVID, but of the larger impacts of the social and policy response to COVID.

Finally, these numbers do not include the heavy economic costs paid by many people in the state. Those impacts are more subjective and difficult to quantify, but they are very real and should not be forgotten.



Source: National Center for Health Statistics, Centers for Disease Control and Prevention (CDC)

The mixed data on economic lock-downs and the mask order

The governor is unlikely to acknowledge larger excess-death impact of his policies and will likely continue to focus narrowly on COVID-related deaths. According to CDC data, Washington has had one of the lower death rates in the country, at 79 COVID-related deaths per 100,000 people.³ This is lower than the national level of 181 deaths per 100,000, California's level of 159 deaths per 100,000, and New Jersey's rate of 298 COVID deaths per 100,000 people.

Washington's COVID-death rate, however, is higher than Utah's, which had only 74 deaths per 100,000, and Oregon's, with 66 deaths per 100,000.

When asked why Washington was able to achieve this relatively low level of COVID-deaths, the governor made vague reference to his decisions, citing his strict lock-downs and mask requirements.

That claim does not hold up to even cursory scrutiny. For example, although Washington state had the first COVID cases, it was the 14th state to issue a stayat-home order.⁴ California, where the death rate was nearly twice as high as

^{3 &}quot;Trends in number of COVID-19 cases and deaths in the U.S. reported to CDC, by state/territory," Centers for Disease Control and Prevention (CDC), June 27, 2021, at https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases.

^{4 &}quot;First day of stay at home order in the United States," Time and Date.com, June 2021, at https://www.timeanddate.com/holidays/us/lockdown-day-1.

Washington's, was first. New Jersey, where the death rate was the highest in the country, was third. Utah, with a lower death rate than Washington's, was 26th.

The same pattern is true of mask requirements. Washington issued a mask order to take effect on June 26, 2020.⁵ This was later than at least 16 other states, including New Jersey and California, both of which had much higher death rates.⁶ It was much earlier than Utah, which did not impose a mask mandate until November 2020, and which ended it in April of 2021.

Whatever benefits the lock-down orders and mask requirements may have provided, their positive impact is not definitive. Washington state was behind many other states in imposing the restrictions. Utah was very late in imposing the restrictions but had a lower mortality rate than Washington.

We can speculate about why Washington has had a relatively low rate of COVID deaths. There are clearly more real-world forces at work than the top-down restrictions most often cited by the governor.

In the following sections I examine the policy factors the state most directly controlled, including COVID testing, contact tracing, and the vaccine rollout. In each of these areas, official data shows the state's performance was abysmal, performing far worse than the state's own metrics and the public health outcomes in neighboring states.

Section 2 – State agencies missed self-imposed targets for testing, contact tracing, and vaccinations, while the Inslee Administration consistently denied the failures, even calling the poor performance, "encouraging"

As noted, any positive effect of the lock-downs and mask requirements, while not zero, was primarily due to personal efforts, not government mandates. Throughout the pandemic, people made personal choices to self-quarantine, or to go out in public to work, visit friends, or join mass protest marches, based on their own assessment of health risk.

However, there are three areas in which state government and the Washington State Department of Health (DOH) played the key role; testing, contact tracing, and vaccine distribution. All three of these activities were important in finding and containing the spread of the coronavirus. In all three areas, the performance of the state was abysmal, even by its own standards.

The repeated failure of state government and the Inslee Administration to do the jobs it claimed were important is another lesson showing that when a state faces serious problems, it is the people, not government officials, who can be most relied on.

^{5 &}quot;Inslee announces statewide mask mandate - facial coverings will be mandatory statewide," Office of the Governor, Washington state, June 23, 2020, at https://www.governor.wa.gov/news-media/inslee-announces-statewide-mask-mandate.

^{6 &}quot;State-level mask requirements in response to the coronavirus (COVID-19) pandemic, 2020-21," Ballotpedia, June 27, 2021, at https://ballotpedia.org/State-level_mask_requirements_in_response_to_the_coronavirus_(COVID-19)_pandemic,_2020-2021.

In the following sections, using public sources, I report on the three key public health areas in which Washington's leaders badly under-performed.

COVID Testing

Early in the pandemic, state officials struggled to discover the extent of the spread of the virus. The delay between infection and the first noticeable symptoms of COVID meant people could unintentionally spread the illness. Testing was a critical part of finding those who were infected, treating them, and reducing further spread.

The University of Washington's Institute for Disease Modeling, on which the governor says he relied for science advice about containing the virus, said "faster and more testing" was extremely effective at reducing the spread of COVID and in allowing a greater level of economic re-opening.⁷ Unfortunately, that sound advice did not translate into improved testing rates.

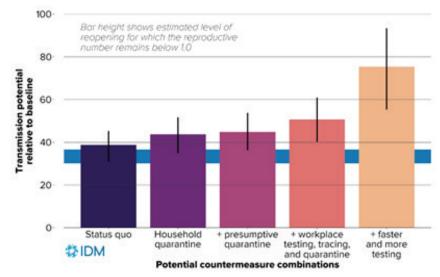
By the end of May 2020, three months after the first COVID cases were discovered in Washington, testing rates were at the same level they had been at the end of April. Despite the failure, the Inslee Administration was in denial.⁸ When a reporter from *The Olympian* newspaper asked in early May about the low test numbers, an Inslee spokesman claimed the testing rate was "roughly similar," even as their own data showed the rate of testing was actually declining.⁹

Later in May 2020, Governor Inslee claimed the state was completing 8,000 daily tests when the true number was about 5,000. Then-Health Secretary John Weisman claimed testing was increasing even as it was declining. Rather than acknowledging the problem and work to fix it, the administration denied it even existed.

^{7 &}quot;COVID-19 reports for coronavirus information," Institute for Disease Modeling, University of Washington, June 2021, at https://www.idmod.org/.

^{8 &}quot;Washington's COVID-19 testing collapses and governor abandons his 'dials' after just one month, by Todd Myers, Washington Policy Center, June 5, 2020, at https://www.washingtonpolicy.org/publications/detail/washingtons-covid-19-testing-collapses-and-governor-abandons-his-dials-after-just-one-month.

^{9 &}quot;COVID-19 testing isn't increasing even as the state says it needs more to reopen economy," by James Drew, *The Olympian*, May 25, 2020, at https://www.theolympian.com/news/coronavirus/article242924196.html.



Source: Institute for Disease Modeling, University of Washington

The testing rates were poor even by the state's own metrics. Department of Health officials set a goal to test 50 people for every new COVID case, posting the information on their online dashboard. At the beginning of June 2020, they were testing only 19.5 people per new case, less than half of their announced goal.

Testing finally began to increase in mid-June, but by that point the virus had spread widely and the state's testing program was playing catch up. The number of cases began to increase in late May and the testing ended up simply documenting the summer case spike, rather than playing a role in preventing it.¹⁰

Contact tracing

Like testing, contact tracing is a tool the state can use to identify those who may have been infected, helping them limit contact and stop the spread of the illness. Describing the value of contact tracing, Amy Maxmen, senior reporter at the science journal Nature, told the BBC that with accurate tracing when government officials say, "Let's everybody shut down all businesses, shut down the schools, instead they're able to really target their approach." That targeted approach didn't happen in Washington.

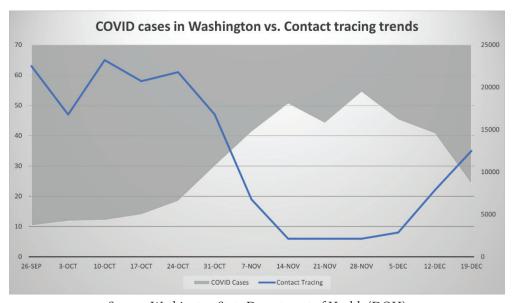
Acknowledging the potential value of tracing, state DOH officials set a target of reaching 90 percent of people with a positive COVID test within one day. That would allow DOH to identify others with whom the infected patient came in contact and alert them. Even when case rates were low, the state consistently fell well short of that goal, briefly reaching a maximum of 65 percent. As the number of cases increased rapidly in November 2020, that number plummeted.

[&]quot;Compare trends in COVID-19 cases and deaths in the U.S.," COVID Data Tracker, Centers for Disease Control and Prevention (CDC), June 2021, at https://covid.cdc.gov/covid-datatracker/#compare-trends_newcases.

^{11 &}quot;Behind the Stats, Tracking COVID-19," More or Less Show, The BBC, broadcast November 28, 2020, at https://www.bbc.co.uk/sounds/play/p08zt262.

In late November when the state struggled to contain another wave of the illness, DOH reached only six percent of people who tested positive. The problem wasn't that people didn't respond. Indeed, more than half of people who were called were reached within 24 hours. The problem was DOH was only attempting to reach 12 percent of COVID-positive patients.

At a time when contact tracing was needed most – when case rates were exploding around the state – the DOH program collapsed. With the failure of contact tracing to control the spread, Governor Inslee again put the state into economic lock-down in November.¹²



Source: Washington State Department of Health (DOH)

What was the agency's public response to their own failure? In early December, when DOH was reaching fewer than 10 percent of people with positive COVID tests, officials told *The News Tribune* they were doing "better than expected." ¹³

Contract tracing rates began to rebound in mid-December, but by that time the number of cases had been falling for weeks. When the state effort was needed most, it failed.

The state did attempt one unique strategy that proved to be worthwhile. A voluntary COVID-tracing app allowed people to be notified if they had been in the vicinity of someone who had tested positive. I was one of the few people who praised the idea and I used the app myself. 14

^{12 &}quot;Rollback of county phased reopening," Proclamations by the Governor, Office of the Governor, Washington state, November 15, 2020, at https://www.governor.wa.gov/sites/default/files/proclamations/proc_20-25.8.pdf.

^{13 &}quot;As COVID-19 cases surge in Washington, case investigations and contact tracing overwhelmed," by Debbie Cockrell and Craig Sailor, *The News Tribune*, December 5, 2020, at https://www.thenewstribune.com/news/coronavirus/article247554750.html.

¹⁴ WA Notify – Say What?" by Sue Lani Madsen, *The Spokesman-Review*, December 17, 2020, at https://www.spokesman.com/stories/2020/dec/17/sue-lane-madsen-wa-notify-say-what/.

Many worried about their medical privacy and did not use it. That is not the state's fault, and I still think it was worth trying, even if it didn't work as hoped. In a pandemic, it makes sense to try a variety of voluntary strategies because the cost of involuntary lock-downs is so extreme.

In the end, there is no substitute for officials simply doing the basic work of contacting people, and DOH failed badly, both objectively and according to its own announced goals.

Vaccine rollout

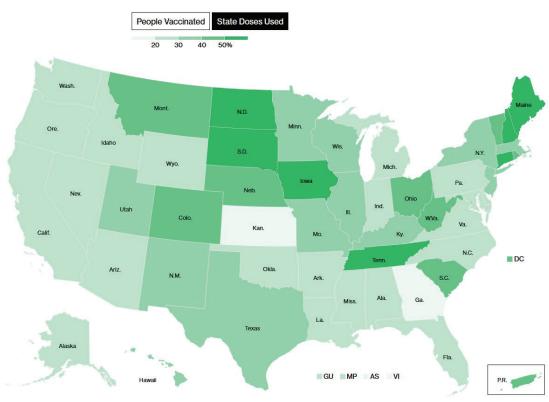
By April 15, 2021 most states had opened free vaccination up to everyone. In contrast, Washington's vaccine rollout was plagued by politics, bad planning, and self-delusion that put the state well behind most of the country for months.

The problems began immediately. On December 2, 2020 when asked about distribution of the vaccine, Governor Inslee told MSNBC, "We are in good shape on that distribution plan." When the vaccines arrived, however, it was clear the state was not ready.¹⁵

In December 2020, hundreds of thousands of doses were delivered to Washington state. By the end of the year only about 20 percent of those doses had been distributed. On January 5, 2021, according to the Bloomberg Vaccine Tracker, Washington ranked 43rd in the nation in the percentage of doses administered. When asked about the failure to distribute the shots, the governor said he thought it was "actually quite encouraging."

^{15 &}quot;Gov. Inslee talks vaccine distribution: Things are on a safe, timely track," NBC Universal, Yahoo! News, December 2, 2020, at https://news.yahoo.com/gov-inslee-talks-vaccine-distribution-195042610.html.

^{16 &}quot;Health Department: 356,650 coronavirus vaccine doses delivered to Washington state, but most have yet to find an arm," by Evan Bush, *The Seattle Times*, December 30, 2020, at https://www.seattletimes.com/seattle-news/health-department-356650-vaccine-doses-delivered-but-most-have-yet-to-find-an-arm/.



Source: Bloomberg Vaccine Tracker, Bloomberg News

By mid-February, Washington was still lagging, and *The Seattle Times* noted, "After two months and more than a million doses administered, the state has struggled to vaccinate some of the people at highest risk for disease." ¹⁷

Rather than focus on logistics, officials at DOH, "...agonized over which residents should be vaccinated before others. They surveyed 18,000 people and convened focus groups, debating race, age and essential occupations." ¹⁸

Late in January, Washington state announced a partnership with Starbucks, Microsoft, and Costco to help distribute vaccines. With the logistical support of these private companies, the rate of distribution finally increased.¹⁹

Conclusion

These three essential policy areas were the sole responsibility of state government. In each case, state officials, including the governor, highlighted the importance of these efforts and set targets for success. And every time, they failed badly.

[&]quot;Washington state's COVID-19 vaccine planning fell short on logistics, sowing disorder and mistrust," by Mike Reicher and Evan Bush, *The Seattle Times*, February 21, 2021, at https://www.seattletimes.com/seattle-news/times-watchdog/washingtons-vaccine-planning-fell-short-on-logistics-creating-chaos-and-mistrust/.

¹⁸ Ibid

[&]quot;Washington state partners with Starbucks, Microsoft, Costco on vaccine efforts," by Mary Louise Kelly, National Public Radio, January 22, 2021, at https://www.npr. org/2021/01/22/959700088/washington-state-partners-with-starbucks-microsoft-costco-on-vaccine-efforts.

Further, the data shows that a policy of strict lock-downs contributed to the excess mortality rate of about one excess death for every COVID-related death, or an increase in the number of deaths by 50% during the COVID pandemic.

The people of Washington performed well in the pandemic, taking voluntary precautions that limited the spread of the coronavirus and keeping the economy going as best they could under difficult circumstances. It is not surprising that politicians would grasp at claiming success for the sacrifices made by others. The record of government performance during the last year and a half, however, demonstrates that when there was a job to do and help was desperately needed to control the spread of the virus, state leadership and state agencies weren't up to the task.

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