

White House coronavirus task force labels Washington, D.C. area a hot spot as region begins reopening

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On Friday, Dr. Deborah Birx, the top coordinator of the White House's coronavirus task force, cited the Washington, D.C. area as one of the current centers for the spread of COVID-19 in the United States.

"There is still significant virus circulating here," Birx stated at a press conference Friday. "Even though Washington has remained closed, [Los Angeles] has remained closed, Chicago has remained closed, we still see these ongoing cases." Birx stated that the Centers for Disease Control and Prevention (CDC) would be looking into "where these cases are coming from and what do we need to do to prevent them in the future."

On Sunday, jurisdictions in Maryland, Virginia and the District reported a total number of cases as surpassing 89,000, with an overnight increase of 1,943 COVID-19 infections from Friday to Saturday. Maryland, which reported the first case of COVID-19 among the three jurisdictions in March, has recorded over 46,000 infections; Virginia has reported 36,244 and Washington D.C. has reported over 8,000 cases. Over 3,800 people in the region have died from the infection as of Sunday.

On Thursday, the day before Birx spoke, the District of Columbia, Maryland and Virginia recorded a sum total of 2,674 new cases, the third highest daily amount the region has seen in the 3 months since the virus was detected in the area.

Birx's latest announcement comes as the Mid-Atlantic region has reported a constant increase of COVID-19 cases. Despite this, public officials have announced plans for and, in Maryland and Virginia's case, begun re-opening their economies.

The statement came a week after regional governments began enacting "stage one" of their

reopening plans. Last week, the governments of Virginia and Maryland allowed for the partial reopening of nonessential business and dining. At the time, the states allowed highly infected centers to remain closed, citing the high concentration of COVID-19 in the Washington, D.C. suburbs, in particular.

Despite the growing number of infections, this week officials in Maryland's Prince George's and Montgomery counties, two of the state's epicenters for COVID-19, announced they would begin reopening within days. On Wednesday, the office of Montgomery County Executive Marc Elrich, a Democrat, announced that the county could begin easing restrictions within a week, noting that the county had begun seeing a decline in new cases. As of Sunday, Montgomery County had 9,699 cases, nearly a quarter of the state's total amount.

On Friday, Prince George's County Executive, Democrat Angela Alsobrooks, announced a June 1 reopening. Prince George's County, lying to the east of the District, has seen some of the most catastrophic infection rates in the country. In April, the county recorded a 41 percent positive infection rate among residents who had been tested. Last week, the numbers were slightly less, standing at 28 percent.

Baltimore County, which borders the city of Baltimore, announced Thursday evening that it would allow beauty parlors and some retail businesses to begin reopening on Friday morning.

The literal overnight decision even took small business owners by surprise. "We thought Baltimore County was going to stick to its word and not have us open for a few more weeks... We just cannot open our doors tomorrow morning," business owner Teresa

Blatchley told the *Washington Post*. Baltimore County has seen over 5,000 infections and was included in the areas allowed to remain closed during the initial stages of Republican Governor Larry Hogan's decision to begin reopening the state.

The decision to reopen comes after numerous medical experts have advised caution. Prior to the initial reopening of businesses, Johns Hopkins University's School of Medicine director Dr. Gabe Kelen told the *Post* that he was predicting a "new spike... three to six weeks after everything opens up." These and other warnings have been willfully ignored.

Throughout the Memorial Day weekend, news media reported seeing crowds of sightseers and tourists at popular destinations. A CBS news reporter showed footage of crowds along Ocean City's downtown boardwalk, with little social distancing or face coverings seen.

In Virginia, which also began reopening March 15, the Democratic Governor Ralph Northam has sought to require local municipalities still sheltering in place to coordinate their reopening. Such symbolic gestures have little substance as the majority of the state has already begun reopening.

Last week, Levar Stoney, the Democratic mayor of the state capital Richmond, sent a letter to the governor pleading that he make a requirement of the wearing of facial masks in public. "We're asking the governor to mandate the wearing of face masks consistent with CDC recommendations," said Stoney's spokesperson of the letter. The Richmond official noted that local businesses were seeing far fewer people with masks on, despite the city still having a shelter-in-place order. Leaders of several local unions have also separately urged Northam to make the same designation for wearing masks.

For its part, the Washington, D.C. government of Democratic mayor Muriel E. Bowser announced plans this week to begin allowing nonessential bookstores and education retailers to begin reopening with restrictions and for curbside service. Bowser issued these permissions despite having recently announced plans to extend the city's stay-at-home order until June 8. The District has closed its schools for the remainder of the academic year, with the possibility of courses starting in August if the city has completed its "phase one" of reopening.

State officials and media commentators have consistently seized upon the decline of hospitalization throughout the region as a "key metric" for reopening, despite the clear inaccuracies of such a standard.

Related to this push is the effort to frame the rising number of COVID-19 cases in a positive light. News reports of record numbers of infections are routinely accompanied by comments noting such findings are due to increased diagnostic testing in the region. The implication of these statements is that it is not the disease that is spreading, just the authorities' ability to track it.

Even if such an argument were true, the jurisdictions of Maryland, Virginia and the District of Columbia have not come anywhere near the required number of daily tests to make reopening a possibility. Virginia previously set the daily goal for adequate testing at 10,000 but has routinely hovered at around half of that throughout the month of May. Maryland, which has set a similar goal for itself, has also failed to deliver on an adequate number of tests and a system for tracing contacts.

The lag in testing is not due to a lack of demand. Throughout the week, numerous free testing sites, set up only days earlier, reported having to close their doors earlier than expected due to the overwhelming demand for a diagnosis. "While people who have symptoms are a priority, everyone is welcome at testing events as long as there are tests available," Governor Northam stated last week.



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