

RETURN TO NORMAL: Getting Our States Back to Work Quickly and Safely

By AnneMarie Schieber

INTRODUCTION

It is imperative that states reopen their economies before damage from the massive shutdowns becomes intractable. As President Donald Trump acknowledged in April, there is no net benefit in making the cure worse than the disease.

By adhering to the set of reasonable principles outlined in this document, states can get their citizens back to work safely. With safeguards in place, the nation can manage the invisible threat of coronavirus and restore the public's confidence. Work and free enterprise will fill store shelves and supply much-needed services. There is pent-up demand. Work is the backbone of wealth, and without prosperity, the nation jeopardizes its chances of fighting off the next threat. Without prosperity, there will be pain and hardship, and the damage to economic stability and well-being will only increase the already-rising public unrest and lead to a powerful undermining of the legitimacy of governments.

The federal government has injected trillions of dollars into the economy, which is itself a risk, so this is no time to sit in the trenches and create arbitrary bench-

marks regarding public safety. Life inherently involves risks; it is impossible to grow economies without making tradeoffs. States and individual communities are in the best position to determine this calculation because they are closest to the needs and capabilities of their citizens.

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1. Acknowledging the Knowledge Problem

The Austrian economist Fredrick Hayek put it best: “The economic problem of society is thus not merely a problem of how to allocate ‘given’ resources—if ‘given’ is taken to mean given to a single mind which deliberately solves the problem set by these ‘data.’ It is rather a problem of how to secure the best use of resources known to any of the members of society, for ends whose relative importance only these individuals know. Or, to put it

briefly, it is a problem of the utilization of knowledge which is not given to anyone in its totality.”

In other words, knowledge is decentralized. Decisions are best made by those closest to the problem. Top-down approaches such as banning certain activities with little regard to individual circumstances create contempt for government. It is far easier to inspire citi-

zens than to coerce them, and the nation’s Constitution wisely limits the power of government to command the public without due process.

2. Setting Priorities

The Heartland Institute consulted with dozens of health experts and economists to provide guidance to state and federal lawmakers on the best practices for reopening their economies while protecting public health. This brief paper presents their conclusions.

Instead of arbitrarily determining what business are “essential” and allowed to stay open, Michigan’s House Speaker Lee Chatfield says states are better off determining what is safe and what’s not safe. “Everybody in Michigan is essential, so let’s start thinking safety first and adjusting our strategy,” Chatfield wrote in the *Detroit News* on April 11. Social distancing, wearing masks, and discouraging crowds will be “small asks” that can go a long way toward keeping the public safe.

The federal government has recognized the best approach to fighting COVID-19 is a decentralized one. The Trump administration has released a [three-part plan](#) for easing lockdowns, based on 14-day downward trends and allowing individual states and their communities to monitor progress. The plan offers guidelines for individuals, employers, and employers with special circumstances, such as gyms, bars, senior facilities, and hospitals. [The Centers for Disease Control and Prevention](#) also offer guidelines.

3. Assessing All the Risks

Michigan is considering a plan that groups counties into three risk tiers. As of April 20, 88 percent of the

state’s deaths and 77 percent of confirmed cases occurred in three metro Detroit counties. Hard-hit areas would be grouped in one tier and would reopen more slowly than other parts of the state. There is also a plan to base openings on case and hospital data.

One concern is residents may unwittingly spread the virus by leaving locked-down areas to travel to less-restricted places. Michigan is working with seven nearby states to monitor whether this becomes a problem.

The Michigan approach is worth watching and could serve as an important illustration for other states.

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Legislators should also consider the effectiveness of limiting crowds, says Dr. Marilyn Singleton, M.D., J.D, a board-certified anesthesiologist and past president of the Association of American Physicians and Surgeons. “Sweden has no more deaths or symptomatic infections per capita than many other countries despite choosing to merely encourage its citizens to physical distance as much as possible,” wrote Singleton in an [April 15 commentary](#) on The Heartland Institute’s website.

Protracted lockdowns can cause untold damage, Singleton says.

“A classic 1979 study found that for every 10 percent increase in the unemployment rate, mortality increased by 1.2 percent, cardiovascular disease by 1.7 percent, cirrhosis of the liver by 1.3 percent, suicides by 1.7 percent, arrests by 4 percent, and reported assaults by 0.8 percent,” wrote Singleton. “Pre-pandemic, nearly 20 people per minute were physically abused by an intimate partner in the United States. Predictably, episodes of domestic violence and child abuse have now increased. Closed businesses have become easy targets for thieves.”

Mass transit presents a special challenge. In many cit-

ies, buses are not generally packed, but in large cities, trains and subways are often heavily crowded. Airlines have tightened seating space. Transit authorities may have to make changes, says Philip Eskew, D.O., J.D., and founder of DPC Frontier.

“I think that for many years to come—maybe permanently—the entire world will try to redesign public transportation and spaces in a way that keeps greater social distances between people,” said Eskew. “You might pay more for that airline ticket, and you might have more leg room, with a complimentary mask for your flight, if COVID-19 lingers and immunity is brief rather than lifelong—as is the case with many other coronaviruses—and if a vaccine is not as effective as desired or simply not effective at all.”

4. Testing and Protecting the Most Vulnerable

The best policy for states is to pay attention to vulnerable individuals, many of whom live, work, and socialize in group settings.

“Remember, aside from those people, an infection by this virus is either mildly symptomatic, asymptomatic, or can make you very ill for a week or two but not fatal,” wrote Cato Institute Fellow Jeffrey Singer, M.D. “The states should make every effort to ramp up testing, including antibody testing—which can tell us if people are immune—and put resources into contact tracing.”

Testing could involve its own challenges apart from the issue of capacity. The Trump plan is based on two-week benchmarks. This presents concerns, says Heartland Institute Policy Advisor Chad Savage, M.D. “One caution about using a decreasing number of reported

cases for two weeks as criteria for starting phase 1 of opening the economy is it makes the false assumption that testing was equally available at various time points. It has not been. Therefore, if testing becomes more widely available, we will detect more cases, ruining those graphs as an indicator of response, even if the number of cases is not increasing.”

For that reason, Savage says, it is better to use hospital admission rates as a measure going forward. It is important to note that preventing the overburdening of hospitals was the primary reason for imposing extreme measures to flatten the curve of the spread of the disease.

Treatment is another area where states could help people on the front lines respond quicker. Jane Orient, M.D., president of Physicians for Civil Defense, says because so much is unknown about this new virus, it is important that physicians be able to treat patients on a case-by-case basis

and without government mandates beyond the usual safety requirements that apply to all situations. “States should not second-guess medical practice,” said Orient. “Some physicians will be experimental, but there is no textbook, and we should not put too much faith in a vaccine.”

5. Getting (Re)Started

COVID-19 has presented a new threat with no play-book. It is useful to remember the words of General George S. Patton: “A good plan violently executed now is better than a perfect plan next week.” The country needs to get back to work so we can restart our economy and reduce the damaging effects of the long, national shutdown.

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RECOMMENDATIONS

To give lawmakers support in reopening their economies, we offer the following advice and guidelines recommended by experts consulted by The Heartland Institute:

1. Be Realistic

The virus will not go away until we reach herd immunity from infection or vaccination, which could take months to nearly a year and a half. People will get sick. Governments need to be prepared for that fact and not base their reopening decisions on an unrealistic goal of perfection.

2. Concentrate on Problem Areas

If statewide shutdowns were ever justifiable, it is clear that they are no longer so. States should lift the stay-at-home orders immediately for all areas not clearly requiring quarantine. The economic—and hence public health—damage done by these statewide bans on “nonessential” activities is far greater than what the shutdowns could possibly accomplish going forward.

Statewide shutdown rules are of dubious constitutionality, at best, and they further undermine the public’s trust in government, which has been declining for years.

3. Avoid Orders That Are Impossible to Enforce

The rising protest movement across the nation shows that the public no longer accepts governments’ claims about the public health implications of these shut-

downs. States should acknowledge that reality and remove all shelter-in-place orders in areas not subject to clearly justifiable quarantine measures.

States and municipalities do not have the resources, much less the authority, to question each and every motive behind an individual’s actions. Let people use their best judgment in getting back out on the streets and into stores, restaurants, and other places that used to be open to the public.

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4. Monitor and Regulate on the County Level

Monitor the incidence of coronavirus on the county level. Reopen counties where the incidence of the disease has been shown to be of no great danger to the public health—the vast majority of counties in most states.

5. Monitor Hospital Capacity

Ramped-up testing will undoubtedly reveal more cases of infection, but not all individuals will require hospitalized care. Economic shutdowns should be warranted *only* if hospitals have reached or exceeded capacity. States should monitor for accurate recordkeeping: Are COVID deaths confirmed as being caused by the virus or by other factors?

6. Protect Especially Vulnerable Populations

People have a right to determine the level of risk they are willing to accept, but those confined to care facilities are often impacted by the choices of others. Facilities such as assisted-living establishments should create designated visiting areas for residents, test workers for antibodies and the coronavirus, and prevent staff from working at multiple facilities.

Such restrictions were already on the books in most states before the coronavirus hit. Blanket coronavirus shutdown rules that place other businesses and establishments under these restrictions should be removed.

7. Judiciously Limit Crowds

In a crisis, it is justifiable for governments to limit crowds, other than assemblies regarding the government itself, which is unconstitutional. But this authority should be applied judiciously to ensure that the public health rewards are a net positive based on the economic damage that such rules have already imposed and will continue to impose if left in place.

Places open to the public should allow enough room for individuals to be spaced at least six feet apart. In restaurants, drinks should be served at tables, not bars. Governments should allow businesses and their customers to enforce these rules, instead of turning the public into a mass of government informers.

Public disturbances are already illegal nearly everywhere, so resolving disturbances caused by disputes over social distancing is currently justified under laws regarding keeping the peace. Rules specific to the current crisis are redundant and/or excessive and should be removed immediately.

8. Let Employers and Workers Manage Remote Work

Governments should let individual employers and employees decide what is best for keeping workers safe. Employers were already taking steps before states started imposing shelter-in-place orders, and they will

continue to do so for a variety of reasons, including public health and protection against liability.

Jeff Singer, M.D., of the Cato Institute told us, “There is no reason to believe if governors take their foot off the necks of their residents that people and businesses will suddenly be careless.”

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9. Make Contact Tracing Voluntary

During the AIDS epidemic, in the interest of privacy, patients were not added to a public database. States and the federal government should follow that commonsense and constitutionally sound approach in the current situation.

10. Reopen Public Parks

Parks are a vital source of recreation and instrumental to good mental and physical health. Plus, they provide plenty of outdoor space that allows isolation, which is important because studies confirm that COVID-19 dissipates rapidly in the outdoors, especially if there is wind.

Park staff should monitor for large crowds and use signage to warn visitors. They may also use bullhorns to break large gatherings that may occur, but draconian bans on the public use of parks and other nature areas are counterproductive in forcing people to stay inside, where disease transfer is common.

11. Reopen Hospitals and Doctors’ Offices

Elective surgery and other important health care procedures should resume as soon as possible in all areas not subject to quarantines (such as New York City), as should visits to physicians and dental offices. Health care providers should be properly advised and held re-

sponsible for using proper protection to help limit the spread of the virus.

12. Let Physicians Treat Their Patients

Elected officials should accept that licensed physicians are working in the best interests of all patients. Doctors and other health care professionals are on the frontlines of the fight against coronavirus and must be allowed to do whatever works best in restoring their patients to health. Coronavirus-specific mandates on individual treatment should be lifted so that physicians—America’s health care experts—can make the decisions they believe to be best for their patients and the public. Government should not interfere with treatment and prescribing practices already recognized by law.

13. Reopen Mass Transit Judiciously

Public transportation can be a breeding ground for disease, but that also makes it a good source of herd immunity.

Governments should reopen public transportation only in areas where coronavirus incidence is low and should allow the reopening of public transportation entities in problem areas only if they are implementing necessary precautions.

Airlines, trains, buses, and the like should allow the public an option to leave middle seats open.

14. Consider Reopening Schools

School-age children are relatively unaffected by the virus. Lawmakers should recognize that the costs of keeping children at home likely exceed public health benefits. School shutdowns create a severe hardship for working parents and impede children’s social and cognitive development.

15. Recognize the Limits of Testing

States should recognize the current limitations of testing. Until more testing is available, testing requirements should be limited to health care workers and individuals exhibiting symptoms. Antibody testing will be useful for epidemiological purposes, specifically in determining herd immunity. These tests are easy, quick, and rapidly arriving on the market. Once more tests become available, testing should be as widespread as possible.

The duration of immunity is unknown at this point, so monitoring is well-advised. Governments can help by rewarding health care providers for doing so. Serological testing can also give individuals information regarding the risk level of their return to public activity.

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Note: Advisors are not responsible for the factual statements and conclusions in this document, except where quoted directly. We are grateful to them for their participation.



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About The Heartland Institute

Mission: Founded in 1984, **The Heartland Institute** is an independent, national, nonprofit research organization. Our mission is to discover, develop, and promote free-market solutions to social and economic problems.

Personnel: We have a full-time **staff greater than 25**, including 13 working in our headquarters in Arlington Heights, Illinois. James Taylor is the president, and Jim Lakely is Heartland's vice president. Harley Moody is our Board chairman. Currently, **500 academics** and professional economists serve as policy advisors and more than **350 elected officials** pay dues to serve on our Legislative Forum.

Publications: Heartland produces books, policy studies, booklets, news and commentary articles, podcasts, and videos. It regularly sends policy analyses to every national and state elected official in the United States and to thousands of civic and business leaders. **Seventy-eight percent of all state legislators** read our policy news coverage, and **45% of them changed their voting behavior** based on Heartland's content. 70% of all policymakers opened our weekly newsletter email, *The Leaflet*, in 2019.

Communications: In 2019, Heartland appeared in **print, online, and on TV or radio 4,849 times**, including 1,173 times in printed publications, reaching a paid circulation of **185 million people**, which is equivalent to **\$90 million worth of advertisements**. We hosted 12 websites generating **2.4 million page views**, our podcasts were **downloaded more than five million times**, and our YouTube videos were **viewed three million times**. We have more than **101,000 Facebook fans** and **59,000 total Twitter followers**.

Government Relations: We **contacted elected officials 949,379 times** in 2019, with 9,091 direct personal contacts with elected officials, including 2,636 face-to-face meetings, 2,204 phone calls, 4,228 personal email contacts, 23 contacts via personal mail, and 34 testimonies.

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- Heartland's extensive research and direct advocacy helped lead the state of Florida to repeal certificate of need laws, which prevent the opening of new hospitals and drive up of the cost of health care. Similar successes followed in Georgia and Tennessee.
- Heartland's congressional testimonies and a flurry of phone calls and emails to legislators persuaded multiple states to expand school choice programs. West Virginia passed its first-ever school choice program after our experts delivered legislative testimony, and many other states also expanded educational freedom in 2019.
- Heartland focused all of its communications and government relations weapons against the Green New Deal, changing the public debate with millions of media hits and contributing to its 59-0 failure in the U.S. Senate. State-level Green New Deals were defeated in politically difficult states and municipalities, including Illinois, Oregon, Denver, and elsewhere.
- **There are many** more than what can be listed here. Please contact us (see below) for a complete list.

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