U.S. Response to COVID-19 Compared to Other Diseases

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Background

Emergence of a new infectious disease out of China has caused a global reaction to combat the spread. Governments around the world responded to the threat by instituting lockdowns, closing businesses, using experimental medicines, and even closing borders. Citizens responded in kind by increasing social distancing and the usage of personal protective devices such as face masks and gloves. The U.S. response was in line with what the World Health Organization (“WHO”) was advising, but many countries around the world, following guidelines set forth by the World Health Organization (“WHO”).

Despite efforts to curb the spread of this disease it has become a global pandemic with most countries around the world, following guidelines set forth by the World Health Organization. Since 31 December 2019 and as of 28 April 2020, 2,982,688 cases of COVID-19 (in countries) have been reported, including 210,193 deaths.

Study Objectives

Due to the global pandemic of COVID-19 we will evaluate U.S. response for the following by state:

- Intervention Results: Success, failure and negative results in treatment plans.
- Outcomes: Interest: success and failure rates with regard to flattening the curve.
- Timeframe for follow-up: 14 weeks.

Results

At this time, research is incomplete and as such results are ever-changing. Evaluating the study objectives and the information provided, the study only be performed in an ongoing manner while the pandemic is still active.

Future Implications

Response to the COVID-19 pandemic has triggered change how the U.S. and its citizens will react in light of future situations resulting from diseases and other illnesses. COVID-19 has affected individuals drastically, changing their awareness of everyday activities and the impact that those choices may have on their health. The pandemic has also impacted healthcare systems and businesses significantly. Despite the varying degrees and methods in which the U.S. has responded to pandemics in the history, COVID-19 seems as though it will have a more permanent and lasting effect on U.S. organizations and citizens.

Conclusion

The above analysis depicts a 5-day moving average to visualize the number of new COVID-19 cases and to calculate the rate of change. This was calculated for each day by averaging the value of that day, the two days before, and the next two days. This approach helps prevent major events, such as change in reporting methods, from skewing the data.

The U.S. has responded differently to several pandemics over the course of its almost 244-year history. CDC guidelines have differed as each pandemic has been declared. This means that initial different infection control/responses and protocols due to contamination and transmissibility as well as public awareness.


countries. The following diagram depicts how responses across the U.S. has helped to flatten the curve.

Comparing states that had an increasing number of cases to those in which cases decreased per capita will provide accurate data on prevention and treatment successes.

References


Conclusion

At this time we can only evaluate current data. Progressions will likely result in modifications. Improved accuracy in data will result in better planning for the future.