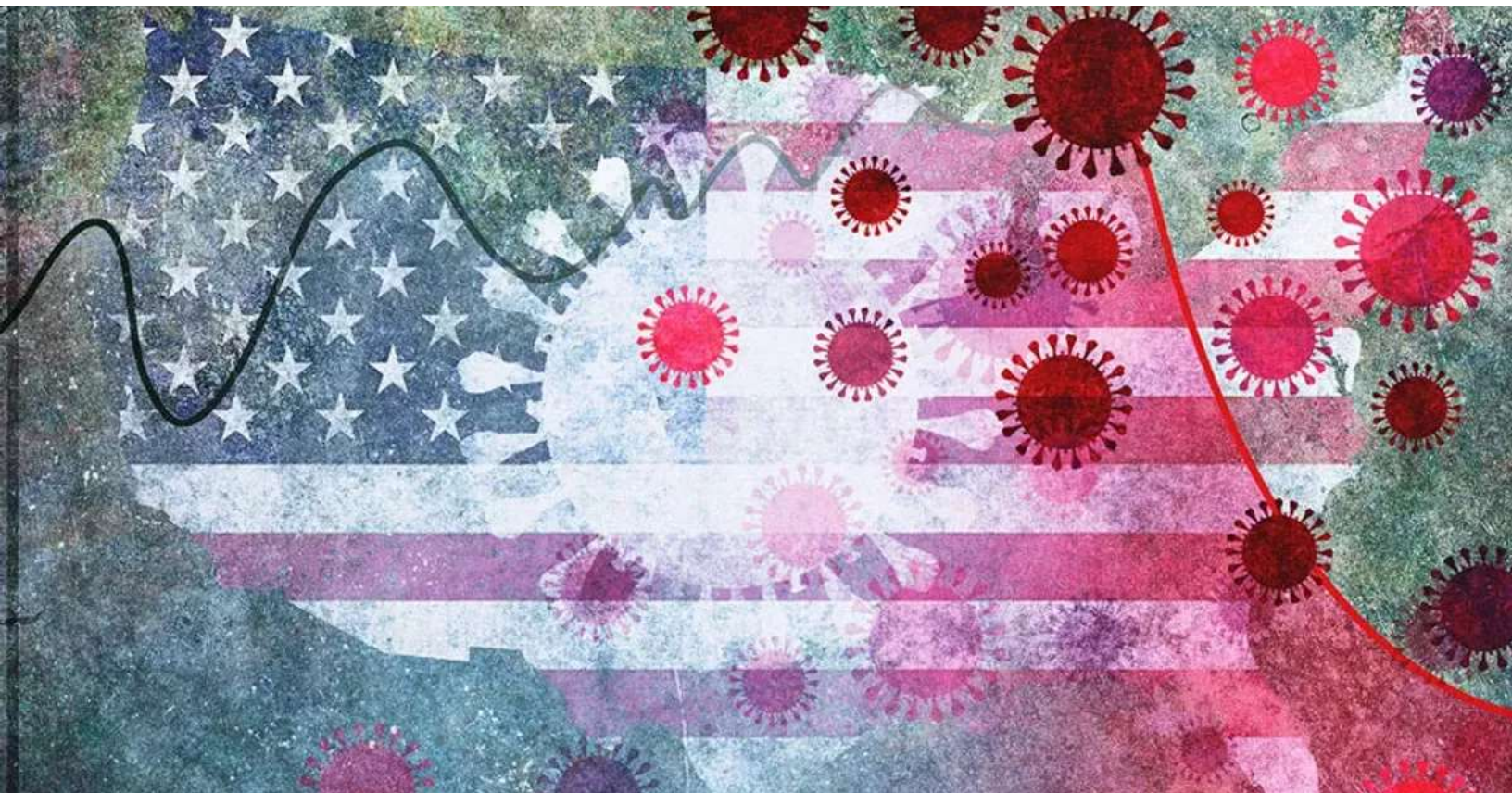


# Public health experts are horrified at the rift between red and blue states on COVID

Experts spoke to Salon about how the vaccination and risk difference is exacerbated by political beliefs

By **MATTHEW ROZSA** PUBLISHED APRIL 1, 2022 4:24PM (EDT)

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Coronavirus COVID-19 impact in the States (Getty Images)

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In this (hopefully permanent) lull to the pandemic, the public has an opportunity to look back and reflect on the massive toll COVID-19 took on us. In terms of loss, the **death toll in the United States is more than 970,000** at the time of this writing; meanwhile, the political rift widened by the pandemic is visible in

I other slightly more subtle ways — especially by differences in vaccination rates and, accordingly, death tolls.

Indeed, the **numbers continue to reveal** that Americans in red states who refuse to follow public health measures are suffering from COVID-19 in far excess of their blue state counterparts. Back in 2021, President Joe Biden was already referring to the pandemic as a "**pandemic of the unvaccinated**"; **the data backed him up** at the time, and remains true now, as the pandemic is perhaps poised to enter an **endemic** phase.

"Unquestionably vaccination is now the most important determinant of medically significant rates of infection, and as the populations of 'red states' are much less likely to be vaccinated they are at greatest risk of medically significant infection," Dr. Alfred Sommer, dean emeritus and professor of epidemiology at Johns Hopkins Bloomberg School of Public Health, told Salon by email. He emphasized that these are not the only variables which make a difference — implementation of masking and social distancing guidelines, income differences, population density, underlying health conditions, age and many others.

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**"The unvaccinated have a 9-fold risk of dying from COVID-19 compared to those vaccinated and a 21-[fold] risk of dying compared to those vaccinated and boosted."**

Yet those variables, while significant in many ways, do not reveal anything about people who deliberately make their COVID-related lifestyle choices based around their political philosophy.

based on red states and blue states, on the other hand, does precisely that.

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"The scientific and public health data is clear and irrefutable: from the CDC as of January 2022, the unvaccinated have a 9-fold risk of dying from COVID-19 compared to those vaccinated and a 21 [fold] risk of dying compared to those vaccinated and boosted," Dr. Russell Medford, Chairman of the Center for Global Health Innovation and Global Health Crisis Coordination Center, wrote to Salon. He pointed to a [recent Kaiser Family Foundation study](#) which revealed that 65% of people in pro-Biden counties were vaccinated compared to 52% of people in pro-Trump counties.

"Importantly, this 13% gap has grown from less than 9% in June, 2021," Medford explained. "Tragically and not surprisingly, disparities in the death rate due to COVID inversely follows this pattern as well."

Public health authorities are aware that politicization has become a serious problem. They hope that education efforts can reduce distrust in scientific authorities.

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"The public health community is working diligently to depoliticize the various aspects of people's perspectives in the pandemic and our national response," Dr. Georges Benjamin, executive director of the American Public Health Association, told Salon by email. "So, the data and information we collect is for health and public health purposes only. It has become quite apparent however, that in communities where misinformation and disinformation has flourished; where leaders and the media have not followed the science and have given false information, the outcomes in terms of illness, hospitalizations and deaths have been increased over communities where the leaders, media and health professionals have followed the science and implemented science-based policies."

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Benjamin identified a number of public health measures that have been definitively linked to improved COVID-19 outcomes: Up-to-date vaccinations, early therapeutic interventions after initial diagnosis, appropriately regular COVID testing, proper hand hygiene, wearing masks in areas where infection can easily spread, and many others. He noted that people in low income and underserved communities need additional support so they can have fair access to vaccines and other public health resources.

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**"It is a paradox," Medford said, that "the vast majority" of Americans depend on medical science for the treatment of most diseases; yet many Americans have been "swayed by non-scientific, non-factual, oftentimes politically motivated, messages designed to contradict and sow distrust in these same, otherwise trusted, medical authorities" in the case of COVID-19.**

"High quality masks (such as N95) are a highly effective and readily available public health measure," Medford told Salon when asked the same question posed to Benjamin. "For example, a **recent real-world study** by the California COVID-19 Case-Control Study Team demonstrates that using a face mask or respirator in indoor public settings markedly reduces the risk of SARS-Cov2 infection by up to 83%."

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Like Benjamin, Medford argued for more effective public education efforts as the antidote to the red state/blue state public health divide.

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He continued with a plea for reason: "How we make oftentimes complex and difficult decisions as a society to grapple with the health, economic and social challenges of COVID-19 must be based on a shared foundation of facts. This argues strongly for a broad-based, bi-partisan effort to regaining trust in our scientific, medical and public institutions."

If nothing else, future historians will be able to spend years studying the COVID-19 data pertaining to pandemics and politics, just as they have done with many other periods in history.

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"This will be a verdant field of investigation for years to come!" Sommer told Salon.

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## **MATTHEW ROZSA**

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