Official: Stats behind San Bernardino County coronavirus ‘hot spot’ report are ‘insane’ – San Bernardino Sun
A federal report calling San Bernardino County one of three U.S. coronavirus hot spots and suggesting the rate of spread doubled in the past week doesn’t line up at all with the county’s records.

County officials say they haven’t seen the report, which was created by the Department of Homeland Security and provided to Yahoo News by one of its recipients under the condition that that recipient not be identified.

But the picture painted by the portions quoted in Yahoo News’ report is contradicted by numbers the county has maintained and updated publicly nearly every day since shortly after the county confirmed its first case of COVID-19.
“The numbers they have are completely insane,” county spokesman David Wert said Saturday, May 16.

The document dated Friday states that San Bernardino County “reported an increase of 782 cases in the last 7 days, nearly doubling new cases reported in the previous 7 days. County officials recently began Phase II of the county’s reopening plan, lifting requirements for mask use on 8 May,” according to the Yahoo report.

It’s not clear from the limited excerpts which seven days are referenced. But as of Saturday, May 16, San Bernardino County has 3,463 confirmed cases — 561 more than it had seven days earlier — according to a dashboard on the county public health website. The week before that — May 2 to May 9 — saw 720 new cases.
And the week of April 25 to May 2 recorded 450 new cases.

So there was a spike, but the percentage of positive tests dropped as the county drastically increased the number of tests it gave. The county of 2.1 million has now tested 38,103 people, with 9.1% of them testing positive.

“We increased the number of tests six-fold, so of course the number of positives went up,” Wert said.

In the past seven days, the number of people tested rose by almost 27%, while the number of cases rose more than 19%.

The disease’s slowdown can be seen in the doubling rate, or the time it takes for the number of cases to double.

That’s now at 13.4 days, compared to 12.1 days on Saturday, May 9, and 10.4 days one week earlier — a sign that the virus is spreading less quickly over time.

The federal report mentions three counties — San Bernardino, Palm Beach County in Florida and Marshall County in Alabama.

“As most states have begun phased re-opening, several COVID-19 hot spots continue to emerge,” it says.

The numbers for Palm Beach County are also “way off,” according to a story in the Palm Beach Post.

“Palm Beach County, FL reported a 71% increase in new cases the last 7 days compared to the previous 7 days,” Yahoo reported, quoting the document. But, according to the Post, Palm Beach County has not had a weeklong increase of 71% since early April, when case numbers were far lower and increases resulted in a larger percent change.
Nonetheless, the number of confirmed cases in San Bernardino County continues to rise rapidly.

Symptoms of novel coronavirus can appear two to 14 days after exposure, or someone could spread the virus without showing symptoms.

The number of people who died from COVID-19, the disease caused by the novel coronavirus, is now at 155, up by five deaths or 3.3% from the deaths reported Friday, May 15, according to the county’s online dashboard.

Tags: Coronavirus, public health, Top Stories IVDB, Top Stories RDF, Top Stories Sun

The Tragic Story of Conjoined Twins Abby and Brittany

By Ranker

You may have heard of Abby and Brittany Hensel before, either on Oprah, in Time Magazine, or on their TLC TV...
WASHINGTON — Federal officials responding to the coronavirus pandemic are concerned about the rapidly rising number of cases in Palm Beach County, Fla., according to an internal Trump administration document reviewed by Yahoo News.

The document, a May 15 daily interagency update on the nation’s coronavirus response circulated by the Department of Homeland Security, notes new areas of concern for
coronavirus. It was provided to Yahoo News by one of its recipients under the condition that that recipient not be identified.

“As most states have begun phased re-opening, several COVID-19 hot spots continue to emerge,” the notice says. Three counties are then listed: Palm Beach; San Bernardino County, Calif.; and Marshall County, Ala.

Palm Beach County, FL reported a 71% increase in new cases the last 7 days compared to the previous 7 days,” the document explains. “The state authorized Palm Beach County to begin Phase 1 of reopening on 11 May, which includes the reopening of barbershops, salons, restaurants, and other businesses.”

President Trump recently changed his primary residence from Manhattan to his Mar-a-Lago golf resort, which is located in Palm Beach County.

The information in the document is attributed to the Federal Emergency Management Agency and was collected on May 12, which means cases were rising even before the county began to reopen on May 11. Other parts of the state had begun to reopen earlier, on May 4.

Neither FEMA nor the DHS responded immediately to a request for comment.

The DHS document says that San Bernardino County in California “reported an increase of 782 cases in the last 7 days, nearly doubling new cases reported in the previous 7 days. County officials recently began Phase II of the county’s reopening plan, lifting requirements for mask use on 8 May.”

Marshall County, Ala., the document says, “reported 217 cases in the last 7 days, a 517% increase over the previous 7 days. Marshall County is home to several poultry

The Gardens Mall food court opened Friday morning for the first time in nearly two months. (Damon Higgins/Palm Beach Post via Zuma Wire)
plants and the meat packing industry accounts for 8% of the county’s employment. On 11 May, additional businesses were reopened.”

Public health officials have warned that lifting stay-at-home orders would lead to more infections and, inevitably, more deaths. Some governors have either discounted or dismissed such warnings, as has President Trump.

Encompassing the beachfront and inland communities north of Miami, Palm Beach County has a population density about four times that of Marshall County, which is in the northeastern corner of Alabama, and seven times that of San Bernardino County, which encompasses the desert region east of Los Angeles. Population density is thought to contribute to the spread of the coronavirus, which causes the lung disease known as COVID-19. That disease has killed more than 87,000 Americans, according to Johns Hopkins University data.

The coronavirus also tends to strike older people. The average age of a Palm Beach County resident is 45 years old, whereas the average Marshall County resident is 39 years old and the San Bernardino County resident is only 33 years old.

Palm Beach is home to many retirement communities, a fact that worries health officials. The county has recorded 263 coronavirus deaths, three more than the entirety of South Korea, which recorded its first coronavirus case on the same late January day as the United States.

Neither the governor’s press secretary nor county officials responded on late Friday afternoon to Yahoo News requests for comment.

Florida was one of the first states to reopen, at the urging of Republican Gov. Ron
DeSantis, who had also been slow to close his state, effectively waiting for permission from Trump to do so. DeSantis’s faltering and confusing response to the coronavirus made him among the nation’s least popular governors, according to a national survey conducted in April.

In recent days, however, DeSantis has been celebrated by some for Florida’s seeming success in battling the coronavirus. But a good part of that success appears to have come from shelter-in-place orders by mayors who acted ahead of DeSantis.

Allegations have also surfaced that the state has deliberately underreported its coronavirus numbers.

Additional reporting by Jana Winter.

Click here for the latest coronavirus news and updates. According to experts, people over 60 and those who are immunocompromised continue to be the most at risk. If you have questions, please refer to the CDC’s and WHO’s resource guides.

Read more:

- Obama says in private call that ‘rule of law is at risk’ in Michael Flynn case
- Yahoo News/YouGov coronavirus poll: Almost 1 in 5 say they won’t get vaccinated
- Army scientists working on vaccine had long feared emergence of new coronaviruses
Is Palm Beach County a national coronavirus hot spot?

By MARC FREEMAN
SOUTH FLORIDA SUN SENTINEL  |  MAY 16, 2020

The COVID-19 testing location at FITTEAM Ballpark in West Palm Beach was back to normal Monday, April 27, a day after a storm blew through and damaged the site. (Joe Cavaretta)
Palm Beach County officials were surprised Saturday by a national news story that flagged a significant rise in coronavirus infections in the county, citing it as one of three emerging Covid-19 hot spots nationwide.

The Yahoo News report cited a federal document that appeared to contradict Florida data, though state data also reveal concerns in Palm Beach County.

According to Yahoo, the document was circulated Friday by the Department of Homeland Security and used data collected by the Federal Emergency Management Agency on May 12, the day after Palm Beach County reopened many businesses. “Palm Beach County, FL reported a 71% increase in new cases the last 7 days compared to the previous 7 days,” the document notes.

That is a more substantial increase than is reflected in the state of Florida’s official data on coronavirus cases, though the state numbers also reflect significant increases in infections, according to a Sun Sentinel review of state data. State data show a 20.7% increase in cases in Palm Beach County in the week preceding May 12. The week before that, from April 28 to May 5, saw a 17.8% increase in cases in the county.

RELATED: Palm Beach County reopened without meeting federal guidelines, analysis shows »

That state data and the federal data cited by Yahoo raise concerns about Palm Beach County’s push to reopen quickly. The Sun Sentinel examined the data and found that Palm Beach County reopened even though infection rates were not decreasing.
Palm Beach County officials said they've read the Yahoo News article, which cited the county among three emerging COVID-19 “hot spots,” along with San Bernardino County, Calif., and Marshall County, Ala. But county leaders have not seen the document Yahoo News cited, and were not contacted by Yahoo News before publication, said county spokeswoman Lisa De La Rionda.

*Staff writer Mario Ariza contributed to this report.*

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**Marc Freeman**  
South Florida Sun Sentinel

Marc Freeman covers Palm Beach County criminal and civil courts for the Sun Sentinel. He previously wrote about K-12 education, local government, and consumer issues. Marc's work has also appeared in The Palm Beach Post, The Philadelphia Inquirer, and The Patriot-News.

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San Bernardino County’s small businesses may now apply for novel coronavirus aid, as some are allowed to start reopening.

County officials await Gov. Gavin Newsom’s response to their request to fast-track business reopenings after weeks of closures and restrictions meant to slow the spread of the virus. In the meantime, several types of businesses are allowed to open now, with safety measures in place.

In addition to essential businesses, here are the kinds of businesses allowed to open now in San Bernardino County:
• Retailers, such as bookstores, clothing and shoe stores; florists; home and furnishing stores; jewelry stores; sporting goods stores; and toy stores. All are open with delivery or curbside pickup only. Manufacturers and logistics companies that support these retailers also may operate.
• Health care services including dentists, preventative care services, elective surgeries. Telehealth, or virtual doctor visits, are still encouraged.
• Services that don’t require close contact including appliance repair, car washes, dog walking, pet grooming, residential and janitorial cleaning and plumbing.
• Offices in all sectors, but working from home is still recommended. This includes faith-based and nonprofit offices.
• Outdoor museums.
• Daycare facilities and in-home babysitting.
• Short-term rentals and campgrounds are open, but limited to one campsite or rental per immediate household. Gatherings and parties are not allowed.
• Trade schools that support essential workers.

In addition, the county permits drive-up graduation ceremonies and drive-up religious services, as well as weddings and graveside services limited to 10 guests.
On Wednesday, May 13, the county sent a letter signed by officials in Riverside, Orange and San Diego counties asking for more local control in reopening businesses. Local officials say the state’s criteria for reopening is too restrictive and impossible for larger counties to meet. Similarly, the week prior, the county sent a letter signed by all 24 city mayors asking for more discretion. “We have this plan already. We’ve been doing things safely. We flattened our curve,” Board of Supervisors Chairman Curt Hagman said at a news conference Friday. “We did all these different things, let us go forward on a local, region-by-region basis in San Bernardino County and open more things.”

More than 700 businesses have applied for the county’s COVID Compliant Business Partnership Program since it launched Thursday, Hagman said.

The program will provide $30 million, or about $2,500 each, for small businesses impacted during the pandemic. Businesses following health and safety measures to limit the spread of the disease among employees and customers will get a sign to put in their window.

“We’ve heard you loud and clear,” Hagman said Friday. “We are pushing as many things open in this county. We want to get you back to work, back to doing the fun things that we want to do as quickly as we can, but keeping as safe as we can as well.”
Hagman said it’s important to remember that the county got to this point because so many adhered to social distancing guidelines, wore face masks and made washing hands a priority.

Businesses with fewer than 100 employees can apply for the COVID-compliant program and the sign. While larger businesses cannot qualify for the money, they still can be certified as a compliant business.

The deadline to apply is Aug. 31.

Businesses looking for information and an application can visit sbcovid19.com/covid-compliant-business-partnership-program/.

Meanwhile, county officials are working to expand access to coronavirus and serology testing, according to Corwin Porter, the county’s assistant director of public health. The county offers tests for residents with and without symptoms.

In addition to testing for current infections, serology testing, which tests for antibodies indicating a previous infection, has been offered at smaller community testing events, Porter said Friday.

“We continue to look for efficiencies in how we can continue to expand," Porter said. “It is an ongoing effort. We’re looking for the long haul. We’re putting plans into place to be able to continue this effort for the next many months to come.”

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Coronavirus: Cases pass 3,400 in San Bernardino County, 155 deaths

By Martin Estacio
Staff Writer

Posted May 16, 2020 at 2:19 PM

Coronavirus cases jumped past 3,400 in San Bernardino County on Saturday, as five more people were reported to have died from COVID-19.

According to county data, 3,463 people have tested positive for the coronavirus while 155 have died. Over 80% who died were aged 60 or older with about four in 10 being of Latino ethnicity.

Over 38,000 have been tested in the county, an increase of more than 2,100 from Friday, which accounts for less than 2% of the county's total population.

On Friday, the county provided a list of establishments that were reopened which include outdoor museums, offices and short-term rentals, campgrounds and trade schools that support essential workers.

Gyms, movie theaters, libraries, tattoo parlors and nail salons are still required to remain closed.

Data shows the number of COVID-19 patients went down from 148 to 133 from Tuesday to Wednesday, the last numbers were available.

Here is the list of cases and deaths in the High Desert. Changes are in parentheses:

**Adelanto:** 42 cases (+2), 2 death (+1)

**Apple Valley:** 44 cases, 2 deaths

**Barstow:** 10 cases, 2 deaths

**Fort Irwin:** 2 cases
Hesperia: 83 cases (+3), 1 death

Joshua Tree: 15 cases, 2 deaths

Morongo Valley: 6 cases

Oak Hills: 17 cases

Phelan: 12 cases (+2)

Twentynine Palms: 6 cases

Victorville: 136 cases (+3), 6 deaths

Yucca Valley: 15 cases (-1), 1 death

Total: 389 cases, 16 deaths

Cases in the surrounding mountain communities stood at 30 on Saturday.

Big Bear City: 3 cases
Big Bear Lake: 6 cases

Blue Jay: 1 death

Crestline: 12 cases (+1), 1 death

Rimforest: 1 case

Running Springs: 5 cases

Wrightwood: 2 cases

In neighboring counties as of Saturday afternoon: Kern, 1,473 cases, 25 deaths; Los Angeles, 36,381 cases, 1,752 deaths; Orange, 4,222 cases, 86 deaths; and Riverside, 5,618 cases, 242 deaths.

Across the state, 77,515 people have tested positive for the coronavirus, with 3,166 dead, according to the Los Angeles Times’ coronavirus tracker as of Saturday.

Nationwide, more than 1.46 million people are confirmed with 88,447 deaths, according to Johns Hopkins University data. More than 250,000 have recovered.

Worldwide, cases stood at more than 4.6 million. There have been 310,520 deaths and more than 1.6 million recoveries associated with the virus, according to the data.

Martin Estacio may be reached at MEstacio@VVDailyPress.com or at 760-955-5358.
Follow him on Twitter @DP_mestacio.
San Bernardino County coronavirus cases climb by 48 on Sunday, no new deaths

Chino, which has the highest number of residents testing positive in the county, saw it's confirmed cases rise by 20.
A safety officer directs traffic as patients wait in their cars during a coronavirus drive-thru testing at the Auto Club Speedway in Fontana on Tuesday, May 12, 2020. The event is open to all San Bernardino County residents by appointment only. People hoping to get tested must have at least one symptom or be 65 or older or be a healthcare or emergency worker or law enforcement officer. (Photo by Watchara Phomicinda, The Press-Enterprise/SCNG)

By JENNIFER IYER | jiyer@scng.com | Redlands Daily Facts
PUBLISHED: May 17, 2020 at 2:29 p.m. | UPDATED: May 17, 2020 at 2:35 p.m.

The number of confirmed positive cases of novel coronavirus in San Bernardino County went up by 48 on Sunday, May 17, to 3,511, a 1.4% increase from the day before.

The number of residents who have died from the disease remained the same at 155, according to information released by the county health department. The doubling time, the estimated amount of time it would take the number of cases to double, also stayed the same, at 13.4 days.

The number of residents tested went up by 513, to 38,616. Out of 2.1 million county residents, 1.8% have been tested, and of those, 9.1% have been positive.
Most locations only saw numbers go up by a few, if at all, from Saturday, but the number of confirmed cases in Chino jumped by 20 Sunday, to 521. That city’s count includes two known outbreaks, both at correctional facilities, though county data for those locations did not change much, if at all, from Saturday.

Data from the California Department of Corrections and Rehabilitation, updated Sunday, showed a total of 529 confirmed cases in inmates at California Institute for Men, with 416 of those active in custody, six released while active, and 102 cases resolved. Five deaths have been reported at the facility.

State data from May 15 shows 52 staff members confirmed positive, 27 of whom have returned to work.

Sunday state numbers from California Institute for Women show 48 confirmed cases, 47 of those active in custody, and one case resolved. No deaths have been reported there.

May 15 state data shows three staff members confirmed positive, all of whom have returned to work.

Chino has the most residents with confirmed cases of any location in the county. Behind it is San Bernardino with 440 residents, Fontana with 404, Ontario with 287 and Redlands with 201.
Location of residence has not been determined for 103 of the positive patients.

Here is the list of confirmed cases and deaths by city or unincorporated community. Numbers in bold indicate they are in the top 5 for most cases or deaths in San Bernardino County.

- Adelanto: 42 cases, 2 deaths
- Angelus Oaks: 0 cases, 0 deaths
- Apple Valley: 45 cases, 2 deaths
- Barstow: 10 cases, 2 deaths
- Big Bear City: 3 cases, 0 deaths
- Big Bear Lake: 6 cases, 0 deaths
- Bloomington: 44 cases, 2 deaths
- Blue Jay: 0 cases, 1 death
- Chino Hills: 87 cases, 2 deaths
- Chino: **521 cases**, 6 deaths
- Colton: 137 cases, **13 deaths**
- Crestline: 12 cases, 1 death

- Fontana: **404 cases**, **13 deaths**
- Fort Irwin: 2 cases, 0 deaths
- Grand Terrace: 17 cases, 1 death
- Hesperia: 84 cases, 1 death
- Highland: 88 cases, 3 deaths
- Joshua Tree: 15 cases, 2 deaths
- Landers: 0 cases, 0 deaths
- Loma Linda: 57 cases, 0 deaths
- Mentone: 16 cases, 1 death
- Montclair: 55 cases, 4 deaths
- Morongo Valley: 6 cases, 0 deaths
- Oak Hills: 17 cases, 0 deaths
- Ontario: **287 cases, 17 deaths**
- Phelan: 12 cases, 0 deaths
- Piñon Hills: 0 cases, 0 deaths
- Rancho Cucamonga: 160 cases, 7 deaths
- Redlands: **201 cases, 21 deaths**
- Rialto: 162 cases, 5 deaths
- Rimforest: 1 case, 0 deaths
- Running Springs: 5 cases, 0 deaths
- San Bernardino: **440 cases, 6 deaths**
- Twentynine Palms: 6 cases, 0 deaths
- Upland: 118 cases, 10 deaths
- Victorville: 139 cases, 6 deaths
- Wrightwood: 2 cases, 0 deaths
- Yucaipa: 192 cases, **25 deaths**
- Yucca Valley: 15 cases, 1 death
- Undetermined: 103 cases, 1 death

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Tags: Coronavirus, public health, Top Stories IVDB, Top Stories RDF, Top Stories Sun

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**Jennifer Iyer | Staff writer**

A lifelong Inland resident, Jennifer Iyer started working in journalism at The Press-Enterprise in 2000. She has written (and shot photos for) stories on wildflowers, camping with a dog, and many community events, and as a videographer covered wildfires and war games to blimp rides and camel racing from Temecula to Big Bear Lake, Twentynine Palms to Jurupa Valley.
San Bernardino County coronavirus cases rise 19% in week; testing up 27%
San Bernardino County reported five more novel coronavirus deaths and 152 new cases Saturday, May 16, as testing capacity continues to rise.

The number of people who died from COVID-19, the disease caused by the novel coronavirus, is now at 155, up 3.3% from the deaths reported Friday, May 15, according to the county’s online dashboard. Cases grew by 4.6% to 3,463, the data show.

In the county of 2.1 million residents, 38,103 have been tested for the disease, and 9.1% were positive. Testing is up 5.9% from the day before, according to the county.
After years in prison for attempted murder in Pasadena, he graduates from Cal State LA with honors.

US, European leaders weigh reopening risks without a vaccine

Coronavirus: How we decide the risks we're willing to take to venture out

Hip-hop legend Warren G treats SBVC football players struggling during pandemic to barbecue feast

San Bernardino County coronavirus cases climb by 48 on Sunday, no new deaths

In the past seven days, the number of people tested rose by almost 27%, while the number of cases...
rose more than 19%.

San Bernardino County stopped requiring residents to wear masks — making it a strong recommendation instead — on Friday, May 8, as other restrictions also eased in line with modified state orders.

Symptoms of novel coronavirus can appear two to 14 days after exposure, or someone could spread the virus without showing symptoms.

Most of the county’s deaths, 91, were among residents older than 70. Eleven people under the age of 50 have died of COVID-19, the county’s data show.

Riverside County no longer updates its coronavirus statistics on weekends.
CASES BY COMMUNITY

Adelanto 42Apple Valley 44Barstow 10Big Bear City 3Big Bear Lake 6Bloomington 43Chino 501Chino Hills 85Colton 135Crestline 12Fontana 401Fort Irwin 2Grand Terrace 17Hesperia 83Highland 88Joshua Tree 15Loma Linda 57Mentone 16Montclair 53Morongo Valley 6Oak Hills 17Ontario 279Phelan 12Rancho Cucamonga 158Redlands 201Rialto 160Rimforest 1Running Springs 5San Bernardino 438Twentynine Palms 6Upland 118Victorville 136Wrightwood 2Yucaipa 192Yucca Valley 15Undetermined 104

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‘We are terrified’: Coronavirus outbreak reported at Chino women’s prison
An aerial view of California Institution for Women in Chino, San Bernardino County, where prison officials said on May 13, 2020 there is a new outbreak of COVID-19 among its inmates. (Courtesy of the California Department of Corrections and Rehabilitation)

By JONAH VALDEZ | jvaldez@scng.com | San Gabriel Valley Tribune
PUBLISHED: May 17, 2020 at 10:07 a.m. | UPDATED: May 17, 2020 at 3:37 p.m.

The women sat anxiously inside their prison cells at the California Institution for Women in Chino as a guard roamed about their cell block, yelling out an ominous announcement.

A knock on a cell door, the guard said, meant that they tested positive for the coronavirus. They would be told to gather their things and prepare to be isolated for an indefinite amount of days.

Screams filled the air. Women began to hurl questions at the guards.
That scene, described by a 63-year-old inmate, was relayed to Colby Lenz of the California Coalition for Women Prisoners, an advocacy group, in an email on May 12.

After a woman incarcerated at CIW tested positive for COVID-19, officials rushed to carry out a mass round of testing for inmates, said Terri Hardy, spokeswoman for the California Department of Corrections and Rehabilitation. And as test results began to trickle in, officials realized an outbreak of the disease had quietly taken hold of the all-women’s prison.

On May 8, 203 inmates were tested. On May 12, 191 incarcerated women were tested. The testing revealed 40 women had been infected with the disease. Officials are still waiting for results from the second round of testing. The outbreak represents a 400% jump in positive cases among inmates; only eight women at CIW came up positive prior to the May 8 testing.
At least 100 prisoners at the women’s prison have been communicating with a network of advocates on the outside through a state-sanctioned email system, describing the early moments of the outbreak. Many, older or medically at-risk, expressed anguish as they faced the possibility of serious illness or death. Advocates did not provide the name of the 63-year-old inmate for this story, saying she feared possible reprisal inside the prison.

“The thought of dying here and the fear that I smell around me right now is extremely overwhelming,” she wrote in her email. “The more announcements they make the more the level of fear and panic rises.”

After several hours of waiting in her cell, praying and listening to other inmates hollering in fear, she wrote a second message. She had tested positive for the disease.

Isolating the sick

While the numbers of positive cases at the Chino women’s prison are expected to rise in the coming days, officials began to isolate patients with the disease and placed the entire prison under quarantine, the prison said on Wednesday, May 13.

They said most of the women who have the disease were not exhibiting symptoms.

Inmates who test positive for the disease but do not show symptoms will be held in a previously unoccupied 120-bed housing unit, officials said. Those who have the disease and are experiencing symptoms will be held at an on-site medical facility or, if necessary, an outside hospital.

In an email to coalition members, a 44-year-old inmate who recently tested positive for Covid-19 described being moved to the 120-bed unit, which was dusty since it had not been utilized in years, she said. The prisoner, April Harris, said on Thursday morning that medical staff was taking inmates’
blood pressure, pulse and temperatures. At that point, they had not been given water or cleaning supplies. “This is extremely scary,” she wrote.

Harris wrote that almost her entire unit had tested positive for the coronavirus. Some of those who tested positive, she said, worked in the prison’s kitchen, canteen, where inmates can buy snacks and over-the-counter medication, and in the factory where inmates had been sewing masks.

“People who interact with everybody,” Harris wrote, describing the social nature of those jobs. “We are terrified. This entire prison needs to be tested.”

The corrections department is working with the San Bernardino County Department of Public Health to conduct additional rounds of mass testing of women at the prison, officials said.

A preventable outbreak?

The first inmate and two employees at the women’s prison tested positive for the disease in mid-April. Before last week’s testing, the virus seemed to be under control with minimal spread.

In the neighboring California Institution for Men, an all-men’s prison located five miles north from CIW, inmates and staff have been hit with the largest outbreak among California prisons with 529 inmates who tested positive with the coronavirus. Five of those inmates have died.

Advocates responded to news of the outbreak at the women’s prison with frustration and dismay, saying they had for weeks been calling on officials to institute measures to avoid one.

“This level of outbreak is very preventable and they failed to prevent it,” Lenz said.

Lack of protection

On April 6, California Coalition for Women Prisoners penned a letter to the corrections department, urging the state to allow inmates to wear face coverings inside the women’s prison. At that point, inmates had not been given masks and were cited if they covered their faces.

In the following days, officials began to provide masks for inmates inside CIW.

Hardy said 372 high-risk inmates were given masks on April 10. One week later, a shipment of masks allowed for inmates to have two masks each. On May 6, a third shipment provided a third mask for inmates.

Even so, inmates reported to advocates instances where prison guards interacting with inmates were
not wearing masks themselves, which is against current CDCR policy. Inmates also reported being denied access to cleaning supplies to sanitize their unit’s showers.

CDCR officials refuted the allegation of a lack of cleaning supplies, saying that they have increased delivery at all institutions and have been providing inmates with extra supplies.

Early release for at-risk inmates

Efforts have long been underway to reduce population density inside prisons to allow for more social distancing measures inside.

After prodding from civil rights advocates, California vowed in late March to release 3,500 inmates.

Though it is not clear how many inmates have been released through the state’s order, data provided by the state show an overall population reduction at the women’s prison by 107 inmates between April 1 and May 13.

Advocates have been pushing for the release of medically at-risk inmates, such as Patricia Wright, 68, who is one of at least 300 other at-risk women incarcerated at CIW. She is ill with cancer. She was convicted for her husband’s murder in 1998, which she and family members maintain she had no involvement in. Wright is carrying out a life without parole sentence and does not qualify under the state’s criteria for an early release amid the pandemic.

“Please get me home asap,” she wrote to her advocates last week from her cell as news spread in the prison about a newly infected inmate.

Tracing the outbreak

As of Thursday, the source of the outbreak at CIW had not yet been determined. Officials said a contact investigation to trace possible exposure among staff and inmates was underway.

Advocates have long been concerned about the movement of civilian employees between CIW and its male counterpart, the California Institution for Men, especially as it is besieged by its own outbreak of the coronavirus.

Prison officials on Thursday said that in late March, the California Prison Industry Authority halted movement of its staff between the CIW and CIM.

Officials also said there are no custody staff or other corrections staff moving between the prisons.
Pacifica employee tests positive for virus

By Marianne Napoles
May 16, 2020

A staff member of Pacifica Senior Living Hillsborough on Central Avenue in Chino has tested positive for COVID-19.

The assisted living memory care facility with 140 residents is located between Francis and Philadelphia avenues.

Executive director and LVN Mandy Taylor said the staff member’s last day was April 17 and worked in a department where there was no direct contact with residents.

The employee was asymptomatic at the time, Ms. Taylor said.

“There have been no signs or symptoms of COVID-19 from anyone in the Hillsborough community,” she said.

Ms. Taylor wrote a letter to residents and their families dated May 6 to inform them about the employee.

The San Bernardino County “dashboard” that lists coronavirus cases at residential healthcare facilities did not list Hillsborough as having a staff member testing positive.
County spokesman David Wert said the dashboard only includes residents who live in San Bernardino County.

“If the staff member lives in another county, we wouldn’t know about it because positives are reported by place of residence, not place of employment,” Mr. Wert said.

Ms. Taylor said the facility is close to the Los Angeles County border, but she was not aware of the employee’s county of residence.

She said Hillsborough is following the Centers for Disease Control guidelines, practicing social distancing, using personal protective equipment and prohibiting visitors.

“We are absolutely prepared,” she said.

Residents play bingo six feet apart with no more than 10 in the room. Karaoke Mondays are being held for entertainment.

Ms. Taylor said the lobby and two courtyards are large and allow for movement and walking around, unlike other facilities where the spaces are smaller.
Coronavirus: Masks or other face coverings now mandatory at San Bernardino County courthouses

By ROBERT GUNDREN | rgundran@scng.com |
PUBLISHED: May 15, 2020 at 9:58 p.m. | UPDATED: May 18, 2020 at 6:54 a.m.

The San Bernardino County Superior Court declared Friday that face coverings or masks are now mandatory while inside a courthouse or on courthouse premises.

"Because court business typically requires gatherings of judicial officers, court staff, litigants, attorneys, witnesses, defendants, law enforcement and juries, the court is following federal, state and local guidelines for reducing the spread of COVID-19," said Michael A. Sachs, Presiding Judge of the San Bernardino County Superior Court.

Sachs said that effective Friday, face coverings and masks are mandatory for all judicial officers, court
employees, members of the public and media, vendors, justice partners, law enforcement and anyone else at the courthouse.

The San Bernardino County Superior Court has been closed since March 17, only hearing essential and time-sensitive issues in accordance with statewide and emergency orders.

Social distancing is also mandatory at the courthouse, Sachs said.

“Social distance protocols of six feet between persons will be strictly enforced in the courthouse and in courtrooms,” he said. “Persons who refuse to comply with this order will be required to leave the court premises.”
'An uphill battle': Adelanto mayor pro tem slowly recovering after contracting virus

By Martin Estacio
Staff Writer

Posted May 17, 2020 at 1:29 AM

ADELANTO — On April 5, St. Mary Medical Center personnel in Apple Valley told Tracy Hernandez her husband likely wouldn’t make it through the night.

At the time, Gerardo Hernandez — Adelanto’s mayor pro tem — was in critical condition in an intensive care unit. He lay suffering from the ravages of COVID-19: multiple organ failure, fluid in his lungs, septic shock.

He was in a medically induced coma. A ventilator kept him breathing. He was on about six different blood pressure medications and three sedatives, Tracy Hernandez said.

All the while, his vitals were dropping.

Medical staff suggested that her husband be given “comfort-care medication” to allow him to die peacefully.

But Tracy Hernandez wouldn’t accept such a fate.

“I was like, ‘No. I refuse what you’re saying. I know God is going to take my husband and carry him through the night, and he’s going to, continually from here on, slowly and steadily improve my husband’s health,’” she said in a phone interview Saturday.

More than a month later, Gerardo Hernandez remains hospitalized, but he no longer tests positive for the coronavirus.

He also no longer has pneumonia, hasn’t required dialysis in three days and can breathe on his own through a tube that was placed in his throat.
“It’s been a continual progress that my husband’s made,” Tracy Hernandez said.
“He keeps getting stronger.”

More than 3,000 coronavirus patients are hospitalized in California, according to the state’s Department of Public Health. Of those, 1,079 are in ICUs.

Gerry, as his wife calls him, was transferred to a step below an ICU when he was taken to Kaiser Medical Center in Ontario last week.

There is now talk of transferring him to a rehabilitation facility for “more intensive therapy.”

For Tracy Hernandez, her husband’s slow-but-steady recovery is now an upside in an otherwise monumental ordeal.

She’s been caring for three daughters while Gerardo Hernandez has been incapacitated. She said she tested positive for COVID-19 and quarantined herself for two weeks.

Gerardo Hernandez’s mother, Salome, died April 24 after contracting the virus. Before her death, COVID-19 was “not detected” in Salome Hernandez, but she still had pneumonia and her health declined to the point that she was brought home to receive end-of-life care, according to Tracy Hernandez.
Meanwhile, a niece who tested negative was hospitalized twice for pneumonia.

Tracy Hernandez, however, has responded by making her life more public. She regularly posts Facebook Live updates for family, friends and the community.

Some videos are emotional. Others are hopeful. She posted Saturday from a local park, for example. As their daughters played nearby, she said, “It’s pretty much safe to say (Gerardo’s) not in multiple organ failure anymore.”

She’s talked to local and Los Angeles Times reporters; spoken out online when San Bernardino County opened testing to all residents this month, a decision she said should’ve come sooner; and opposed protesters who have demanded the reopening of California.

“You guys, I don’t know who the hell is wanting to reopen things,” Hernandez said as she fought back tears in one video. “I’m on zero sleep because I’m taking care of my mother(-in-law). I’m so exhausted and scared because I know she’s at the end of her life, but I’m trying to be strong for my girls.”
“But it’s wrong, and nobody should try to open up things. Because people who say that this is fake ... You guys are so narrow-minded if you think this is fake. It’s not. It’s not at all.”

While she hasn’t been able to visit her husband in person, the couple was able to have a FaceTime conversation on Mother’s Day.

“It’s so great to hear his own voice, even though he has to take a breath each time that he talks. It’s amazing,” she said. “Such a miracle God has just presented with us with that.”

Gerardo Hernandez’s recovery, meanwhile, hasn’t been without setbacks.

About 12 days after he lived through the night doctors said would be his last, medical staff attempted to wean him off various medications to see if he could breathe on his own.

One trial run worked, Tracy Hernandez said, but with the second, the mayor proteins’s oxygen levels dropped. He had to be placed back into a coma and back on a ventilator.

Tracy Hernandez said her faith in God has played a huge role in keeping herself together, adding that she also pulls strength from her husband, children and family.

She said she wants others who are struggling to gain hope from her husband’s story, as her own family grapples with the repercussions of a virus that has tested their resolve.

“It’s still going to be an uphill battle,” she said in another video. “But it’s not anything that we can’t overcome.”

Martin Estacio may be reached at MEstacio@VVDailyPress.com or at 760-955-5358. Follow him on Twitter @DP_mestacio.
Joshua Tree National Park has reopened access to:

- Park entrances
- Roads and parking lots
- Trails
- Family campsites and backcountry camping
- Some bathroom facilities

With public health in mind, the following facilities remain closed at this time:

- Visitor centers
- Group campsites
- Entrance station booths are not staffed, but entrances are open

"With the lower summertime visitation numbers in mind, we have worked closely with the health offices in both San Bernardino and Riverside Counties to ensure that the type of recreation at Joshua Tree is in line with current health advisories." – said park superintendent David Smith. "By opening the park in phases, we plan on being able to take measured steps that ensure the safety of our staff and visitors while providing increased access to our National Park."

To keep the park open, we will need your help to prevent the spread of COVID-19:

- Enjoy the outdoor recreation areas around your local community.
- Visit with members of your household only.
- Practice social distancing by maintaining 6 feet of distance between you and anyone outside of your household.
• Avoid crowded areas.
• Bring hand sanitizer, a mask, and other items to stay clean and safe. There are no hand sanitizing stations within the park and most of the restroom facilities do not have running water.
• Maintain space while passing others on a trail. The loop trails in the park, like Barker Dam and Hidden Valley, will be one-way only.
• Family campsites are open, but it is recommended that only members of the same household camp together. All 520 sites are first-come, first-served.
• Backcountry camping is open, but park officials ask that you camp in small groups with only members from your household.

In addition to health safety, Joshua Tree officials would like to remind the public about park specific safety:
• Drive slowly. Wildlife have become accustomed to the park without traffic and are spending more time on the road.
• The summer temperatures in the park can be deadly. Keep your visit short, bring plenty of water and avoid the hottest parts of the day.
• Always let someone know where you are going and when you plan on leaving.

The health and safety of our visitors, employees, volunteers, and partners continues to be paramount. At Joshua Tree National Park, our operational approach will be to examine each facility function and service provided to ensure those operations comply with current public health guidance and will be regularly monitored. We continue to work closely with the NPS Office of Public Health using CDC guidance to ensure public and workspaces are safe and clean for visitors, employees, partners, and volunteers.

While these areas are accessible for visitors to enjoy, a return to full operations will continue to be phased and services may be limited. When recreating, the public should follow local area health orders from San Bernardino County and Riverside County, practice Leave No Trace principles, avoid crowding, and avoid high-risk outdoor activities.
Riverside County plans a study in coming weeks to see how many residents have developed antibodies to the novel coronavirus, a key indicator of how the virus has spread and the county’s progress in fighting the pandemic.

The study — similar to one that took place in Los Angeles County — will be of randomly selected residents in hopes of getting a good idea of the presence of antibodies in the county’s population, Dr. Geoffrey Leung of the county-run Riverside University Health System said at a Friday afternoon, May 15, news conference.
While there’s no consensus about whether antibodies mean someone is immune to the virus, or how long that immunity might last, “we do feel like being able to do an antibody study in Riverside County will be extremely beneficial because it will give us an idea of how many people have been infected and sort of where we are in that course to getting better,” Leung said.

County residents, whether they have symptoms or not, can make appointments at sites throughout the county to get tested to see if they have the virus. Leung said the public cannot call requesting to take part in the antibody study.
“Instead, we will have a very special process to make sure that we are selecting individuals at random so that we get a good sampling of the overall population,” he said.

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The study is expected to start in the next few weeks, Leung added.

The new study comes amid encouraging signs in Riverside County’s fight against the coronavirus. While the county had more than 5,600 confirmed cases and 242 deaths as of Friday, Leung said the rate of new cases has slowed as the county’s doubling rate — the rate at which infections double — is now 24 days; it used to be every 4.6 days.

Positive COVID-19 tests used to be at a rate of 11 or 12 per 100 tests but have slowed to five or six out of 100 tests, Leung said.

Supervisors V. Manuel Perez and Karen Spiegel spoke at Friday’s briefing to make the county’s case for joining an accelerated business reopening timeline under Gov. Gavin Newsom’s four-phase reopening plan.
The county has met six of seven state public health benchmarks for reopening, including the ability for hospitals to weather a surge of COVID-19 cases and steps to protect vulnerable populations, Perez said.

“This clearly shows that we can keep our foot on the pedal and do everything we possibly can to suppress the coronavirus but also move the economy forward,” he said.

Asked about county businesses opening in defiance of state orders, Perez said that while he appreciates “the anxiety and the frustration” felt by many businesses, “I think there’s power in numbers. And if we’re able to come together as a county … and demonstrate to the governor that we’re taking on all these metrics to demonstrate our success … I think that’s the best approach.”

The county will not be able to help businesses that have their licenses pulled by the state for reopening illegally, Spiegel said. “We don’t want them to get it where (they have) permanent problems with their licensing,” she said.
U.S.

Coronavirus Hits Southern California Harder Than Northern Counties

A later lockdown and more nursing homes help explain why Los Angeles has disproportionately more cases

Northern California is poised to recover faster from the coronavirus disruption because of a lower infection rate.

PHOTO: RICH PEDRONCELLI/ASSOCIATED PRESS

By Jim Carlton in San Francisco and Alicia A. Caldwell in Los Angeles

May 18, 2020 9:22 am ET

In California, the coronavirus pandemic has become a tale of two cities.

The San Francisco Bay Area, along with Sacramento, has about 10 million people of the state’s 40 million residents, but only 16% of its Covid-19 cases and 14% of deaths related to the disease.

Meanwhile, in the Southern California region dominated by Los Angeles and Santa Barbara to the north and San Diego to the south, 22 million residents are coping with about three-quarters of the state’s coronavirus infections and deaths.

Experts say the disparity can be attributed to the Los Angeles region’s move to issue stay-at-home orders three days later than the Bay Area’s, as well as more facilities housing elderly
people and more low-income minority residents, who have been disproportionately affected by the virus.

The differences could result in significantly different economic trajectories for the two regions in the months and years to come. Northern California is poised to recover faster than the South because its fewer cases will likely allow it to loosen business restrictions earlier, said Jeff Bellisario, executive director of the Bay Area Council Economic Institute, a San Francisco think tank.

“With that ability of small businesses to reopen, that definitely has the Bay Area ahead of L.A. when you think about economic recovery in the near term,” he said. “In L.A., it appears the future is much more uncertain.”

The Bay Area is also poised to rebound more quickly in the longer term because it has so many more people in technology jobs who can work remotely, Mr. Bellisario said. Roughly 20% of the workforce in the Bay Area is in high-tech jobs, compared with just 9% for the Los Angeles region, he said.

The city and county of Los Angeles imposed a stay-at-home order three days later than six counties in the Bay Area.

PHOTO: CINDY YAMANAKA/ZUMA PRESS

Despite having the highest population of any state, California as of Sunday had the fifth-highest number of Covid-19 infections, at about 79,000, behind New York, New Jersey, Illinois and Massachusetts.

Experts attribute that in part to the move of six counties in the Bay Area to issue the nation’s first stay-at-home orders to a large population, on March 16. The area in February recorded the nation’s first fatality from Covid-19, the disease caused by the new coronavirus. “Viruses don’t know boundaries,” Cindy Chavez, president of the Santa Clara County board of supervisors, said of the decision to act in concert with other counties.
The city and county of Los Angeles issued similar orders three days later, the same day Gov. Gavin Newsom put the whole state on lockdown.

“The problem is the Covid replicates quite quickly,” said George Rutherford, professor of epidemiology at the University of California, San Francisco. “Even delays by as much as a couple of days mean you get four times the cases.”

Health-care workers carried belongings of a patient to an ambulance at the Magnolia Rehabilitation & Nursing Center in Riverside, Calif., on April 8.

PHOTO: WILL LESTER/ASSOCIATED PRESS

Los Angeles County Public Health Director Barbara Ferrer said officials there moved to a lockdown order after the disease was being transmitted through the general community.

UNDERSTANDING THE CORONAVIRUS

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While infections might have been reduced by an earlier lockdown, she said, the region's large population, poverty and diversity made it a more inviting target for the coronavirus.
Los Angeles has significantly more African-Americans and Latinos than San Francisco. Combined, they have made up about 47% of the Covid-19 deaths in Los Angeles County.

Ninez Ponce, director of the Center for Health Policy Research at the University of California, Los Angeles, said nationally African-American and Latino communities have suffered an unusually high rate of infections.

“Lack of access to health care and also with that, a disproportionate burden of some chronic conditions for communities of color, that’s getting exacerbated, or spun out more in places like Los Angeles,” Ms. Ponce said.

Across Los Angeles, about half of deaths have been reported in residential facilities, including nursing homes, homeless shelters and jails, all of which have been national hot spots for Covid-19.

Mr. Newsom has been cautious in easing the statewide lockdown, allowing only counties whose infections and deaths fall below prescribed thresholds to move to the second stage of a four-stage opening process beginning May 8.

Despite being more affected by the coronavirus, Los Angeles County began allowing florists, book stores and many other retailers to offer curbside service May 8, a step San Francisco and some other Bay Area counties are planning for Monday.

San Francisco is planning to allow florists to open on Monday.
PHOTO: DAVID PAUL MORRIS/BLOOMBERG NEWS

Los Angeles authorities said they felt the need to ease restrictions because of how few people can work from home. “We just have a lot of people who are unemployed and a lot of people who are struggling,” Ms. Ferrer said.
In Santa Monica, a beach city in Los Angeles County, Rocco Ingala on May 8 opened his Angel City Books & Records for the first time in weeks and sounded pleased even though he had few orders for curbside service. Among the books requested by one customer: Gabriel García Márquez’s “100 Years of Solitude.”

“It’s just something I think is more of a feel-good kind of step,” Mr. Ingala said of reopening the store before customers are allowed back inside the store to browse. “And I can reconnect with the community and my loyal clients. Let everyone know that we are still here.”

Los Angeles authorities said they felt the need to ease restrictions because relatively few people can work from home.

PHOTO: WATCHARA PHOMICINDA/ZUMA PRESS

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Write to Jim Carlton at jim.carlton@wsj.com and Alicia A. Caldwell at Alicia.Caldwell@wsj.com
Why Researchers Hope to Test High-Risk Groups

Monday: California has lagged in Covid-19 testing.

By Max Brimelow, Julie Chang, Pedro Cota, Alex Matthews and Kristen Hwang

May 18, 2020, 9:02 a.m. ET

Diane del Pozo administered a test for Covid-19 to Ollie Harris at an Oakland homeless camp last month. His test was among the first in a new partnership between a local health clinic and U.C. Berkeley's Innovative Genomics Institute. Pedro Cota

Good morning.

(If you don’t already get California Today by email, here’s the sign-up.)

Today, we have another dispatch from the University of California, Berkeley Graduate School of Journalism, written by Max Brimelow, Julie Chang, Pedro Cota, Kristen Hwang and Alex Matthews:

OAKLAND — In his 20 years in and out of homelessness, Ollie Harris, 69, has seen a lot of things. But what happened on a recent Friday was new.

Sitting outside his tent on a patch of ground he and his wife staked out near Lake Merritt, he watched a white van pull up and two women step out wearing surgical masks and latex gloves.

“Would you like to be tested today?” one of them asked. “I might as well,” Mr. Harris replied. A nurse quickly swabbed Mr. Harris’s nostrils and throat and then jotted down his information.

Mr. Harris was one of the first people tested under a new type of collaboration that has emerged as a distinctive feature in California’s fight against Covid-19.

So far at least six new testing initiatives are led by health experts at California’s top public and private universities. They aim to fill gaps in knowledge about the disease’s prevalence, unravel mysteries about survivor immunity and answer other looming questions as California begins to ease its lockdown.

Some universities are working independently, others in partnerships with county health departments and community clinics. Most are developing their plans on the fly as they race to get ahead of the fast-moving virus. So far, their work has raised as many questions as it has answered. But there have also been intriguing, if still tentative, findings.
The initiative that tested Mr. Harris, for example, has found just four positive cases out of the 233 homeless people it has tested so far. Another initiative found stark contrasts in infection rates based on whether a person was able to work from home or not. Other university-led studies suggest California remains a long way off from achieving the sort of herd immunity that would slow the virus's transmission from a gallop to a crawl.

[See which California counties have the most coronavirus cases.]

The university health experts leading these efforts said they acted to fill a void. Eva Harris, an infectious disease specialist at the University of California, Berkeley, said that watching the virus spread around the world while bickering government leaders hesitated to act was like witnessing the Titanic speeding toward the iceberg. “We finally just said, 'OK, it hit,' and still nothing happened, so we need to get involved,” she said.

While governments at every level and in every region of the United States have struggled to provide enough testing, California has been notably sluggish.

The first known Covid-19 death in the United States happened on Feb. 6 in Santa Clara County. Three months later, government testing in the state remains spotty, in part because of its decentralized and tangled network of test providers spread across a population of 40 million. While California now conducts more than 30,000 tests per day — compared with a few hundred a little more than a month ago — only 26 of every 1,000 Californians have been tested, ranking the state 26th in the nation.

Among the vast numbers of the untested are many high-risk groups, but none more so than the 150,000 homeless people living throughout California. Their encampments, often crowded and lacking basic sanitation, could provide a place for the virus to flourish or rekindle.

One of the most aggressive efforts currently underway to examine the extent of infection in homeless encampments is being led by the Innovative Genomics Institute, a biochemistry lab at the University of California, Berkeley, best known for its work at the forefront of the CRISPR gene-editing process, and Lifelong Medical Care, a community health center also based in Berkeley. The two have begun expanding testing to low-income and homeless populations in Alameda County, including the test given to Mr. Harris at the Lake Merritt camp.

[Read more about California's testing capacity.]

The institute offered Lifelong high-speed automated processing of 5,000 tests, with more to come. Lifelong, which serves about 66,000 patients, had performed fewer than 300 diagnostic tests before the partnership.

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“If we can't help the vulnerable, what are we doing?” asked Fyodor Urnov, the institute's scientific director for technology and translation.

Not far from Dr. Urnov’s office on the Berkeley campus, two professors in the School of Public Health have teamed up for a different kind of study. Dr. Harris, the infectious disease expert, and Lisa Barcellos, a genetic epidemiologist, are investigating the infection’s spread throughout the Bay Area.

They are testing thousands of residents to look for the presence of active Covid-19 virus as well as antibodies in the blood. This could reveal patients who were exposed but never showed symptoms, and it could also shed light on how widespread the disease truly is in California.

The University of Southern California and Stanford University recently released preliminary results of their own antibody studies estimating that between 2 percent to 5 percent of the populations of Los Angeles County and Santa Clara County have been infected, higher than previously believed, but also a potential indicator that California is far away from achieving any possible herd immunity.

However, both studies continue to draw attacks over unconventional methodologies, including the use of a test kit that is not approved by the Food and Drug Administration.
As first reported by BuzzFeed News, the Stanford study is now under scrutiny for not disclosing a potential conflict of interest.

One of the larger testing efforts comes from the University of California, San Francisco's Division of Infectious Diseases, which, in collaboration with community organizations and local health departments, recently concluded testing of nearly 5,000 people in two different communities — the largely upscale oceanfront town of Bolinas in Marin County, and the Mission District in central San Francisco.

The two studies used diagnostic and antibody tests to understand how the virus moves through rural versus urban populations.

[What are your chances of catching the virus outdoors? Here's what to know.]

U.C.S.F. chose the Mission because the community's Latinx population was hit hard in the initial outbreak. Bolinas became part of the university's research focus when two of its residents, Cyrus Harmon, a biotech executive, and Jaeri Engström, a venture capitalist, proposed to get every person in their town tested. When they consulted U.C.S.F. for guidance, they were brought into the university's Covid-19 testing program for comparison with the Mission study.

Initial results released in early May correlate the highest infection rates to low-wage and essential workers who, for economic reasons, have no choice but to work outside the home.

Of the 2,959 people tested in the Mission, 62 tested positive. Of those who tested positive, 90 percent said they were unable to work from home and nearly as many said they earn less than $50,000 a year. Ninety-five percent of those who tested positive were Latinx, although only 44 percent of the overall sample were Latinx.

Of the 1,845 people tested in Bolinas, none tested positive.

“The virus exploits pre-existing vulnerabilities in our society,” Diane Havlir, a physician involved in the U.C.S.F. study, said.
California’s prisons and jails have emptied thousands into a world changed by coronavirus

Edward Harris of Los Angeles is one of 3,500 people given early release from prison during the pandemic. (Gina Ferazzi/Los Angeles Times)

By MATT HAMILTON, JAMES QUEALLY, ALENE TCHEKMEDYIAN

MAY 17, 2020 | 5 AM
In short order, the coronavirus pandemic has ushered in a sweeping and historic emptying of California’s overcrowded prisons and jails, as officials have dramatically lowered the number of people held in custody to avert deadly outbreaks.

State data show California’s prisons have released about 3,500 inmates while the daily jail population across 58 counties is down by 20,000 from late February.

The exodus is having a profound and still-evolving effect: Those leaving custody enter a vastly different world in which a collapsed economy, scant job opportunities and the closure of many government offices have compounded the challenges of getting lives back on track.
Reentry programs are struggling to meet the deluge of incoming inmates as the disease has forced them to close shelters and serve fewer people.

“People are continuously getting out. ... Where are those folks going?” said Jay Jordan, executive director of Californians For Safety & Justice, a nonprofit criminal justice reform group. “Seventy-five percent of people getting out of prison right now have no plan. Nowhere to go.”

Some of those released from jails unknowingly carry the novel coronavirus, potentially infecting family, friends and the community. Advocates say many run the risk of ending up homeless when jailers don’t connect them to services.

Others have taken advantage of the pandemic to commit more offenses, in some cases within hours of leaving jail. Law enforcement leaders and many district attorneys see an intensifying public safety threat posed by the mass release as well as a trampling of the rights of crime victims.
“There was a one-size-fits-all approach which was really difficult to understand,” said Sheriff Ian Parkinson of San Luis Obispo County, where no jail staff or inmates have contracted the virus. “Now I’m putting people out on the street that a judge might not put out.”

Inmates walk to their cell blocks at the L.A. County Jail. (Gina Ferazzi / Los Angeles Times)

‘It would be very difficult if we did nothing’

On a typical day, there are still just over 50,000 people in California’s constellation of jails and 116,000 in state prisons.
The releases have been accomplished through a patchwork of measures, nearly all of which have generated controversy, including reduced bail for some and early release for those due to be out within 60 days. Others awaiting trial gained freedom through approvals from prosecutors, public defenders and judges, a process that resulted in about 700 people in L.A. County getting out. Such measures have pushed L.A. County’s jails — the largest system in the nation— from a pre-pandemic population of 17,000 down to less than 12,000.

“It would be very difficult if we did nothing, and left all 17,000 inmates in, to contain the spread of this disease,” said Dist. Atty. Jackie Lacey.

Perhaps most controversially, the state Judicial Council ordered zero bail last month for misdemeanor and low-level felonies.

The high risk of infections in institutional settings such as nursing homes have informed decisions to reduce jail and prison populations.

Fears of widespread outbreaks have been borne out: At the federal prison at Terminal Island, about 700 inmates have tested positive for the coronavirus, and eight have died. More than 900 inmates in a federal prison in Lompoc contracted the virus, the worst outbreak in the federal prison system. Five died at the men’s prison in Chino, where 443 inmates have tested positive for the virus.

Dr. Mark Malek, the former director of infection control and epidemiology for the L.A. County Sheriff’s Department, said jails and prisons are constantly challenged by infectious diseases, but COVID-19 poses particular threats.

“Social distancing can be done to a certain degree, but you can’t take 100 people in a dorm and quarantine them separately. You have to quarantine them in the dorm,”
Malek said. “And we are not dealing with a 100% perfect healthy population here.”

Edward Harris of Los Angeles is one of thousands of inmates given early release. A criminal justice advocacy group got him a hotel room. (Gina Ferazzi/Los Angeles Times)

‘Who’s answering the phone?’

Edward Harris, whose record includes convictions for domestic violence and being a felon in possession of a firearm, was scheduled to walk out of Centinela State Prison in the Imperial County desert in late May when a parole officer told him “You’re gonna be leaving fast” and to pack up.

CALIFORNIA

California to release 3,500 inmates early as coronavirus spreads inside prisons

March 31, 2020
He was among the 3,500 prison inmates who had their release accelerated by Gov. Gavin Newsom. But instead of going home, an old warrant caused him to be transferred into Riverside County’s jail system, which was also experiencing an outbreak.

He was finally released the night of April 9, but had no place to go. His family was hunkering down in Texas, and he didn’t know if he could reach any friends nearby.

“They got a phone right there that you get to use, but once again it’s a collect call from a payphone,” Harris, 35, said in an interview. “Here it is like 10 o’clock at night, who’s answering the phone? A collect call at that?”

A lifeline came in the form of a phone number scrawled on a post-it note by his cellmate connecting him with Jordan’s group, which has paid for his hotel room.

Advocates and service providers statewide have reported a similar lack of planning over the flood of early releases. Susan Burton, founder of the reentry program A New Way of Life, said the L.A. County Sheriff’s Department refused to coordinate releases from its women’s jail.

Last month, about an hour before Burton set out to pick up a woman eligible for release because of a preexisting medical condition, the Sheriff’s Department called and told her not to come. Burton said she doesn’t know where the woman ended up.
“I felt it was really painful that they would rather just release the person instead of having a designated place for this woman to shelter in place,” said Burton, who opened a nine-bed house to prepare for the surge of early releases.

Challenges persist even when jails do coordinate with reentry groups. When Santa Clara County became an early locus of outbreaks, the Sheriff’s Department asked one of the largest local shelters, Home First, to expect an influx of 200 to 300 inmates. Home First had to turn them away.

Andrea Urton, chief executive of the Milpitas shelter, said she had to make the difficult choice of protecting those already under her care from potential infections.

“We felt that we needed to make the decision because if we loaded up our facilities to max capacity ... we would have an outbreak in our homeless shelters,” Urton said.
An inmate puts his hand through the cell bars on the 3000 floor of L.A. County Men's Central Jail as sheriff's deputies patrol. (Jay L. Clendenin / Los Angeles Times)

In Los Angeles County, Homeboy Industries had to temporarily close its doors in mid-March due to financial headaches and distancing restrictions just as nearby Men’s Central Jail was releasing scores of inmates.

“We see the guys that come from the county jail, in their black paper jumpsuits,” said associate executive director Hector Verdugo. “And we’re saying, ‘I’m sorry brother, but our doors are closed for now due to COVID-19, but here’s a care package.’”

Reentry providers statewide said the failure of some jailers to guide those who are being released toward transitional housing could encourage recidivism. Many ex offenders had no homes to go to before the pandemic, and with shelter and employment options more limited now, some may wind up stealing to survive.
“They are releasing people .... that have nowhere to go. Then the sheriff’s departments are turning around saying these people will commit crimes,” Jordan said. “How inhumane is that?”

In L.A. County, the Office of Diversion and Reentry typically helps inmates with mental illness or substance abuse problems find housing, but the coronavirus has forced a new strategy.

“We slowed our work down in court and shifted our resources to address the number of people released from jail,” said Peter Espinoza, a retired Superior Court judge who now heads the office. Espinoza said they added 211 beds in new housing sites, and found housing for more than 170 inmates in a two-week period.

He said inmates in L.A. County generally are not being tested for COVID-19 before their release unless they show symptoms and many service providers now are checking for symptoms when they arrive.

The case of Frank Cooper underscores the risks of inmates as a vector for spreading the virus. Cooper was scheduled to be released from Riverside County jail in November, but was let go on April 24 to serve the rest of his term on house arrest. On his way out, jail staff wore gloves and masks, and put his personal belongings in a bag marked “COVID.”
Deputies work in a secure section of the Men’s Central Jail. (Luis Sinco / Los Angeles Times)

Cooper was confused — he wasn’t sick and hadn’t even been tested. But a deputy who drove Cooper to the county jail in Banning to be released said the measures were necessary because his dorm was quarantined. Before leaving, a nurse took his vital signs and swabbed him for the virus.

Riverside County officials have yet to officially give him his results. Cooper sought his own test and learned May 2 that he was positive for the coronavirus.

“It’s only because I’m a nurse and I did take some precautions,” said his wife, Jackie Cooper. “If I had just been a lay person going to pick him up with no mask, kissing him, hugging him ... it could be a different scenario now.”

‘I had anticipated hitting the ground running’
Once outside, the closure of businesses and government services poses daily obstacles. Angela Hernandez, 38, was released from prison March 19, the day Newsom announced a statewide shelter-in-place order. She secured a spot at one of Burton’s reentry homes in L.A., but needed to return to Bakersfield for a parole check-in and feared riding a bus would risk exposure to the virus.

“I didn’t want to put myself in a bad predicament, but I didn’t want to wait it out either,” Hernandez said.

Burton said she ended up driving Hernandez to Bakersfield. When they arrived, Burton said, the parole officer wasn’t there. She checked in and filled out some paperwork, ending a trip they both viewed as unnecessary.

After nearly 11 years in state prison, Sureka Weinberg, 42, was released April 17 and entered a South L.A. residential program.
The DMV is closed, so Weinberg can’t get a new identification card. She doesn’t know where her Social Security card is, can’t open a bank account and doesn’t have a credit history.

“I had anticipated hitting the ground running,” said Weinberg, who according to public records was an attorney before the fatal DUI crash that landed her behind bars. “Not only am I just not able to do that, but I’m anonymous as far as society’s concerned.”

Weinberg said she spends her newfound freedom studying online, taking Alcoholic Anonymous meetings via Zoom, and performing household chores.

‘Mass hysteria’ to empty jails and prisons

Police agencies have been quick to single out re-offenders. Alameda County has released nearly 1,000 inmates since March 15 and about 30 have been rearrested, said Sgt. Ray Kelly.

Among them was Rocky Music, whose antics were detailed on the Sheriff’s Department Facebook page. Music was first detained on April 19 by Oakland police on suspicion of driving a stolen vehicle. Twelve hours later, he was released because of the zero bail order.
Kelly said that 37 minutes later, he allegedly carjacked someone near a transit station in Dublin, and drove the car to a San Ramon gas station, where he tried to carjack a second vehicle. Police responded, chased Music and ultimately detained him using a police dog, Kelly said.

“There was mass hysteria to de-incarcerate over COVID-19, and in our county it’s proven not to be based on fact or scientific evidence, but based on fear,” Kelly said.

The Alameda County jail population went from a pre-pandemic average of 2,600 to about 1,775 people. More than 50 inmates and two staff have tested positive for the coronavirus, and all but 14 current inmates have recovered.

Still, Kelly conceded it “helped tremendously” that fewer people were in custody and social distancing could be implemented, especially in the large dorm that houses minimum-security prisoners.

In San Luis Obispo County, Sheriff Parkinson said his agency took “a pretty aggressive stance” on the coronavirus: New inmates stay in a quarantine area for 14 days before going into the general population. Staff wear masks, and sheriff’s deputies and inmates are given regular temperature checks. All 10 inmates who were tested had negative results.

Parkinson said his deputies supply all those released with Narcan, a prescription drug to treat opioid overdoses. Jail staff try to provide several days worth of medications, but the zero bail has limited their ability to get an accurate medical history when those arrested are swiftly released, he said.

San Luis Obispo County Dist. Atty. Dan Dow said repeat offenders face few consequences, with criminal trials suspended and bail for many nonviolent offenses
eliminated.

“Bail is there to make sure a person has an incentive to come to court and remain crime-free,” Dow said. “Just releasing them on zero bail — they have nothing to lose.”

In one Orange County case, a man charged with vehicular manslaughter in connection with a street racing crash that left two people dead saw his bail fall from $100,000 to $20,000. The man was released last month, said Dist. Atty. Todd Spitzer.

“There comes a point where you have to weigh that the inmate might get a particular disease — which they might get outside of jail, that we all might get it outside of jail — against the public safety and the propensity that these people might commit crimes against another individual,” Spitzer said.

Others argue that California’s criminal justice system has long jailed too many for minor offenses and welcome the releases.

San Francisco Dist. Atty. Chesa Boudin, a former public defender and champion of more progressive law enforcement policies, said early releases there included a woman with a high-risk pregnancy and no criminal record who was serving time for a misdemeanor as well as another person too mentally ill to stand trial.

The surge in releases highlights a need to fund more rehabilitative programs, he said.

“One of the great failings of the American system of mass incarceration is its refusal to invest in reentry. ... It helps create and perpetuate a cycle of crime and violence, of poverty and victimization,” Boudin said. “It is possible to decrease the number of people in our jails and in our prisons in a way that does not impact public safety and does not lead to an increase in crime.”
Coronavirus may have spread at a church service. Now the pastor is speaking out
A cell, in greenish brown, heavily infected with the coronavirus, officially called SARS-CoV-2, that causes the COVID-19 disease. (National Institute of Allergy and Infectious Diseases—Integrated Research Facility)

By LAURA NEWBERRY  
STAFF WRITER  
MAY 17, 2020 | 8:22 PM

A Butte County pastor who defied public health officials and held an in-person Mother’s Day service that potentially exposed 180 congregants to the coronavirus has spoken out about his decision on social media.

In a Facebook post on Friday, pastor Mike Jacobsen of Palermo Bible Family Church said that an asymptomatic congregant who attended the May 11 service woke up the next morning “needing medical attention” and was tested for the coronavirus that day. The congregant received positive test results for COVID-19 two days later.

Jacobsen, who with his wife has led the pentecostal church since 2008, said in the post that he would “never with knowledge put anyone in harms [sic] way.”

“For 7 weeks we have been kept out of our church and away from our church family,” Jacobsen wrote in the post, which has since been deleted. “I am fully aware that some people may not understand that for our church it is essential to be together in fellowship.”
Reached by phone Sunday night, Jacobsen confirmed that his church was the site of possible contagion, but declined to immediately comment on the situation, saying he needed some time to think about it before making a statement.

Without naming the church, Butte County health officials on Friday issued a warning to residents, asking them to not speed through the reopening process. The officials said it had come to their attention that nearly 200 people could have been exposed to the coronavirus through the Mother’s Day service.

“At this time, organizations that hold in-person services or gatherings are putting the health and safety of their congregations, the general public and our local ability to open up at great risk,” Danette York, county public health director, said in a statement that urged residents to follow stay-at-home orders.

Local health officials are attempting to notify every person who attended the service and instruct them to self-quarantine. They are also are working with healthcare partners to obtain testing for all attendees, the news release said.

Butte County is one of 22 counties that has certified to the state that it meets the conditions for additional businesses to reopen. But gatherings of any size remain prohibited, even in counties that are reopening more quickly than the rest of California.
As California reopens, officials hope social distancing prevents new coronavirus outbreaks

Churches in Oceanside and Chula Vista hold in-person services despite public health orders

Column: Filipino nurses battled discrimination to work in American hospitals. Now they fight for PPE

“Moving too quickly through the reopening process can cause a major setback and could require us to revert back to more restrictive measures,” York said.
On Wednesday, Jacobsen spoke of his decision to open the church on Mother’s Day during a Facebook Live Bible study.

Jacobsen said it’s important for Palermo Bible’s many young, new believers to be supported in their fledgling faith — and part of that is being able to attend church in person. He compared the act of depriving these congregants of in-person worship to taking “an infant out of the arms of its mother.”

“We’ve really tried to raise the bar and do a good job with what we’ve been given,” Jacobsen said of virtual services, “but it’s not the same as being together in fellowship with one another.”
Person with coronavirus attends Mother’s Day church service, exposes 180 in Butte County

Almost 200 people at a Mother’s Day church service were exposed to the coronavirus by an attendee with COVID-19, officials say. Shown is a microscope image of the coronavirus, which causes COVID-19. (National Institute of Allergy and
After a person who attended an in-person religious service on Mother’s Day tested positive for the novel coronavirus, public health officials in Butte County issued a strongly worded warning to residents not to speed too quickly through the reopening process.

The person received a positive test result the day after the service, which had more than 180 attendees, officials said Friday in a news release.

Gatherings of any size remain prohibited, even in counties that are reopening more quickly than the rest of California. But the organization that held the service chose to open its doors despite the rules, exposing the entire congregation to the coronavirus, officials said.

“This decision comes at a cost of many hours and a financial burden to respond effectively to slow or stop the spread of COVID-19,” the release said, noting that health officials are working to notify all those who attended the service and instruct them to self-quarantine. The county health department also is working with healthcare partners to obtain testing for all attendees, officials said.
“At this time, organizations that hold in-person services or gatherings are putting the health and safety of their congregations, the general public and our local ability to open up at great risk,” Danette York, county public health director, said in a statement urging residents to follow stay-at-home orders.

“Moving too quickly through the reopening process can cause a major setback and could require us to revert back to more restrictive measures,” York said.

Butte County is one of 22 counties that has certified to the state that it meets the conditions for additional businesses to reopen.

The county’s public health officer, Andy Miller, announced Saturday that he was resigning effective July 10. The decision was not related to any particular incident or disagreement, the county public health department said in a news release.

Miller’s contract was up for renewal in the fall and he wanted to give the health department more time to recruit a replacement, the release said.

“We are prepared to recruit for a health officer who, like Dr. Miller, will lead us as we bring our economy back and keep this virus at bay,” Shari McCracken, the county’s chief administrative officer, said in a statement.

The vast majority of religious institutions have followed the state’s stay-at-home order. But a few churches have challenged it and in some cases held services.
Earlier this month, a federal judge ruled that California Gov. Gavin Newsom had the right to ban church assemblies in the interest of public health during the coronavirus outbreak.

Newsom’s stay-at-home order did not violate the constitutional rights to free assembly and religion when the Cross Culture Christian Center in Lodi was ordered to cease holding services, Judge John Mendez ruled in Sacramento.
Hundreds of churches plan to open this month, likely ahead of state’s schedule

By Rene Ray De La Cruz
Staff Writer

Posted May 17, 2020 at 11:19 AM

HESPERIA — Religious and government leaders, including State Sen. Scott Wilk and Assemblyman Jay Obernolte, are putting pressure on Gov. Gavin Newsom to allow houses of worship to reopen.

Along with other members of the state Senate and Assembly Republican caucuses, Wilk and Obernolte signed a letter sent to Newsom urging him to allow churches and other houses of worship to reopen as part of California’s Phase 2.

“We did the initial shutdown and we sheltered at home, but it’s now placing a strain on the spiritual, mental and physical health of our residents,” Wilk told the Daily Press. “As long as social distancing is practiced and people are responsible, there is no reason why people can’t assemble at church.”

Without Newsom’s permission, thousands of pastors in California plan to bypass his executive order that banned gatherings by reopening their church doors on Pentecost Sunday, May 31.

Pastor Jack Hibbs of Calvary Chapel Chino Hills is one of many church leaders who recently signed the online “Declaration of Essentiality of Churches” that accompanied a letter sent by clergy to the state.

“We have petitioned numerous times through legal avenues to get an answer from the governor’s office as to when and how does the church meet. When do we get back at it, in doing what God has called us to do?” said Hibbs in an online video. “And with every one of those requests, there’s been either ignorance or there’s been a push off of answering that question.”
Newsom’s “Resilience Roadmap” to gradually reopen California includes four phases. The second began May 8 with the reopening of manufacturing and logistics, and retail stores with curbside services only.

No date has been set for Phase 3, which includes opening higher-risk workplaces that necessitate proximity between people. That includes hair and nail salons, barbershops, gyms, movie theaters and houses of worship.

Last week, the Advocates for Faith Freedom and the National Center for Law and Policy sent the letter on behalf of ministry leaders to Newsom and California Department of Public Health Director and State Health Officer Dr. Sonia Angell.

In the letter, ministry leaders thanked Newsom for his efforts to protect the health and safety of California residents amid the pandemic, including implementing the COVID-19 restrictions via an executive order that established the list of “essential critical infrastructure workers.”

But the pastors told Newsom they believe he overlooked the essential and critical nature of the services provided by clergy and churches throughout the state when the executive order did not list church or religious workers as essential.

The ministry leaders said they collectively agreed to pray for Newsom to receive divine guidance and to consider why church leaders believe his executive order is “unconstitutional, but more importantly, detrimental to the health and safety of California families.”

“ Millions of California residents have a deep and sincere reliance upon their connection with local ministries, churches, synagogues, temples, mosques and the clergy that lead them,” the letter said. “The mandated closure of religious organizations is having a significant and detrimental secondary effect on the citizens of California.”

One example given was that the closure of religious organizations prevents the numerous ministries and social services provided by churches to the poor, unemployed and distressed. The humanitarian and spiritual support provided by ministries are innumerable, the letter said.
"The indefinite nature of the restrictions on faith-based meetings is in violation of the very principles this country was founded upon," the letter said. "The Declaration of Independence was established in a time of fear and distress, but our founding fathers led the colonies with courage and conviction."

They also said Newsom’s executive order is under-inclusive because it doesn’t prohibit a host of equally dangerous or harmless non-religious conduct, including shopping at grocery stores, marijuana dispensaries or liquor stores.

The pastors said they intend to take their appropriate role in the governance of their state. But within Newsom’s orders, they struggle with finding the right balance of public safety and individual liberty considering the effects of COVID-19.

The clergy is convinced that “we the people” are ultimately responsible to protect the individual liberties that may be lost unnecessarily during times of crisis.

Pastor Bill Burnett of New Life Chapel in Hesperia told the Daily Press he’s not ready to pull the trigger on opening his church.
“I don’t want to move forward on opening unless we get clear direction from the Lord on this,” Burnett said. “Right now, our online presence is growing tremendously and we don’t want to hinder that.”

Mountain View Baptist Pastor Rick Stonestreet said he’d like to reopen his church in Hesperia on May 31 but is waiting to hear more from the state before making a final decision.

“We want to open on Pentecost Sunday, but we also want to be responsible,” Stonestreet said. “I believe this executive order is an overreach by the government and waiting to open churches and businesses is like kicking the can down the road.”

Legal counsel for the San Bernardino County Board of Supervisors sent Newsom a letter last week asking for local discretion on determining when and how to open its economy. The letter was signed by Board of Supervisors Chairman Curt Hagman, Vice-Chair Josie Gonzales and the mayors of two dozen cities in the county.

Also last week, state senators Shannon Grove and Mike Morrell issued statements after delivering the letter to Newsom that urged him to allow houses of worship to reopen.

“During this time when people are mourning lost loved ones and struggling in their everyday lives, it is more important than ever that houses of worship be open for millions of Californians to seek hope, encouragement, support, and healing,” Grove said.

Last Friday, San Bernardino County repealed its orders regarding gatherings, face coverings, social distancing, and lodging facilities. The county said gatherings and lodging facilities would still fall under the state’s orders.

The county continues to urge that faith organizations, and all county residents and visitors adhere to safe health practices, including physical distancing and wearing masks.

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As California reopens, officials hope social distancing prevents new coronavirus outbreaks
SAN FRANCISCO — More of California was reopening Monday as coronavirus restrictions continue to be eased in the state, with hopes the changes will help the economy without causing a second wave of the outbreak.

At least three Bay Area counties — San Francisco, San Mateo and Marin — plan to incrementally ease their social-distancing restrictions starting Monday.

They join many other counties across California — including Los Angeles — that are allowing curbside service at some retailers. Officials hope physical distancing rules will allow the businesses to reopen without creating new public health problems. In large
counties in both Southern California and the Bay Area, malls as well as nonessential offices remain closed.

Which California counties are reopening?

San Francisco Mayor London Breed announced last week that all curbside retailers would be allowed to reopen as of Monday for pickup and delivery.

She had cautioned for weeks that San Francisco would be slow to reopen. But at a news conference Wednesday, she said the city’s next phase meant that 95% of San Francisco’s retailers would be allowed to open starting Monday. Warehouses and manufacturers also are allowed to reopen, but the city has imposed a limit on the number of employees allowed in each business.

“We do see the numbers flattening,” Breed said. “They have not declined, but the fact is we are in a better place.” She said hospitalizations for COVID-19 remained flat, and hospital capacity was stable.

Retailers open for curbside pickup are allowed to have no more than 10 employees on site; if the store is small, no more than five. Manufacturers and warehouses may have no more than 50 workers on site, said Dr. Grant Colfax, director of health for the city.
You should expect nothing less. Get the allergy relief you're looking for, all season long.

A U.S. Postal Service letter carrier stands in the middle of Powell Street in San Francisco. San Francisco, San Mateo and Marin plan to incrementally ease their social-distancing restrictions starting Monday. (Justin Sullivan/Getty Images)

All open businesses must ensure social distancing, mask-wearing and have in place a health and safety plan, he said.

San Mateo County officials said conditions had improved enough to modify the stay-at-home requirements.
“I want to remind everyone these modifications are not being made because it is safe to be out and about,” Scott Morrow, the county’s public health officer, said in a statement. “The virus continues to circulate in our community, and this increase in interactions among people is likely to spread the virus at a higher rate.”

On Tuesday, Dr. Sara Cody, a key architect of the nation’s first regional shelter-in-place order, told Santa Clara County officials it was too soon to move to a Phase 2 reopening, even as the rest of the state was doing so.

“The conditions really haven’t changed in our county,” she said. “We don’t suddenly have herd immunity; we don’t have a vaccine. We have exactly the same conditions as we did in March.”

Cody described Santa Clara County as precariously balanced. The outbreak is steady — neither seeming to grow dramatically or reduce considerably. For every one person infected, that person on average infects one other person. If that number, known as the basic reproduction number, rose slightly to 1.1 or 1.2, that would cause a significant rise in deaths, Cody said.

Businesses around the Los Angeles area this weekend began to figure out what the new normal looked like as restrictions were eased. Curbside pickup was allowed, but social-distancing rules required that the public not enter stores that didn’t provide essential services such as food and medicine.
At the Original Farmers Market in Los Angeles, Kip’s Toyland reopened with only one worker per shift as coronavirus stay-at-home orders finally eased a bit.

The store was not allowing anyone inside Saturday, but that didn’t stop customers from trying.

“We have had a surprising amount of people that have actually come up to the door even though we’ve been trying to do mainly phone orders,” employee Eli Margolis said, “so I’ve been doing this kind of crazy thing of having to run around the whole store and show them something they might like.”

“It was kind of difficult. But that’s on me to kind of figure out and make suggestions.”

Margolis said there had been four customers at the retro toy shop by early Saturday afternoon. He sold some puzzles, a hobbyhorse and the Sorry! board game.

“For the most part, I think it’s still kind of this weird stagnant period right now, especially with everyone still trying to refigure out — especially stores like us trying to redo our whole game plan and figure out how to kind of function in this new world,” he said. “It’s strange for sure.”

Other retailers said it would take time to figure out this new moment.

“It doesn’t feel normal,” said Donna Tabut, assistant manager of Book Alley in Pasadena. “We’re primarily a used-books store. A lot of customers, they like to look at the book.”

Browsing is a key part of the store’s business model, she said.
“Someone will come in, they can’t find the book that they were looking for, and they’ll come up to the register with 10 books that they weren’t expecting to find.”

Still, the store was taking orders through its website, as well as by phone and email. Customers were also able to walk up and look at the display window.

“As long as you’re six feet away from the store wearing a facial covering, we’ll try to assist you in whatever way we can,” Tabut said. “But we can’t allow anyone into the store at this moment.”

Urban parts of California have been hit much harder than many rural areas, and some rural counties are reopening at a much faster clip than urban areas. As the state moves into what Newsom has deemed Phase 2 of its reopening plan, it has become possible for those regions less impacted by the coronavirus to go further in terms of reopening businesses, provided they meet certain criteria.

Nearly a third of California’s 58 counties have certified to the state that they have contained the spread of the virus, which allows them to reopen restaurants to dine-in service, as well as shopping malls and other businesses, Newsom said Thursday.

Those 19 counties are mostly in rural areas of Northern California with small populations. They represent about 4.5% of the state’s population and do not include urban centers such as Los Angeles or San Francisco.
The state is continuing talks with other counties that are trying to reopen to ensure they meet state standards for testing, hospital availability and numbers of coronavirus cases.

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Alex Wigglesworth is a staff writer at the Los Angeles Times.

Christopher Goffard

Christopher Goffard is an author and a staff writer for the Los Angeles Times. He shared in the 2011 Pulitzer Prize for the paper’s Bell coverage and has twice been a Pulitzer finalist for feature writing, in 2007 and 2014. His novel “Snitch Jacket” was a finalist for the Edgar Allan Poe Award for Best First Novel. His book “You Will See Fire: A Search for Justice in Kenya,” based on his Times series, was published in 2011.
Coronavirus: Death toll inches past 1,800 in Los Angeles County

A return to beaches and slight relaxing of health orders at retail stores arrived, but, sadly, so did more deaths.
While people returned to beaches around Los Angeles County over the weekend, the public health department reported on Sunday, May 17, that the number of fatalities related to the novel coronavirus climbed past 1,800 in the county, the deadliest such toll in the state.

Beaches were only for “active use,” meaning picnicking and sunbathing were still off limits in the effort to “flatten the curve” of the virus’ spread.

The virus’ impact remained steady, meanwhile. An additional 29 deaths in L.A. County brought the total to 1,821 people who have died from complications related to COVID-19, the disease caused by the novel coronavirus, since the pandemic began.
The numbers have dipped the past few weekends, but officials have charged that to scaled-down weekend record-keeping, as the numbers have inched back up during the week. Officials will assess again this week, hoping to see statistical signs that the outbreak is declining.

Another 37,974 people have tested positive for the disease, with 694 new confirmed cases reported Sunday. Many of them have likely recovered already though the county does not collect those records.

Among those who died, 92% had pre-existing health conditions, and roughly half of all deaths have occurred at nursing homes.

Sunday’s tally did not include same-day reports from Long Beach and Pasadena, which operate their own health departments. Long Beach reported separately Sunday 27 more cases and no new deaths. The city has so far reported a total of 51 fatalities from COVID-19 and 1,298 positive cases, 830 of whom have recovered. Pasadena reported 10 additional cases, bringing its total to 694, but added no new deaths to its total of 69.

The daily number of deaths and confirmed cases on Sunday have become almost routine news, though for the loved ones of those who died, life has been anything but normal.

County health officials were watching closely public behavior in areas that have been relaxed such as beaches and retail venues. Last week, all retail stores except those in an indoor shopping center were allowed to reopen for curbside pickup. Golf courses, tennis clubs and trails also reopened under a re-issue.

A new health officer order issued Wednesday, May 13, sets the rules going forward. In the weeks and
months to come, the county plans to revise the order to open more parts of the economy such as dine-in restaurants.

Venturing outside was hard to resist for many given the warm temperatures and clear skies. In Hermosa Beach, where beachgoers eagerly got their feet wet for the first time in months, police patrolled the sand to prevent sunbathing.

Public health officials have warned that if they see a spike in deaths and hospitalizations they could reimpose certain restrictions. Current hospitalizations as of Sunday were down to 1,648, with 26% in intensive care units and 19% on ventilators. The highest number of hospitalizations occurred on April 28 when 1,962 people were receiving care.

With hospitalizations appearing stable in recent weeks, the surge capacity of beds that were urgently readied have been barely used. The USNS Mercy left port on Friday for San Diego having treated 77 patients. And at St. Vincent Medical Center, where Dignity Health and Kaiser Permanente partnered with the county and state to bring online a 266 bed hospital in a matter of weeks, it was serving about 35 patients last week.

On Saturday, Public Health Director Barbara Ferrer said L.A. County residents should rethink plans for any trips this summer, but camping wasn’t out of the question with members of the same household. Ferrer made the remarks during a virtual town hall hosted by L.A. County Supervisor Sheila Kuehl, District 3.

Race and ethnicity continued to be an area that public health officials monitored closely, especially how it relates to African Americans and Pacific Islanders/Native Hawaiians who continued to experience disproportionate outcomes in deaths and confirmed cases.

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California homeless quarantine in hotels, more rooms needed

By CHRISTOPHER WEBER and JANIE HAR  yesterday
LOS ANGELES (AP) — Anxiety mounted every time someone at the homeless shelter sneezed or residents got too close. For Matthew Padilla, a 34-year-old with a pacemaker and asthma, catching the novel coronavirus would likely mean death.

So he jumped at the chance to move into a hotel room for free as part of a new California program. Within days, he and his husband, Nito, were in a room near Los Angeles’ Koreatown, where meals are delivered along with health screenings.

“At the shelter I was constantly getting up, checking on him,” said Nito Padilla, 36. “And here I know he’s safe. I know he’s OK.”
The Padillas are among roughly 7,000 people in California who have been moved out of shelters, vehicles and rough streets to ride out the pandemic in hotels, an effort Gov. Gavin Newsom announced in March to shield some of the state’s 150,000 estimated vulnerable homeless.

Newsom has praised the progress, although counties are still struggling to acquire rooms and squabbles have developed in some cities. Local officials say the process has been complicated as they find appropriate hotels, negotiate leases and get staffing in place. It’s something counties have never done at this scale.

New York City has also tried to decompress its shelters, which typically hold more than 57,000 people, by sending homeless people into hotels and other temporary lodging. But only about 3,500 typically live on the streets there, compared to tens of thousands in California’s largest cities.

Some homeless advocates in California say officials should be working much more quickly given the fast-moving pandemic. In San Francisco, which has moved more than 1,000 of its estimated 8,000 homeless into hotels, nonprofits raised money to get rooms for some who couldn’t get them. Activists have pleaded with Mayor London Breed to do more.

St. Anthony’s charity quickly got rooms nearby for 22 people who were staying at its seasonal overnight shelter. Felicia Senigar, the charity’s housing clinic manager, said she cried along with residents as they got socks, hygiene kits, a $50 Walgreens gift card and a bag of groceries. The housing will last for 30 days.

“They had nowhere to go, and for us to send them out there while this was going on,” Senigar said, choking up.

Newsom announced in late March that federal funding would help pay for at least 15,000 hotel rooms during the pandemic. But Los Angeles County, with the state’s largest concentration of homeless people at about 60,000, set its own goal of 15,000 rooms. By Wednesday, the county had housed about 1,800 people at two dozen hotels. County Supervisor Kathryn Barger has said the process was more complicated than officials anticipated, but predicted the numbers would rise.
In his new budget this week, Newsom proposed spending $750 million in federal stimulus funding to buy some of the hotels to permanently house the homeless.

“It is definitely moving too slowly to meet the crisis head on,” said Shayla Myers, senior attorney at the Legal Aid Foundation in LA, which serves vulnerable populations.

Clients must be referred for a room. The names of participating hotels are guarded to protect the privacy of residents and to shield hotels from people showing up wanting a place to stay. The Federal Emergency Management Agency has agreed to pay 75% of the cost of “Project Roomkey” for homeless people who are at least 65, or have health issues, including having contracted the virus.

The Padillas say check-in consisted of a security check, health screening, a recitation of the rules and paperwork. They leave the room for errands, medical appointments or just for a bit of fresh air. Curfew is 7 p.m. and temperatures are checked when people return.

Most people with the virus experience fever and cough for up to three weeks. Older adults and people with existing health problems can face severe illness, including pneumonia and death. The vast majority recover.

The shelter was good about promoting hygiene and implementing social distancing rules, the couple say, but some of their fellow residents didn’t take the threat seriously.

“People were getting mad that they couldn’t sit together at lunch tables,” said Nito Padilla.

Bobby Daniel, who is 65 and was living in his car, says he knew the pandemic was a big deal when cafes shuttered and he could no longer linger over an espresso, working on his laptop.

He was surprised and elated when he got into a Los Angeles hotel room after years trying to get indoors. At one of two hotels run by St. Joseph Center, he has water and soap to tend to his ear, where doctors recently excised a growth. Daniel is free to leave the hotel to exercise and uses a microwave to steam kale, chard and broccoli, a luxury he didn’t have in the decade he’s lived in his car.

“You feel hopeful, you feel peaceful, you feel fortunate, you feel grateful,” Daniel says. “It’s almost hard to believe.”

The isolation can be tough for people used to being on crowded streets, in encampments or
shelters, said Jennifer Hark Dietz, the executive director at PATH, a homeless services nonprofit in Los Angeles.

“So our staff are doing a lot of what we’re calling ‘emotional wellness checks’. Just talking to folks over the phone. Letting them know we’re here to support them. Making sure they are connected to others,” she said.

Caseworkers provide books and puzzles and the rooms have TVs to help pass the time. Residents get fresh air breaks and at one hotel, a walking path in the parking lot allows for socially-distanced strolls.

As director of outreach for the nonprofit The People Concern, Shari Lachin spearheads efforts to get people off the streets stretching from Hollywood to Skid Row in downtown LA. It’s not always easy to convince people to take a hotel room.

Caseworkers had multiple conversations with a man in his mid-60s named Billy who slept on the streets near LA’s Echo Park, Lachin said. He was reluctant to move into a hotel despite struggling with diabetes, asthma and a heart condition. Then he changed his mind and has “done a total 180.”

In San Francisco, officials agreed to house 13 of those put up by St. Anthony’s, said executive director Anthony Ramirez. He’s grateful but he looks out in the Tenderloin neighborhood, where about 2,000 people continue crowding into tents or sleeping on cardboard, and wishes the city were doing more.

“There’s going to be a time to reflect when this is all said and done: What went wrong, what didn’t, were there voids in leadership?” he said. “At least we’re seeing some traction.”

Har reported from San Francisco.
The price of being ‘essential’: Latino service workers bear brunt of coronavirus

Certified nursing assistant Rosa Arenas has been home quarantining since May 2 after testing positive for COVID-19 at her apartment in Orange. (Gary Coronado / Los Angeles Times)

By HALEY BRANSON-POTTS, ALEJANDRA REYES-VELARDE, MATT STILES, ANDREW J. CAMPA
MAY 17, 2020 | 6 AM

For Lupe Martinez, who does the laundry at a Riverside nursing home, each day presented an agonizing choice: Go to work and risk getting the novel coronavirus or lose the $13.58-an-hour paycheck her family relies upon.

Martinez went to work.

Even after the masks started running low. Even, she said, after a patient whose room she had entered without protective equipment fell ill and was put into isolation.
Martinez, 62, tested positive for COVID-19 last month, followed by her 60-year-old husband, who had to stop working after having a heart attack last year. Her adult son and daughter, who live with them, also tested positive.

“There were many times I didn’t want to go to work,” said Martinez, coughing heavily as she spoke. “I didn’t want to get sick. My husband said, ‘Don’t.’ I said we can’t live. We have these bills. ... I had to push myself to go. I had a commitment to my family.”

For low-paid employees whose work is rarely if ever glorified — the people who clean the floors, do the laundry, serve fast food, pick the crops, work in the meat plants — having the jobs that keep America running has come with a heavy price. By the odd calculus wrought by the viral outbreak, they have been deemed “essential.” And that means being a target.
Along with blacks, Latinos have borne the brunt of the COVID-19 pandemic in California and other parts of the United States, becoming infected and dying at disproportionately high rates relative to their share of the population. Health experts say one of the main reasons Latinos are especially vulnerable to COVID-19 is because many work in low-paying jobs that require them to leave home and interact with the public.

Latinos comprise about 40% of California’s population but 53% of positive cases, according to state data. In San Francisco, Latinos comprise 15% of the population but make up 43% of the confirmed COVID-19 cases as of Saturday.

UC San Francisco researchers tested thousands of people in the city’s Mission District for COVID-19. While Latinos made up 44% of the people tested, they accounted for more than 95% of the positive cases. About 90% of those who tested positive said they were unable to work from home.

A Los Angeles Times data analysis last month also found that younger Latinos and blacks were dying at disproportionately high rates, belying the conventional wisdom that old age is the primary risk factor for death.

Latinos in California are significantly less likely than whites, Asians and blacks to say that working from home amid the pandemic is an option, according to a new poll of California voters from the UC Berkeley Institute of Governmental Studies.

**Share of workforce**

Hispanic/Latino workers in California are overrepresented in some industries, U.S. Census Bureau data show.

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<thead>
<tr>
<th></th>
<th>Hispanic/Latino</th>
<th>Others</th>
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<tr>
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<tr>
<td>Agriculture</td>
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Note: Estimates derived from 2018 American Community Survey, not post-coronavirus workforce.

Matt Stiles / Los Angeles Times

Some 42% of Latinos polled said they could work from home, compared with 53% of blacks, 59% of Asians and 61% of whites. The poll also showed that Latinos were nearly three times more likely than whites to be concerned about their jobs placing them in close proximity to others. This was a particular problem in the first weeks of
the pandemic, when masks and other protective gear were in shorter supply and many businesses were still trying to implement social distancing policies.

**Workplace disparities**

Share of California poll respondents who said working from home is an option during the COVID-19 pandemic.

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<tr>
<td>Latino</td>
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Note: Online survey of 8,800 voters statewide
Berkeley IGS Poll
Matt Stiles / Los Angeles Times

“They feel essential; they’re trying to do their part to get us out of this crisis,” said Jose Lopez, a Los Angeles-based spokesman for the Food Chain Workers Alliance. “Yet we can’t provide face masks. We can’t give them the space to give them six feet of separation between their co-workers.”

A Times analysis of U.S. Census Bureau data shows that Latinos make up just under 40% of the workforce across all industry sectors deemed essential by the California state government, consistent with their share of the statewide population. But in some sectors, they are greatly overrepresented.

In essential agriculture jobs, the workforce is more than 80% Latino. They also hold more than half of essential food jobs and nearly 60% of construction jobs deemed essential. At the same time, Latinos in the U.S. are more likely than the overall population to say they or someone in their household has experienced a pay cut or lost a job amid the pandemic, according to a Pew Research Center survey in April.

**Job uncertainty**

Share of workers by group who say losing a job because of COVID-19 is a "very" or "somewhat" serious concern:

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<td>Latino</td>
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Note: Online survey of 8,800 voters statewide
Berkeley IGS poll
Matt Stiles / Los Angeles Times
For weeks, Dr. Marlene Martín, an assistant clinical professor at UC San Francisco and a physician at Zuckerberg San Francisco General Hospital, has watched as Latino patients with COVID-19 have streamed into the emergency room. More than 80% of the hospitalized coronavirus patients at the facility were Latino as of last month.

They have been roofers, cooks, janitors, dishwashers and delivery drivers. Many were under 50. They lived in households where social distancing is difficult, sometimes with two or three other families. For Martín, a 36-year-old Latina, stepping into the intensive care unit sometimes feels like being confronted with an unsettling mirror.

“It was already full of people who look like me,” she said, “who share a common language and similar cultural backgrounds.”

“You see the extremes of what happens when someone can shelter in place or someone can’t. It’s not that people don’t want to stay home. It’s not that they’re not listening. It’s not that they’re not educated. It’s that they don’t have an option.”

The coronavirus’ heavy toll on Latinos raises questions about whether employers across the U.S. and the government are doing enough to protect these workers.

In Iowa, Latinos make up about 6% of the population but have accounted for a quarter of all positive cases, according to the state’s tally. In Washington state, Latinos represented 35% of all positive cases, even though they only make up 13% of the population.

The balance between keeping Latino essential workers safe and depending on their labor is being tested in the city of Hanford, where a coronavirus outbreak at a meat-packing plant now accounts for half of the confirmed cases in Kings County.

About 180 employees at Central Valley Meat Co. had tested positive as of Tuesday, according to County Supervisor Doug Verboon. Most of the employees at the facility — who work in close proximity amid “moist and wet working conditions” — are Latino, he said. Central Valley Meat did not respond to calls or emails from The Times.
Verboon said the county is depending on even more Latino workers during the current cherry-picking season, which lasts until mid-June. He said one Hanford fruit-packing company that employed 800 workers to pick cherries told him that an outbreak similar to the one at Central Valley Meat Co. would be “catastrophic.”

“We can’t have those people get ill because we have a short window of work,” Verboon said.

Lupe Martinez started at Alta Vista Healthcare & Wellness Centre in Riverside last July after her husband, a sheet metal worker and the family breadwinner, had a heart attack and had to stop working.

In the laundry room, Martinez — a member of the Service Employees International Union Local 2015, which represents some 400,000 home care and nursing home workers in California — was surrounded by mostly Latinos and Filipinos. A lot of her colleagues work two jobs or pull double shifts, washing heavy comforters and blankets, cleaning shower curtains, handling patients’ linens.

Martinez’s family asked her not to go as the virus began spreading in California.

“I told them, ‘I’m going to trust God. I’m not going to get it,’” she said. “I’d go to work. I’d worry.”
A few weeks ago, Martinez said, she walked into the room of an elderly woman to bring her clean clothes. Usually, there is a notice on the door if a patient has an illness that requires staff to put on gloves, masks or other gear, she said. There was nothing posted, Martinez said, so she entered unmasked.

Martinez said the woman told her she was feeling sick. A few days later, a sign on the door said she was in isolation.

Alta Vista Healthcare & Wellness Centre did not return calls or emails seeking comment.

On April 13, Martinez came home with a sore throat, dry cough and aching body. She couldn't taste the tea her son brought her. She struggled to breathe. She went to the hospital before and after a positive COVID-19 test and was sent home, told to try and self-isolate.

When her husband, son and daughter who live in the house tested positive, she lay in bed, crying out to God.

Another son and his wife live in a back house on the property. He's a barber. She's a dental hygienist. They are not currently leaving home to work. They have not gotten COVID-19.

Because she had not yet worked at the nursing home a year, Martinez said, she was not eligible for sick pay. She has applied for state disability but has not yet heard back. Martinez said she feels she has to return to work.

“My kids don’t want me to go back,” Martinez said. “But I have bills. I know it's my life, but — I don't know.”

Rosa Arenas, another union member and certified nursing assistant at an Orange nursing home, said she got tested after learning a patient had tested positive for COVID-19 last month. On May 2, Arenas tested positive.

Now, she is isolated in one bedroom of her family's apartment, away from her husband and two children, ages 12 and 6, who have tested negative. She spent
Mother’s Day reading the Bible alone and video-chatting with her children and husband from the other side of the door.

“My kids told me they were sad they weren’t going to give me a Mother’s Day hug,” Arenas, 32, said. “It broke my heart.”

She said there was not enough personal protective equipment at work and that colleagues have become infected. Her husband, a landscaper, recently was sent home by his employer to quarantine and be tested, and she has burned through all her paid vacation and sick time while quarantining at home. And she misses working.

When Rafael Saavedra, a 40-year-old truck driver from Alhambra, returns home from work, he undresses in his garage, throws his clothes in the washing machine and rushes to the shower, careful not to touch anything inside. His greatest fear is infecting his daughters, ages 16 and 6.

At a San Pedro dispatch center, where he and hundreds of other drivers drop off paperwork and take breaks, he hardly ever finds soap or hand sanitizer.

Employees who normally work in the center are now working remotely, and there’s little communication with drivers about how they can stay safe, Saavedra said. Drivers were given a single, thin mask about a month ago and nothing else, he said.
Saavedra said the vast majority of drivers he works with are Latino immigrants who are struggling to navigate the pandemic because of language barriers and a lack of resources.

“They don’t know their rights. They’re scared of talking. They stay in their cocoon,” he said.

Saavedra has carved out a comfortable life for his family. He travels often with his wife and daughters, who attend private Christian schools. But his paycheck has been cut in half due to reduced hours. He fears losing his house.

His wife, a nurse at a Pasadena homeless shelter, cut down her own hours out of fear of catching the virus and infecting their daughters.

Sonia Hernandez, who raised four children as a single mother, has worked as a cook at a McDonald’s in Monterey Park for 18 years and makes just over $14 an hour, said her daughter, Jenniffer Barrera Hernandez.

In early April, Hernandez was hospitalized with COVID-19 and went into an induced coma for weeks.

“They told us she wasn’t going to make it through the day and we had to decide whether she wanted to go in peace or do chest compressions to try and get a pulse,” Barrera Hernandez said. “It was really hard to make that decision.”

Miraculously, Barrera Hernandez said, her mother woke up.

After her diagnosis, Hernandez’s co-workers walked off the job to demand safety supplies, including masks, gloves, soap and hand sanitizer. Barrera Hernandez said after she called McDonald’s to alert the company her mom had tested positive, she did not get a call back.

That’s really sad, because my mom really liked that job. You provide for a company for so long, and at the end you’re just a number.”

Hernandez is recovering in her South L.A. home. She is extremely fatigued and unable to walk or even hold a phone for very long, her daughter said. She feels guilty she can’t go back to work yet.

David Tovar, McDonald’s U.S. vice president of communications, said many of Barrera Hernandez’s and some employees’ statements were false.
He said McDonald’s restaurants, including the one where Hernandez worked, have had an ample supply of soap, hand sanitizer and cleaning supplies and close overnight once per week for deep cleanings. Tovar said restaurants have been open for takeout only, with social distancing requirements enforced and bathrooms closed.

When McDonald’s learned of Hernandez’s diagnosis on April 8, the company immediately informed four crew members who she had been in contact with, he said.

“We have the utmost respect for Ms. Hernandez and all the employees at McDonald’s, but it’s unfair to let them try to tell a story to you that’s simply not true,” Tovar said. “We are a very large employer of diverse employees, particularly Latinos. We want everyone who comes to work for McDonald’s to have a good experience.”

When Mariana Lui’s mother got a letter from her employer in March that labeled her an essential worker, she announced it with a sense of pride.

Lui’s mother, an undocumented immigrant from Mexico who works at a San Fernando food production warehouse that makes meals for schools, told her daughter that she had never before been deemed “essential.” Now, she said, people needed her.

But then her colleagues, many of them undocumented Latinas, started getting sick. They stopped showing up on the assembly line, where, she said, they stack ingredients onto sandwiches while standing shoulder to shoulder.

Lui’s mother spoke to The Times on the condition of anonymity because she feared losing her job. Lui, who also spoke to The Times, is a 31-year-old legal administrative assistant in Whittier with a different surname than her mother.

Lui’s 50-year-old mother said colleagues were taking aspirin and continuing to work, despite having fevers and headaches. Then she started showing symptoms.

“I was getting tired at work and I had a little bit of a cough,” she said. “I didn’t think it would be something so serious, so I kept going to work for three or four days.”

A few days later, she tested positive for COVID-19.
Who’s Enforcing Mask Rules? Often Retail Workers, and They’re Getting Hurt

The risk of a violent reaction now hangs over jobs already fraught with health perils.

By Neil MacFarquhar

May 15, 2020 Updated 4:12 p.m. ET

The exchange was tense between the customer and Jesse, a Trader Joe's employee sporting a white face mask and a flowery Hawaiian shirt.

"Why aren't you wearing the mask?" Jesse asked the customer on a recent day at a store in Rancho Palos Verdes, Calif. "I am not here to question what you believe in. These are the rules. I am just asking you kindly to wear the mask."

The customer, Genevieve Powers, who was recording the entire exchange, refused. "We are in America here," she said, "Land of the free." Then she turned her camera on other shoppers, who were less than amused: "Look at all of these sheep that are here, all wearing this mask that is actually dangerous for them."

Jesse, identified only by his first name in the video, telephoned the police, who did not arrive. Finally, when Ms. Powers left the store, others customers burst into applause.

As more parts of the country reopen businesses, many retail workers have reluctantly turned into de facto enforcers of public health guidelines, confronting customers who refuse to wear masks or to maintain a wide distance from others. The risk of a violent reaction now hangs over jobs already fraught with health perils.

A Target employee in Van Nuys, Calif., ended up with a broken left arm after helping to remove two customers who refused to wear masks.

A cashier told a man refusing to wear a mask that he could not buy a pack of cigars at a convenience store in Perkasie, Pa. He punched her three times in the face.

In San Antonio, a man who was told he could not board a public bus without a mask shot a passenger, the police said. The victim was hospitalized and the gunman was arrested.

And in a confrontation that turned deadly, the security guard at a Family Dollar store in Flint, Mich., was shot and killed after insisting that a customer put on a mask.

Meegan Holland, the spokeswoman for the Michigan Retailers Association, said stores were caught in the middle. "People can get belligerent when being asked to do something that they do not want to do," she said.

Masks have been recommended by public health officials as a key way to diminish the spread of the coronavirus, with at least a dozen states requiring them and many others issuing a hodgepodge of county or municipal orders.

They have also turned into a flash point in the country's culture wars, with some defending their right to not wear one.

"We have individual rights, we don't have community rights," said Ms. Powers, 56, the customer at the Trader Joe's store, in an interview this week.

Public health experts said this argument was misguided.

"I never had a right to do something that could injure the health of my neighbors," said Wendy E. Parmet, the director of the Center for Health Policy and Law at Northeastern University.

Mask opponents generally overlook the fact that such regulations are meant to protect other people, not the person wearing the mask, she added.

Americans are navigating a patchwork of conflicting national and local guidance on masks. The Centers for Disease Control and Prevention, for example, initially downplayed the efficacy of masks but now recommends them.

And they have become a ready symbol for those dubious about giving government officials wide powers for an extended period.

Latest Updates: Coronavirus Outbreak in the U.S.
Retailers find the confrontations over masks a minefield.

“It is a very hot button issue,” said Kenya Friend-Daniel, a spokeswoman for Trader Joe’s. The company declined to allow Jesse, the employee involved in the confrontation, to be interviewed.

“We do not want to put our crew members in the position to have to enforce something like that,” she said, noting that customers “overwhelmingly” wear masks.

In all its 505 stores, Trader Joe’s has put up signs recommending that customers wear masks, not least to protect its employees, Ms. Friend-Daniel said.

Refusing is not grounds alone for being ejected from a store, she said, even where wearing masks in public is the law, but creating a disturbance that bothers other customers is.

Target, in places where masks are the law, has stationed security employees outside its stores to remind customers to wear them, said Jake Anderson, a spokesman.

Stores are not the only businesses involved. Uber announced that starting Monday, drivers and riders must wear masks, and those who refuse can be kicked off the platform.

Smaller retailers feel especially vulnerable to balancing the need for safety and the need to revive their bottom line.

In Charleston, S.C., at M. Dumas & Sons, a 103-year-old men's clothing store, employees wear masks in line with a city requirement while customers are offered them at the front door.

Gary Flynn, the owner, estimated that 50 percent of his customers would walk away if required to wear a mask.

“I want whatever I can get right now,” he said, with business inching up but still only 25 percent of what it was a year ago.

He acknowledged that his workers were putting themselves in harm's way to generate sales. “So it's a slippery slope and it's a moral challenge every day to try to figure out what's the right thing to do,” he said.
Farther up King Street, Las Olas Swimwear boutique was doing brisk business in bathing suits for beach-starved customers, as well as face masks. The store has sold more than 500 masks produced by a New York swimwear supplier.

Daniel James, the owner, stated unequivocally that he would fire any employee not wearing a face mask, but said masks were voluntary for customers.

In Michigan, Gov. Gretchen Whitmer made masks mandatory in late April and allowed stores to bar customers who refused. But she did not criminalize such refusals, so police have only intervened when confrontations turned violent.

In Illinois, Rob Karr, the president of the Illinois Retail Merchants Association, compiled a list of episodes that took place in the first 48 hours after masks became mandatory on May 1.

One customer threatened to get a gun from his car to shoot the worker insisting that he wear a mask. Several employees were hit, while others were verbally abused. Sometimes customers fought each other. The list has only grown longer.

Some police departments refused to respond when stores asked for help, Mr. Karr said, while various retailers were fined $750 for not enforcing the ban.

In Warwick, R.I., a police union initially announced on its Facebook page that it would not enforce Gov. Gina Raimondo’s mandatory mask order, calling it “overreaching” and bound to destroy the bridge of trust built with the community. The police chief then issued a statement saying the department would act.

Lawrence O. Gostin, the Georgetown University professor who wrote the draft public health law adopted by many states, suggested that in the absence of national guidelines, retailers should develop one policy for all their stores and stick with it, whether it has the backing of state law or not — that way the rules would be clear for all customers.

Some experts also suggested it was overkill to involve police in the general enforcement of public health measures.

The issue should be treated like wearing seatbelts or not smoking in public, which eventually became habits, Ms. Parmet suggested, but such consensus must develop much more quickly given the danger from Covid-19.

In Hawaii, that consensus is emerging because neighbors are confronting anti-maskers themselves, said Tina Yamaki, president of the Retail Merchants of Hawaii.

“It is the other customers in the stores that are shaming them to put it back on or commenting,” she said.

Ms. Yamaki compared the mask dilemma to trying to ensure that a young child keeps wearing a hat — one minute it is on, and the next minute, after you look away, it disappears.

“We cannot be policing that all the time,” she said of the masks. “We are not that type of law enforcement.”

Christopher Dixon contributed reporting.
Emails: Weld County board took over public messaging from health department after public health order was issued

Health department director told messaging must meet the needs "of both the health department and the board of commissioners."

News | 15h ago

Trevor Reid
treid@greeleytribune.com

The Weld County Department of Public Health and Environment stands at 1555 North 17th Ave. in Greeley Tuesday, March 10, 2020. (Alex McIntyre/amcintyre@greeleytribune.com)

Editor’s note: In the interest of public safety, this story is provided free to all readers. Support more reporting like this with a Greeley Tribune subscription.

A day after the Weld County Department of Public Health and Environment issued a pandemic health emergency and a public health order in response to COVID-19, the department’s head was told all public messaging had to first pass through the board of county commissioners.

Dr. Mark Wallace, executive director of the health department and the county's health officer, will retire at the end of May — even as Weld County continues to have the highest case rate among Colorado counties with populations of 100,000 or more.

Emails obtained by the Tribune via a public records request suggest Weld County officials sought to alter Wallace's efforts to prevent the spread of the virus as early as mid-March.
At 1:10 p.m. March 17, Weld County Commission Chairman Mike Freeman emailed Wallace advising him the health department's public information officer, Eric Aakko, should consult with the county's public information officer, Jennifer Finch, with any communication outreach.

“The Board is concerned about our communication message going haywire again,” Freeman wrote, a possible reference to confusion that arose after the health department issued its public health order canceling events of 10 or more people. The order seemed to cause particular confusion to operators of child care centers, according to emails sent to Weld health officials, prompting an addendum to the order later that day.

Wallace warned Freeman that the information flow was already slow, adding that the health department’s website was being updated to align with rapidly-evolving state and federal information.

That same day, the county's chief information officer added the commissioners to a COVID-19 news release distribution list, so they could comment and approve on releases, Finch wrote in an email.

Though Freeman told Wallace the process was to keep the board of county commissioners aware of what information was being released, the process was quickly used to alter messaging about the county's first COVID-related death. When the health department's spokesman shared a draft news release with the board less than an hour after Freeman's email to Wallace, at least two commissioners sought to change the language in the release.

“We are requiring people to social distance in order to prevent future COVID-19 deaths and protect our workforce,” Wallace said in the original release.

“I have a very distinct problem with the verbiage in the quote: ‘We are requiring people to social distance...’” Commissioner Scott James responded. “I realize that is in the order. But it simply throws fuel on the authoritarian fire.

“We strongly suggest people practice social distancing...’ would be the verbiage I prefer,” James wrote.

Commissioner Steve Moreno agreed with James, but Wallace warned against the effects of the softer language.

“If Jen (Finch) wants to change the language in our draft to read ‘strongly suggest’ I’m not going to argue,” Wallace wrote back. “Sadly we're using the brief window we have around a death that was given to this man by someone else to change behavior.”

Wallace agreed to weaken the language as long as the board would help prevent large meetings of county employees — one of which was still planned the following day in the same building as Wallace — and model safe behavior in the board room.

“We are strongly suggesting people practice social distancing in order to prevent future COVID-19 deaths and protect our workforce,” Wallace was quoted in the final news release.

Freeman later clarified with Wallace that the county commissioners activated the Emergency Operations Center and the Joint Information Center to consolidate situational awareness reports and public outreach.

Wallace sought more information from Finch, including clarification about whether he could continue to host virtual town halls about COVID-19 for local agencies.

Finch quoted county code stating that all news releases about disasters or emergencies are to be coordinated with the office of emergency management and the public information officer. Wallace and his team should continue to provide guidance and health-related information to outside agencies, she wrote, but any social media posts, web updates or news releases should be cleared by Finch first.

“During this situation, with all the information that is bombarding the public, it is crucial that messaging meets the needs of both the health department and the board of commissioners,” Finch wrote.

Wallace wrote in emails to other health officials across the state that he received “push back” to his public health order.

“I'm taking specific heat from colleges and other businesses saying I've gone 'too far' and am way exceeding what 'smarter' health departments around the State are recommending,” Wallace wrote in one email. “Can't win ... too soft on benzene ... too tough on COVID.”

“I'm getting beat up for it but there's no winning in this work,” Wallace wrote in another email.

Wallace's inability to communicate clearly with the public after the county's communications takeover has left some restaurant owners begging the county for guidance, as the commissioners and the Joint Information Center have repeatedly failed to answer whether the health department would enforce the state's public health order requiring dining rooms to remain closed through at least May 26.

The night before Wallace issued his public health order, he emailed other health officials in the state to ponder the cost of their interventions.
“I'm hopeful someone somewhere sometime models and calculates the financial and societal impacts on vulnerable people (and communities) in Colorado who lost their jobs,” Wallace wrote. “How do we estimate a cost, even if in retrospect, against which to judge the value of varied levels of actions and interventions and the outcomes resulting from those actions.”

Despite Wallace's concerns for small business owners, he maintained the importance of keeping non-essential businesses closed to the public, advising against the commissioners' Safer-at-Work guidelines the day before county officials released them. The Jimmie Optimist reported.

Wallace decided to retire after a private administrative meeting with the board of county commissioners April 24, he told the commissioners in an email. It's unclear what happened at that meeting, as no minutes were kept and no notice was made to the public.

— Trevor Reid covers public safety issues for the Greeley Tribune. Connect with Trevor at (970) 392-4492, treid@greeleytribune.com or on Twitter, @treid71.

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TJ Smith • 11 hours ago
‘It’s just cuckoo’: state’s latest data mishap causes critics to cry foul
Where does Sunday take place twice a week? And May 2 come before April 26?

The state of Georgia, as it provides up-to-date data on the COVID-19 pandemic.

In the latest bungling of tracking data for the novel coronavirus, a recently posted bar chart on the Georgia Department of Public Health’s website appeared to show good news: new confirmed cases in the counties with the most infections had dropped every single day for the past two weeks.

In fact, there was no clear downward trend. The data is still preliminary, and cases have held steady or dropped slightly in the past two weeks. Experts agree that cases in those five counties were flat when Georgia began to reopen late last month.

» NEW: The AJC’s redesigned COVID-19 data dashboard

ADVERTISING

DPH changed the graph Monday after more than a day of online mockery, public concern and a letter from a state representative. Gov. Brian Kemp’s office issued an
apology and its spokespersons said they’d never make this kind of mistake again.

“Our mission failed. We apologize. It is fixed,” tweeted Candice Broce, a spokeswoman for the governor.

This unforced error — at least the third in as many weeks — is confounding observers who have noted sloppiness in case counts, death counts and other measures that are fundamental to tracking a disease outbreak. Georgians check the data daily to decide whether it’s safe to reopen their businesses or send their children to daycare. Policymakers use it for decisions affecting the health of more than 10 million Georgians.

In recent weeks, DPH data issues caused confusion over whether novel coronavirus deaths had topped 1,000 — they are now more than 1,490. The agency erroneously
posted at least twice that children died.

Some of these errors could be forgiven as mistakes made during a chaotic time. But putting days in the wrong order, as the recently withdrawn chart did, makes no sense.

» COMPLETE COVERAGE: Coronavirus in Georgia

“It’s just cuckoo,” said state Rep. Scott Holcomb, D-Atlanta, who sent the letter outlining his concerns to the governor’s office on Monday. The bar chart that stirred the latest controversy was revised shortly afterwards. “I don’t know how anyone can defend this graph as not being misleading. I really don’t.”

A spokeswoman for DPH told The Atlanta Journal-Constitution that the chart was incorrect because of an error in how it sorted dates. An aide to the governor told Holcomb that a software vendor caused the problem, Holcomb said. A tweet from a Kemp spokesman said the data team behind the chart published it because they thought it would be “helpful.”

Kemp spokeswoman Broce said the office does not dictate what data DPH publishes.

“We are not selecting data and telling them how to portray it, although we do provide information about constituent complaints, check it for accuracy, and push them to provide more information if it is possible to do so,” said Broce.
Others worry the data is being portrayed in a way that favors Kemp’s early easing of restrictions. A separate graph on DPH’s page has led readers to think that cases were dropping dramatically, even though lower case numbers were the result of a lag in data collection.

“I have a hard time understanding how this happens without it being deliberate,” said State Rep. Jasmine Clark, D-Lilburn, who received her doctorate in microbiology and molecular genetics at Emory University. “Literally nowhere ever in any type of statistics would that be acceptable.”

» RELATED: ‘Confused and scared’: Georgians frustrated over shifting virus data

» MORE: New changes to state’s virus data confuse experts, residents alike

Wrong information about Georgia’s battle against COVID-19 is already shaping the way the public sees the state. A Friday column in The Wall Street Journal dubbed
Kemp’s controversial decision to begin reopening, “The Georgia Model.”

It said the state is experiencing “a welcome trend of declining new cases and deaths.”

In fact, seven-day rolling averages of cases show only a slight decline over two weeks. Deaths appear to have plateaued, according to an Atlanta Journal-Constitution analysis of daily DPH reports. The impact of reopening Georgia’s economy is still too early to measure for both new infections and deaths because of the lag time between an infection, testing, diagnosis and, potentially, death.

Ripple effects

The latest flubbed chart lists case counts from the most recent 14 days, but data collection lags and a quirk in the state’s method of recording cases mean that counts for recent dates are often a fraction of what they turn out to be when the data is more complete.

“You really don’t want to be using very recent data to make decisions, given those delays,” said Benjamin Lopman, an infectious disease epidemiologist and an expert on using statistical analysis and other tools to address public health issues.

“It’s just cuckoo. ... I don’t know how anyone can defend this graph as not being misleading. I really don’t.” —State Rep. Scott Holcomb, D-Atlanta

Interpreting data needs to be done with caution, especially now that DPH assigns the date of a new case in two different ways on its site, experts said.

When the pandemic began, the agency assigned a date to a case based on the day results came into its office. Starting in late April, DPH added charts that date a new
coronavirus case back to the day a patient said symptoms started. If that data isn’t reported, DPH substitutes the date the test sample was collected or when it was received results.

But because it can take weeks for case information to come in, the new method always appears to show that cases are declining, even if they are not. The charts that used it stirred suspicion and confusion, and ran afoul of principles for communicating during a public health crisis, experts said.

Leaders must craft their messages carefully at a time like this, noted Professor Joseph Cappella, an expert on public health communication at the University of Pennsylvania’s Annenberg School for Communication.

“They need to be clear, they need to be consistent, they need to be credible and they need to be apolitical,” Cappella said.

**Mistakes harm credibility**

DPH has made some improvements in recent days by apologizing and updating its online status report.

But among certain observers, the damage is done. Dr. Harry J. Heiman, a clinical associate professor at the Georgia State University School of Public Health, called the most recent mix-up “criminal” and said DPH has shown a pattern of reporting misleading data.

One example is a map of Georgia cases and infection rates that colors counties in shades of blue or red based on local rates of infection. In recent weeks, DPH raised the bar on how high an infection rate needs to be before a county is colored red.
“Based on the (key) they were using a couple weeks ago, a good third to a half of our state would show up as red right now,” Heiman said. “Because they keep moving the goalposts, if you will, it doesn’t look that way.”

The data reporting problems continue.

On Monday morning, DPH reported about 2,400 more confirmed cases than actual tests performed, said J.C. Bradbury, an economics professor at Kennesaw State University. Bradbury isn’t an epidemiologist, but he regularly tracks the DPH dashboard and is accustomed to processing large data sets.

The error was quickly fixed, but it should have never happened.

“It looks like you are doing something funny when you are just catching a mistake,” Bradbury said.

On Tuesday, DPH updated its charts again with clearer labeling that some of its most recent data is preliminary. But one chart for cases and deaths uses such a large numeric key, the number of deaths appear to be almost zero.
**Good intentions**

DPH may need to present its data more clearly, but it is improving at the urging of lawmakers, said State Sen. Kay Kirkpatrick, R-East Cobb, a physician who recovered from COVID-19 and is part of Kemp’s coronavirus task force.

She said she does not believe the state is acting in bad faith.

“I don’t feel there’s any intention ... to mislead anyone or present (the data) in a way other than how they are,” Kirkpatrick said.

DPH’s epidemiology division is not political. It is chronically understaffed, said Dr. Melanie Thompson, principal investigator of the AIDS Research Consortium of
Atlanta who has worked with the state epidemiology team for 30 years on the HIV/AIDS epidemic.

“I think they’re trying to do something that they think represents the epidemic,” Thompson added. “I think it ends up being extremely confusing to the average person.”

DPH can recover from any loss of credibility by providing more information about its current data reporting procedures and showing why its leaders think the new approach is a more accurate and responsible way of reporting, Cappella said.

The agency can also reassure the public by reporting case and death counts consistently across its public site, and conveying information thorough a person who is not a politician.

“I don’t think you can repair credibility overnight,” Cappella said.

Our commitment to transparency

Since the beginning of the pandemic, the AJC has been downloading data from the Department of Public Health about coronavirus cases, deaths and trends. AJC data journalists present this data on the Coronavirus Dashboard in a format that is clear, easy to follow and shows trends in cases and deaths. Find the dashboard at http://ajc.com/cvupdate.

Latest Atlanta coronavirus news: Georgia’s COVID-19 deaths near 1,600

Kitchen Curious: A modified stew for modified times
So you really want to see your friends? Here’s how to assess the risk
Your willpower is fraying. Mine is too.

For two months we’ve been good. We’ve Zoomed. We’ve FaceTimed. We’ve waved at neighbors from across the street and behind the fence.

But enough is enough. We want to see friends and family in real life.

Now many of us are allowing cracks to form in our protective coronavirus fortresses, crossing our fingers while doing our best to mitigate the risk.
We let our kids ride their bikes together, as long as they wear their masks. We invite friends into our yards for drinks, being careful to set the chairs six feet apart.

We experiment with picnics and social distancing walks. We make pacts: I won’t see anybody and you won’t see anybody and that way we can see each other. Right? Maybe? No?

Los Angeles County health officials are still advising people to resist the urge to visit friends and family, even from a distance of six feet.

“We are recommending that you continue to do your distancing in the same ways that we’ve recommended before, using technology,” Barbara Ferrer, the county’s director of public health, said Friday. “We are not recommending at this point in time that people should be in social units together.”
Elsewhere, however, public health experts acknowledge that even rule followers are likely to experience quarantine fatigue and are looking for ways to cheat as safely as possible.

Dr. Mary Bassett, a former health commissioner for New York City and professor at Harvard’s T.H. Chan School of Public Health, said she expects people will soon begin to expand their “cone of safety” beyond households, whether or not public health officials think it’s a good idea.

“Regardless of what we tell them, people will try to rank their risk,” Bassett said. “Whether outdoor activities are safer than indoor activities, does it make sense to expand the circle of people I see — these are the things people are going to want guidance on.”

The hard truth remains that just as abstinence is the only surefire way to avoid a sexually transmitted disease, the best way to protect ourselves from the coronavirus is by remaining physically isolated from one another. But for many of us, and for a variety of reasons, that may be an impossible standard to maintain.

So, if you must see friends, how can you tell if an activity is high-risk or low-risk?

A general rule of thumb is that outdoors tends to be better than indoors, small groups are better than large groups and a shorter period of time is better than a longer one, said Julie Swann, head of the Fitts Department of Industrial and Systems Engineering at North Carolina State University in Raleigh.
The relative risk of seeing others also depends on how prevalent COVID-19 is in your community and how much potential exposure the friend or family member you plan to see has had to the virus, said Chunhuei Chi, director of the Center for Global Health at Oregon State University.

“The idea of safe or not safe is not black and white,” he said. “It’s a degree that is influenced by multiple factors.”

Wearing a mask will reduce your risk of becoming infected with the virus if you don’t have it, and of spreading it to others if you do have it but don’t realize it.

But enough with the broad strokes. The L.A. Times asked Dr. Marybeth Sexton, an infectious diseases expert at Emory University School of Medicine, to help assess the risk of seven social activities that people are already engaging in.

**Two families gathering for a barbecue in the backyard, with families staying six feet apart**

**Verdict:** Tough if kids are involved.

**Context:** Cooking burgers on the grill is OK, Sexton said. Scientists think the majority of coronavirus transmissions are through respiratory droplets that spread when people are in close proximity to one another. Some contact spread is also likely if someone coughs and sneezes on a surface like a railing or doorknob, and then someone else touches it. But if the food was prepared by someone practicing good hand hygiene and
then is well cooked, it’s probably OK. Just make sure people were not touching the same utensils or plates.

The concern here is that while the adults can execute the plan safely, it’s hard to explain social distancing to kids, especially if they haven’t seen one another in a long time. And if the kids are playing together, they are bringing anything they are exposed to back to their families.

Socially distanced walk, with (let’s admit it) some drift

Verdict: Relatively low risk.

Context: It’s hard to always know you are six feet apart, and Sexton said there’s nothing magical about six feet anyway. Some virus-laden droplets expelled in a cough or sneeze travel three feet, while others might make it as far as nine.

The good thing about a walk is that you’re outside, and that’s generally safer than being inside because there is better airflow to carry droplets away from you. And as long as you are trying to maintain six feet of separation as much as possible, the only thing that would make you even safer is wearing a mask. (That goes for both of you.)

Moms night out in a backyard (no kids, no spouses), bring-your-own everything, stay six feet apart

Verdict: Tricky.

Context: Keeping it outside, keeping kids from playing together and keeping people from going in and out of the kitchen or sharing food and drinks are all good. But as we
ease back into socializing, Sexton said, smaller is safer.

If there were 10 moms at the gathering, and you assume that each mom went to a similar party earlier that weekend, then attending this party is like being exposed to 100 other people.

That’s where a gathering like this can rapidly spread the virus, especially if one of the guests was particularly contagious, she said.

Drinks around a fire pit, chairs six feet apart

**Verdict:** Fairly low risk.

**Context:** If people really observe distancing in that kind of situation, then it’s fairly safe as long as you limit it to a small number of people.

Two families quarantining together

**Verdict:** Mixed.

**Context:** There are some really nice things about this idea, Sexton said, but it’s hard to guarantee that someone in the group isn’t going to be exposed. If they are, they are bringing that exposure to a larger group of people than they would if they were with only their own family.
Kids riding bikes together while wearing masks

**Verdict:** Intermediate risk.

**Context:** What this situation has going for it is that the kids are outside, and their bikes prevent them from getting too close to one another. Plus, you’ve got the protection of masks, so that’s great.

But you have to be careful, because if any of these kids have been playing with other kids, their risk of exposure is magnified, and they carry that risk back to their families, Sexton said.

To make this safer, make sure none of the kids has had a ton of exposure to other kids and that they really understand that the masks need to stay on. They should also wash their hands immediately when they come home.

Letting someone use your bathroom

**Verdict:** Safer than you might think, if you take some basic precautions.

**Context:** Sexton said there are a couple of ways to make this scenario safer. If someone goes into the house to use the restroom, let them go in alone. When they’re done, it’s critically important that they wash their hands really well. Then you’ll want to clean the restroom afterward. Almost all household cleaners have indications that they kill coronavirus.

As long as you clean surfaces and wash hands, you should be safe.
Coronavirus Vaccine Trial by Moderna Shows Promising Early Results

The company said its preliminary test in 8 healthy volunteers was safe. It is on an accelerated timetable to begin a larger human trial soon.

By Denise Grady

May 18, 2020 Updated 11:48 a.m. ET

The first coronavirus vaccine to be tested in people appears to be safe and able to stimulate an immune response against the virus, its manufacturer, Moderna announced on Monday.

The findings are based on results from the first eight people who each received two doses of the vaccine, starting in March.

Those people, healthy volunteers, made antibodies that were then tested in human cells in the lab, and were able to stop the virus from replicating — the key requirement for an effective vaccine. The levels of those so-called neutralizing antibodies matched the levels found in patients who had recovered after contracting the virus in the community.

The company has said that it is proceeding on an accelerated timetable, with the second phase involving 600 people to begin soon, and a third phase to begin in July involving thousands of healthy people. The Food and Drug Administration gave Moderna the go-ahead for the second phase earlier this month.

If those trials go well, a vaccine could become available for widespread use by the end of this year or early 2021, Dr. Tal Zaks, Moderna's chief medical officer, said in an interview. How many doses might be ready is not clear, but Dr. Zaks said, "We're doing our best to make it as many millions as possible."

There is no proven treatment or vaccine against the coronavirus at this time. Dozens of companies in the United States, Europe and China are racing to produce vaccines, using different methods. Some use the same technology as Moderna, which involves a segment of genetic material from the virus called messenger RNA, or mRNA.

Moderna said that additional tests in mice that were vaccinated and then infected found that the vaccine could prevent the virus from replicating in their lungs, and that the animals had levels of neutralizing antibodies comparable to those in the people who had received the vaccine.

Three doses of the vaccine were tested: low, medium and high. These initial results are based on tests of the low and medium doses. The only adverse effect at those doses was redness and soreness in one patient's arm where the shot was given.

But at the highest dose, three patients had fever, muscle pains and headaches, Dr. Zaks said, adding that the symptoms went away after a day.

But the high dose is being eliminated from future studies, not so much because of the side effects, but because the lower doses appeared to work so well that the high dose is not needed.

“The lower the dose, the more vaccine we’ll be able to make,” Dr. Zaks said.

Moderna's stock has soared in recent months, and was up more than 23 percent on Monday morning after releasing the preliminary results.
Iran Sees New Surge in Virus Cases After Reopening Country

Health experts say the government did not heed the warnings about easing restrictions too soon. Cases spike in eight provinces.

By Farnaz Fassihi

May 18, 2020, 10:40 a.m. ET

When Iran began to reopen late last month, commuters packed subways and buses, young people lined up for takeout hamburgers and pizza, and traffic snarled highways. Shoppers crowded the traditional bazaars of Isfahan and Tehran. Worshipers resumed communal prayer at mosques during Ramadan evenings.

Three weeks later, the country has been hit by a new surge of coronavirus cases, according to health officials in some of the eight provinces where the numbers have spiked again. Health experts had predicted this would happen when the government made the call to ease restrictions in late April.

Iran, an epicenter of the outbreak in the Middle East, reopened without meeting the benchmarks recommended by health experts, such as ensuring that widespread testing and contact tracing was in place, and recording a steady drop in cases for at least several weeks.

The central government has claimed for weeks that Iran was prevailing against the pandemic. But in reopening the country, President Hassan Rouhani said the battle could not fully succeed independent of salvaging the economy, which was being pummeled by United States sanctions even before the virus hit.

So with the government’s blessing many Iranians resumed daily life.
Elham, a 34-year-old government employee in Tehran, said that when her ministry ordered its employees to return to work, she had no choice but to resume riding a crowded subway twice a day. Now, she said, she spends a big chunk of her income on masks, gloves and disinfectants.

Many other people can't afford the protective gear.

"People can't stay at home when the government says return to work, and we have no money if we don't go," Elham said in a telephone interview. "They rushed to open with no plans in place, and now they are blaming us for the surge." She did not want to give her last name for fear of repercussions.

The health minister, Saeed Namaki, on Sunday attributed the new surge in cases to people not observing social distancing and not wearing masks.

The ministry has stopped releasing a breakdown of numbers for provinces in an effort to control a new wave of panic and pressure on the government to shut down cities.

According to government tallies, more than 7,000 people have died from the virus and about 122,000 have been infected. Health experts inside and outside Iran and some Iranian politicians have said the real numbers are most likely several times larger.

The Health Ministry spokesman, Kianoush Jahangiri, said Monday that 2,294 people had tested positive in previous 24 hours. A day earlier, that number was 1,808.

In the immediate aftermath of a strict, two-week lockdown in April, the number dropped to less than 1,000 a day. The official mortality rate, however, has fluctuated daily.
Latest Updates: Global Coronavirus Outbreak

- China pledges $2 billion to fight the pandemic.
- Pressed for an inquiry into the virus’s origin, China floats its own theories.
- Rome’s famed trattorias reopen, but it’s not business as usual.

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The southeastern province of Khuzestan, home to the country’s oil and petrochemical industries, reported a 300 percent increase in new cases since the province re-opened in late April, according to its governor. On Friday, Khuzestan locked down 16 of its cities at least until Monday. Local health officials said Sunday that 715 people had tested positive for coronavirus in the previous 24 hours.

Other provinces that are reporting alarming surges include Isfahan, Fars, East Azerbaijan, Khorasan, Lorestan, Hormozgan and Sistan Baluchestan, according to the health ministry and local governors.

“The situation is extremely dire,” Alireza Bahadori, mayor of the city of Behbahan in the hard-hit Khuzestan, said in a video circulating on Iranian media.

Standing at a fire station wearing a mask and a plastic face shield, and as ambulance sirens wailed in the background, the mayor said, “Positive results for corona tests have reached an explosion.”

Hossein Farshidi, the top public health official in Hormozgan, called the surge in his southern province “extremely dangerous and worrisome.”
The cries of alarm from local officials were at stark odds with the central government’s claim that Iran has the virus under control.

“It’s a source of pride that Iran has managed to not only reopen businesses by observing protocols but also reactivate its mosques and religious centers — and also maintain a steady decline of the disease,” President Rouhani said Friday, according to official media.

Since the outbreak in Iran began in mid-February, the government has come under harsh international and domestic criticism for its chaotic management of the crisis, from its failure to cordon off the first epicenters to its less-than-transparent approach to sharing data.

Other countries have also seen their coronavirus numbers fall and rise again, but the rekindled crisis in Iran may offer an important lesson for other governments trying to get the balance right between guarding public health and restarting their economies.

“Other countries should look to Iran and not do what it did,” said Dr. Kamiar Alaei, an expert on Iran’s public health and president of Institute for International Health and Education in Albany, N.Y.

“They moved late to close off cities and they opened too early,” Dr. Alaei said. “What we feared is coming true.”

Morteza, a resident of the city of Mahshahr in Khuzestan Province, said in a telephone interview that local officials seemed to be using a trial-and-error approach to managing the coronavirus. Now, he said, residents are confused and angry at the increase in new cases — and at the city shutting down again just as business and daily life was resuming.

“One day, we are told: ‘It’s safe. Go live your life,’” he said. “And the next day, we hear: ‘It’s dangerous. Stay home.’ We don’t know what to believe anymore because nobody trusts what the government says.”

In about one week, Muslims will mark the end of the holy fasting month of Ramadan with the holiday of Eid al-Fitr, ordinarily celebrated with a large communal prayer led by the Iranian supreme leader, Ayatollah Ali Khamenei. Mr. Rouhani said Saturday that the prayers led by Mr. Khamenei were canceled, but that prayers would be held with social distancing outdoors at local mosques in some cities.

On the last Friday of Ramadan, Iran customarily also stages an annual Quds Day rally, marking opposition to Israel and support of Palestinians’ claim to Jerusalem.
This year, in light of the pandemic, that was also changed.

First, it was announced that the powerful Revolutionary Guards force would take charge of the rally in Tehran, with a parade of cars replacing a pedestrian march. But a day later, the guards said they were canceling the parade altogether, citing the surge in the disease.

The plan now is for Ayatollah Khamenei to give a live speech.
Coronavirus Cases Slow in U.S., but the Big Picture Remains Tenuous

Reports of new cases have declined nationally, and deaths have slowed. But reopening plans leave unanswered questions.

By Julie Bosman, Amy Harmon and Mitch Smith

May 16, 2020

CHICAGO — The number of new coronavirus cases confirmed in the United States has steadily declined in recent days. In New York, the figure has dropped over the past month. The numbers have also plunged in hard-hit Massachusetts and Rhode Island, and some states, including Vermont, Hawaii and Alaska, are reporting few new cases at all.

But that progress is tenuous and uncertain.

The nation has reached a perilous moment in the course of the epidemic, embracing signs of hope and beginning to reopen businesses and ease the very measures that slowed the virus, despite the risk of a resurgence. With more than two-thirds of states significantly relaxing restrictions on how Americans can move about over the last few weeks, an uptick in cases is widely predicted.
Months after the virus began spreading, only about 3 percent of the population has been tested for it, leaving its true scale and path unknown even as it continues to sicken and kill people at alarming rates. More than 20,000 new cases are identified on most days. And almost every day this past week, more than 1,000 Americans died from the virus.

“We’re seeing a decline; undoubtedly, that is something good to see,” Jeffrey Shaman, an epidemiologist at Columbia University, said. “But what we are also seeing is a lot of places right on the edge of controlling the disease.”

The slowing of new cases is a stark change from two weeks ago, when coronavirus cases were stuck on a stubborn plateau nationally and case numbers were rising in many states. As of Friday, new cases were decreasing in 19 states and increasing in three, while staying mostly the same in the rest, according to a database maintained by The New York Times.

Encouraging signs have emerged in some of the hardest-hit places.

In New Orleans, where hundreds of new cases were being identified each day in early April, fewer than 50 have been announced daily in the last three weeks. In the Detroit area, which saw exponential case growth beginning in late March, numbers have fallen sharply. And in Cass County, Ind., where a meatpacking outbreak sickened at least 900 people, only a handful of cases have been reported most days this past week.

Even as many large cities saw their cases drop, increasing infections continue to be reported in parts of rural America. Some communities that have been fighting to get outbreaks under control finally appear to have succeeded, but have little idea how long it will last.

In Sioux Falls, S.D., where the virus sickened more than 1,000 people at a Smithfield pork processing plant, the outbreak appears to be slowing, Mayor Paul TenHaken said. More than 4,000 Smithfield employees, their family members and close contacts, were recently tested.

Yet the mayor fears that his city's progress could be temporary. On Monday, the plant will begin slaughtering hogs again. Hundreds of employees will be back together at work.

“I'll be honest, it makes me nervous,” Mr. TenHaken said. “We've seen how a zero-case facility can become a 1,000-case facility.”

Epidemiologists pointed to one overarching reason for the decline in new cases: the success of widespread social distancing.
Customers stayed far apart outside a grocery store in Austin, Texas, in April. Officials saw a spike in coronavirus cases two weeks after the state began to reopen.  Sergio Flores for The New York Times

Americans began to change their behavior in March, and it has undoubtedly helped control the spread of the coronavirus. Between mid-March, when public officials began to close schools and some workplaces, and late April, when the restrictions were lifted or eased in many states, 43.8 percent of the nation’s residents stayed home, according to cellphone data analyzed by The Times.

The major clusters of cases that have arisen have been almost exclusively in three settings without effective social distancing: nursing homes, correctional facilities and food-processing plants.

**Latest Updates: Coronavirus Outbreak in the U.S.**

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But in settings where distancing took place, the results have been overwhelming, researchers say. More than 70 percent of the U.S. population lives in counties where coronavirus cases were reduced as a result of less time spent outside the home, according to one estimate by a research team led by economists at Yale University. Without government orders to stay at home, 10 million more people in the United States would have been infected with the virus by the end of April, suggested a paper published this past week in the journal Health Affairs.
“There’s this disconnect of why it got better,” said Mayor Thomas P. McNamara of Rockford, Ill., who has repeatedly stressed to his constituents that it is not yet time to relax the measures that contributed: “Social distancing, stay at home, wear your face covering.”

Diners ate outside Franks Restaurant in the French Quarter of New Orleans on Friday. Reports of new cases have slowed there. Emily Kask for The New York Times

The challenge has been convincing impatient Americans to continue taking precautions that will continue to slow the spread of the virus while a cure or vaccine remains far out of reach.

“I just received an email from someone yesterday who said, ‘I don’t think people in our community are taking it seriously,’” said Kelly Chandler, the public health division manager for Itasca County, Minn., a lightly populated community with 42 cases of the coronavirus and six deaths.

Influxes of new cases were already turning up in some places that had seemed to tamp down earlier outbreaks.

In Arizona, which began reopening its economy without seeing a sustained drop in cases, infection numbers have continued to rise. More than 13,100 cases had been identified as of Friday. In Alabama, case numbers have grown since the state began to reopen its economy. And in Minnesota, cases around St. Cloud and Minneapolis have surged over the past two weeks, even as there were signs that the situation could be stabilizing.

In Kankakee County, Ill., confirmed cases have climbed in recent days because testing has been ramping up significantly, said John J. Bevis, the administrator for the Kankakee County Health Department. He predicted that cases would decline soon — but also that the recovery could be short-lived.

“Down the road, as things begin to reopen, there is the possibility of an increase in numbers again,” Mr. Bevis said in an email.

Along with cases, the number of deaths has slowed nationally.

Case and death reports vary greatly by day of the week, with spikes around midweek and steep drops on weekends. But on eight of the past nine days, there have been fewer deaths announced than there were seven days prior, an indication that the virus’s toll seems to be easing. More than half of the 24 counties that have recorded the most coronavirus deaths, including Oakland County, Mich., and Hartford County, Conn., are seeing sustained declines.

Deaths are a lagging sign of the virus’s progression because people who die of Covid-19 were typically infected three weeks earlier. But because death counts are not distorted by uneven testing practices, they are “a very clearly observed indicator,” said Nicholas Reich, a biostatistician at the University of Massachusetts, Amherst, who has begun to synthesize the projections of deaths produced by several modeling teams on a weekly basis. The “ensemble” model released on Tuesday sees the number drifting down from about 10,000 this week to about 7,000 in the first week of June.

Still, even with the slowing growth in new cases and deaths, the cumulative death toll in the United States is projected to reach about 113,000 by June 6, according to Dr. Reich’s latest ensemble model.
The effects of relaxing of restrictions on how Americans move about remain ahead. As more states lifted limits on businesses and movement, about 25 million more people ventured outside their homes on an average day last week than during the preceding six weeks, the analysis of cellphone data found.

But the lag after states reopen, combined with insufficient testing, may mask a rebound until it is underway for several weeks. The states that have reopened have offered a mixed picture — one more mysterious element of this virus, which doctors and scientists have grappled to understand as it has spread, swiftly and invisibly, through rural communities, on public transit, and in nursing homes, prisons and factories.

Georgia, which drew national attention when it eased its restrictions late last month, has not seen much change in its case numbers. Its curve has trended slightly downward this week.

Yet in Texas, officials reported a spike in coronavirus cases two weeks after the state began to reopen.

“At this point, there is uncertainty,” said Alessandro Vespignani, director of the Network Science Institute at Northeastern University, who has been modeling the path of the virus. “Probably the next week will be one of the crucial ones because if we see more decrease of cases we are still on a ‘good’ trajectory — if not, it really might be more problematic for the future.”

Julie Bosman reported from Chicago, Amy Harmon from New York, and Mitch Smith from Overland Park, Kan.

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A version of this article appears in print on May 17, 2020, Section A, Page 1 of the New York edition with the headline: New Cases in U.S. Slow, Posing Risk Of Complacency
'Straight-Up Fire' in His Veins: Teen Battles New Covid Syndrome

Jack McMorrow, 14, awoke in agony, with heart failure. His case may help doctors understand a frightening new affliction in children linked to the coronavirus.

By Pam Belluck

May 17, 2020

When a sprinkling of a reddish rash appeared on Jack McMorrow’s hands in mid-April, his father figured the 14-year-old was overusing hand sanitizer — not a bad thing during a global pandemic.

When Jack’s parents noticed that his eyes looked glossy, they attributed it to late nights of video games and TV.

When he developed a stomachache and didn’t want dinner, “they thought it was because I ate too many cookies or whatever,” said Jack, a ninth grader in Woodside, Queens, who loves Marvel Comics and has ambitions to teach himself “Stairway to Heaven” on the guitar.

But over the next 10 days, Jack felt increasingly unwell. His parents consulted his pediatricians in video appointments and took him to a weekend urgent care clinic. Then, one morning, he awoke unable to move.

He had a tennis-ball-size lymph node, raging fever, racing heartbeat and dangerously low blood pressure. Pain deluged his body in “a throbbing, stinging rush,” he said.

“You could feel it going through your veins and it was almost like someone injected you with straight-up fire,” he said.

Jack, who was previously healthy, was hospitalized with heart failure that day, in a stark example of the newly discovered severe inflammatory syndrome linked to the coronavirus that has already been identified in about 200 children in the United States and Europe and killed several.

The condition, which the Centers for Disease Control and Prevention are calling Multisystem Inflammatory Syndrome in Children, has shaken widespread confidence that children were largely spared from the pandemic. Instead of targeting lungs as the primary coronavirus infection does, it causes inflammation throughout the body and can cripple the heart. It has been compared to a rare childhood inflammatory illness called Kawasaki disease, but doctors have learned that the new syndrome affects the heart differently and erupts mostly in school-age children, rather than infants and toddlers. The syndrome often appears weeks after infection in children who did not experience first-phase coronavirus symptoms.

At a Senate hearing last week, Dr. Anthony S. Fauci, a leader of the government’s coronavirus response, warned that because of the syndrome, “we’ve got to be careful that we are not cavalier and thinking that children are completely immune to the deleterious effects.”
Jack's recovery and the experience of other survivors are Rosetta stones for doctors, health officials and parents anxious to understand the mysterious condition.

"He could have definitely died," said Dr. Gheorghe Ganea, who, along with his wife, Dr. Camelia Ganea, has been Jack's primary doctor for years. "When there's cardiovascular failure, other things can follow. Other organs can fail one after another, and survival becomes very difficult."

New York State has reported three deaths and, as of Sunday, 137 cases were being investigated in the city alone. Last week, a C.D.C. alert urged doctors nationwide to report suspected cases.

"Everyone is doing everything they can to help look into this from all different angles just to get the answers that parents want, that we want," said Dr. Thomas Connors, a pediatric critical care physician who treated Jack at NewYork-Presbyterian Morgan Stanley Children's Hospital.

Neither Jack nor his parents, John McMorrow and Doris Stroman, know how he became infected with the coronavirus. After cleaning out his locker at Monsignor McClancy High School on March 18 to continue school online at home, he only left the apartment once, they said, to help his mother wash clothes in their high-rise building’s laundry room. His parents and 22-year-old sister also avoided going out and the tests they have had turned up negative.
Last week, in their apartment festooned with welcome-home balloons, the family — Jack wearing a blue bandanna as a mask, his mother in a mask with the Rolling Stones tongue logo on it — recounted their story. His father, a recently laid-off truck driver for the film industry, briefly choked up and Jack bounded over to hug him.

The week after his hand rash and stomachache, about a month after he had last set foot in school, Jack developed a 102-degree fever and a sore throat. Worried, his mother arranged a video visit with their pediatricians, who started him on an antibiotic for possible bacterial infection. For several days, he felt about the same, but then other symptoms rapidly emerged: swollen neck, nausea, dry cough, a metallic taste.

On Saturday, April 25, his fever spiked to 104.7, his chest felt tight, and when he took deep breaths, “it hurt down in the bottom,” he said.
Jack arriving at the children's hospital in an ambulance.

via McMorrow family
That morning, Dr. Camelia Ganea video-conferenced with the family while still in her pajamas, discovering Jack could barely open his mouth. She prescribed steroids and suggested they visit an urgent care clinic. There, Jack was tested for the coronavirus, but it would be two days before results arrived.

By Monday, pain was “flowing through me like lightning,” Jack said, and a rosy rash covered his feet.

“I was very very emotional,” Jack said. He paused. “I’m using the word emotional to cover up the fact I was crying like a baby.”

Lying on the sofa, he could not move on his own and grasped for words to describe what was happening.

“Rooftop,” he implored his parents, seeking a shorthand way to ask them to bend his leg like a peaked roof.
“I didn't know what I was trying to say, but I knew what I meant,” he explained later.

With a home monitor, they discovered his blood pressure was very low. Mr. McMorrow lifted him, placing Jack's feet on top of his own, and shuffled him to the car. At NewYork-Presbyterian/Weill Cornell hospital, doctors gave Jack intravenous fluids and tried to diagnose his condition. He did not have the obvious respiratory distress of Covid-19. And then they got the results of his Saturday coronavirus test: negative.

Suspecting he might have a condition like mononucleosis, they prepared to discharge him, thinking he could be safely watched at home with instructions to return if his blood pressure dropped again, his parents said.

His mother was urging them to keep Jack longer when his eyes turned red with a “raging case of pinkeye” and rolled back in his head, she said. After a conversation with Jack's pediatrician, the hospital conducted its own coronavirus test. It was positive.

The doctor decided Jack should be transferred to NewYork-Presbyterian's pediatric affiliate, Morgan Stanley Children's Hospital, which is treating many coronavirus cases. Jack begged to go home.

The doctor responded bluntly, saying she knew that teenagers often think they are invincible.

“She told me if I go home now, by tomorrow, I'll be dead,” Jack said. “I would say that scared me to death, but it more scared me to life. It scared me to fight as hard as I could.”
Jack arrived at the children's hospital so feverish that his father was “washing me down with ice-cold water and it only felt like a tingle,” he said.

His resting heart rate was 165 beats per minute, about twice as high as normal, as his heart struggled to compensate for his alarmingly low blood pressure, which was hampering its ability to circulate blood and supply his vital organs with oxygen and nutrients.

This condition is a form of heart failure called cardiogenic shock, and Jack's was “pretty severe,” said Dr. Steven Kernie, chief of pediatric critical care medicine at the hospital and Columbia University. “Over all, his heart wasn’t working very well,” he said. “It wasn’t pumping as strongly as normal.”

Doctors could not explain why Jack's heart function had suddenly become impaired. Its structure and rhythm were normal. But blood vessels throughout his body were inflamed, a condition called vasculitis, so the vessels' muscles were “not controlling blood flow as well as they should,” Dr. Kernie said.

Doctors also suspected that the heart was inflamed, known as myocarditis, which in untreated serious cases can cause lasting damage. Jack's condition was not only distressing, it reflected a frightening new pattern. “I remember that morning having admitted multiple children with a similar syndrome,” Dr. Connors said, “and it was kind of like, ‘What’s going on here?’”

The inflammation seemed driven by a hyperactive immune response, and Jack received medication for bacterial infection until tests ruled that out. “Whenever kids come in in shock you have to treat for everything,” Dr. Kernie said.

Jack's positive coronavirus test was a clue, but others with similar symptoms had negative diagnostic test results, Dr. Connors said. The doctors then decided to check the other children for evidence of the coronavirus with a different test, one for antibodies, which signal they had an earlier, no-longer-active infection. Most children ended up having either a positive diagnostic or antibody test result.

By April 29, Jack's third day in the I.C.U., the blood pressure medication was not helping enough and doctors began planning to insert a central line through his groin to deliver additional medications. They also prepared to put Jack, who was receiving nasal oxygen, on a ventilator, something doctors deem necessary when “your heart's not doing its job,” Dr. Connors said. “We didn't know which way this was
going."

The situation, especially the prospect of a ventilator, was terrifying to Mr. McMorrow, 51, who stayed in Jack's hospital room round-the-clock, and Ms. Stroman, 52, who was at home communicating by text and FaceTime because only one parent was allowed in the hospital.

“You had a cardiologist, a pulmonary specialist, infectious disease experts all throwing numbers and prescriptions to each other, and this is stuff that’s French to me,” Mr. McMorrow said.

Jack mustered the energy to ask the doctors questions. “I needed to know because how am I supposed to fight something I don’t know I’m fighting,” he said.

He concluded that his condition essentially boiled down to: “Your coronary and pulmonary responses come back and bite you in the butt.”

But then doctors began giving Jack steroids, which can have anti-inflammatory and immunosuppressant effects. At last, something seemed to work. Within hours, Jack needed less blood pressure medication. As the family’s pediatrician, Dr. Ganea, who has training in infectious diseases and spoke to the hospital team, put it: “Jack turned into a normal Jack.”

Doctors are not sure the steroids made the difference, but since then, they have administered them much earlier to children with the syndrome, with encouraging results, Dr. Kernie said.

But Jack was not out of the woods even after moving to a regular hospital room. His heart rate was in the 30s, about half what it should be. The low heart rate might have been because of the steroids, doctors said, but they could not be sure, so they moved Jack to a unit with continual cardiac monitoring.

Over the next week, Jack recovered. He emailed his biology teacher from his hospital bed: “I would like to thank you for educating me as you did, and for providing me the educational support to understand my body when I need to most.”

His mother knew Jack was his old self when, on the phone, he asked to speak with his sister, quoting the family’s favorite movie, “Midnight Run”: “Is this moron No. 1? Put moron No. 2 on the phone.”
Jack's mother, Doris Stroman, clasped his wrist as she recalled his frightening ordeal. Gabriela Bhaskar for The New York Times
On May 7, 10 days after being hospitalized, Jack went home and traipsed around the apartment channeling Pinocchio: “I’m a boy! There are no strings on me!”

He will require follow-up cardiology appointments and will take steroids and blood thinners for a while. He may have some heart-valve tears and residual cardiac inflammation, but doctors expect those to heal on their own. Jack and his family have taken genetic tests as part of research into the syndrome, and he and other survivors will be followed as doctors strive to learn how to recognize and treat it.

Pausing near a model of Darth Vader’s castle on his desk, Jack said he once considered becoming an actor. He was even an extra on the TV show “Gotham,” playing a kidnapped orphan. But before getting sick, he was thinking about studying medicine. “I was really into the heart,” he said. Now, he is even more interested.

“I just want to do more with my life now that I have it back,” he said, gesturing with his Captain America shield.
3.1 earthquake strikes near Ridgecrest
A magnitude-3.1 earthquake was reported at 6:49 a.m. Sunday 13 miles from Ridgecrest, Calif., according to the U.S. Geological Survey.

The earthquake occurred 41 miles from California City, Calif., 64 miles from Tehachapi, Calif., 68 miles from Bakersfield and 71 miles from Rosamond, Calif.

In the past 10 days, there have been two earthquakes of magnitude 3.0 or greater centered nearby.

An average of 234 earthquakes with magnitudes of 3.0 to 4.0 occur each year in California and Nevada, according to a recent three-year data sample.

Read the full story on LATimes.com.
Gusty winds, chance of rain for Riverside and San Bernardino counties
RIVERSIDE — Gusty winds are expected Monday in the Coachella Valley, the San Gorgonio Pass and the Riverside and San Bernardino county mountains, plus light rain could fall everywhere except the Coachella Valley Monday morning.

Patchy fog will cover portions of the Riverside and San Bernardino metropolitan areas Monday morning, and there is a chance of rain throughout the day in those areas, in the San Gorgonio Pass near Banning and in the mountains, according to the National Weather Service.

The mountains and the Riverside metropolitan area have a 30% to 50% chance of measurable
precipitation today, while the San Gorgonio Pass has a 20% chance, forecasters said.

The mountains could get three-tenths of an inch of rain, while the Inland Empire is expected to get between one-tenth and two-tenths of an inch, according to the NWS. The San Gorgonio Pass is forecast to get less than one-tenth of an inch.

The NWS issued a wind advisory that will be in effect from 4 p.m. Monday through 9 a.m. Tuesday in the mountains, the San Gorgonio Pass and the Coachella Valley.

Winds out of the west will be 30 to 40 mph, with gusts possibly reaching 55 mph this afternoon near desert slopes and through mountain passes.

NWS officials warned that winds could be strong enough to blow around unsecured objects and knock down tree limbs, potentially causing power outages.
High temperatures Monday in the Riverside County area are forecast to reach 58 in Idyllwild; 71 in Lake Elsinore; 72 in Temecula, Hemet and the San Gorgonio Pass; 73 in Riverside; and 94 in the Coachella Valley. After the winds die down late Tuesday morning, fair and mild weather is expected the rest of the week, forecasters said.

San Bernardino County area highs Monday include 54 in Wrightwood; 55 in Big Bear; 68 in Yucaipa; 70 in Ontario and Rancho Cucamonga; 71 in Redlands; and 72 in San Bernardino.

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Fatal crash investigated on Highway 38 northeast of Mentone

By STAFF REPORT

PUBLISHED: May 17, 2020 at 7:38 p.m. | UPDATED: May 18, 2020 at 1:07 a.m.

The California Highway Patrol on Sunday was investigating a fatal vehicle crash on Highway 38 near Bryant Street, northeast of Mentone and north of Yucaipa.

CHP units were called at 5:19 p.m. to a report of an overturned vehicle. A coroner’s representative was later summoned to the scene, the CHP log showed.

Further details were not immediately available.

RELATED ARTICLES
Driver, passenger killed when car slams into concrete wall in San Bernardino

Two occupants of a car died after the driver ran a red light and slammed into a concrete wall in San Bernardino on Friday night, May 15, authorities said.

San Bernardino police responded to the crash in the area of Mill Street and Tippecanoe Avenue just past 6:05 p.m., Detective Dan Acosta said.

The driver who died, identified by police as 19-year-old Ashley Savannah Morga of San Bernardino, allegedly was traveling at a high rate of speed eastbound on Mill before she ran the red light at Tippecanoe and continued eastbound.
The passenger who died was identified by coroner officials as Abrianna Gyselle Surita, 17, also of San Bernardino.

It was not immediately known if drugs or alcohol, or distracted driving, were factors in the crash.
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Man, woman arrested; child to family services after discovery of Chino Hills ‘puppy mill’

By RICHARD K. DE ATLEY | rdeatley@scng.com | The Press-Enterprise
PUBLISHED: May 17, 2020 at 3:08 p.m. | UPDATED: May 17, 2020 at 3:24 p.m.

A man and woman at a Chino Hills apartment were arrested on suspicion of child endangerment and animal cruelty after deputies answering a domestic disturbance found what authorities on Sunday, May 17, called an illegal puppy mill, with the residence “covered in dog feces.”

The 1-year-old child was placed in the custody of San Bernardino County Department of Children and Family Services, and the four dogs and five puppies, described as French bulldogs, were taken by Animal Control for safe keeping, the San Bernardino County Sheriff’s Department said.

Chino Hills Station deputies made the discovery of the child, the dogs, and the condition of the
Man, woman arrested; child to family services after discovery of Chino Hills 'puppy mill' – San Bernardino Sun

apartment when they answered an 8:22 a.m. call on Saturday to The Crossings complex at 15101 Fairfield Ranch Rd. “Living conditions for both the child and the dogs were unhealthy,” the release said.

Thamasa Brooks, 27, remained in custody Sunday in lieu of posting bond on $75,000 bail; Daundre Hines, 28, had been released on bond by Sunday afternoon. Deputies did not disclose the relationships between Brooks, Hines, and the child.

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Two shot, one fatally, in San Bernardino incident
A shooting early Sunday left a man dead and a female injured, the San Bernardino Police Department said.

Officers were called to the 1400 block of North Waterman Avenue just after 3:30 a.m. on a report of a man down in the street. At the scene, Andrew Adams, 28, San Bernardino, was found with gunshot wounds and medical aid was dispatched to the scene, but Adams was later pronounced dead.

“A short time later a second female victim arrived at a local hospital with a gunshot wound and investigators learned that she was also shot at the Waterman Avenue location,” a police statement said.

The motive for the shooting was under investigation and police said no other information was available.
What is ballot harvesting and how is it affecting Southern California elections?

Misinformation and deeply partisan divides over ballot collecting remain, even as both parties tap the strategy heading into November.
Voters sign up as the Orange County Democrats are host a ballot party to reach new voters including Latina/o workers, first-time voters and young women Saturday, Feb. 15, 2020 in Anaheim. Ballot parties are produced in partnership with UNITE HERE Local 11, a hospitality union. (Photo by Michael Fernandez, Contributing Photographer)

By BROOKE STAGGS | bstaggs@scng.com | Orange County Register
PUBLISHED: May 17, 2020 at 7:00 a.m. | UPDATED: May 17, 2020 at 11:26 a.m.

As housekeepers, maintenance workers and other staff spilled out of the Anaheim Hilton and Sheraton during a lunch break in February, some headed to the parking lot between the hotels, clutching their mail-in ballots for the upcoming March 3 primary.

They were greeted by members of the Democratic Party of Orange County, who were hosting a “ballot party” focused on encouraging the workers to participate in the 2020 elections.

Organizers gave speeches, answered questions and handed out party recommendation pamphlets. Then workers were told that, if they wanted to, they could fill out their mail-in ballots and leave them in a sealed envelope that organizers would turn in on their behalf.
Some version of the same process — where someone can collect absentee or mail-in ballots from voters and then drop them into a mail box or polling place — is legal in most states. But California’s ballot collection rules are among the most permissive in the nation, with no restrictions on who can gather ballots or how many they can pick up.

It’s become a hot-button issue in Southern California heading into November, with elections experts saying misinformation and deeply partisan divides over the process could further erode faith in the democratic process.
Even the term for the process is contentious. Republicans uniformly call it “ballot harvesting,” implying that election results are planted and plucked from a field of voters. Democrats and voting rights advocates prefer the term “ballot collection,” insisting it’s a service for voters at risk of being shut out of the electoral process.

Nobody knows how often it happens, or how many votes are collected in this manner. There is no mechanism in California to tally ballots that are collected versus all other ballots. And, without such data, it’s impossible to tell how much of an impact the practice actually has on any election.

Southern California election officials, and others, say they haven’t seen any evidence of ballot tampering or fraud tied to ballot harvesting. The Orange County District Attorney, for example, says they haven’t received any complaints about potential abuse by ballot collectors. And no such case has been prosecuted in California.
But that hasn’t stopped GOP voters and officials from suggesting that ballot harvesting is a shady practice, and that two years ago Democrats used it to “steal” elections in Southern California. Even President Donald Trump condemned the practice last month, tweeting, “GET RID OF BALLOT HARVESTING, IT IS RAMPANT WITH FRAUD.”

Still, the practice figures to become more common this year. It’s possible that in-person voting will be less popular because of the threat of coronavirus or shelter-in-place rules, and Democrats say the ability to collect ballots could help the elderly and immunocompromised participate in the process.

But the California Republican Party in April sued Gov. Gavin Newsom over his refusal to ban ballot harvesting in the May 12 special elections, citing public health concerns with letting collectors go door to door — and setting the stage for an attempt to block the process entirely heading into November.

Yep, it’s legal

Ballot collecting was legalized four years ago, with the passage of Assembly Bill 1921, and it’s caused confusion in Southern Californian ever since.

Orange County Registrar Neal Kelley said before the 2018 midterms, residents from across the political spectrum were calling his office “in droves” with concerns about people trying to pick up their absentee or mail-in ballots.

“They said, ‘Someone is on my porch asking for my ballot. Why are they here? They shouldn’t be doing this,’” Kelley recalled.

His staff would explain to voters that they didn’t have to hand their ballots over unless they wanted to, but that the process was, indeed, legal.

Before the passage of AB 1921, voters could designate a close relative or other person living in the same household to return their ballot. Assemblywoman Lorena Gonzalez, D-San Diego, who authored AB 1921, called the previous policy a “well-meaning attempt at defining those who would be trusted by the voter.” But, she added, the restrictions previously in place provided “yet another obstacle for individuals attempting to vote, without any evidence-based justification against voter fraud.”

It was (and is) a felony for anyone to tamper with a ballot in California. Election officials also check the signature on all mail-in ballots against the voter’s signature on record.
The new law added a couple additional safeguards against abuse. For example, it is illegal to pay a ballot collector based on the number of votes they turn in, though ballot collectors can be paid by the hour. The law also requires that all ballots be mailed out or dropped off within three days of being collected, or by the end of Election Day, which ever comes first.

With Democrats holding a majority in Sacramento, AB 1921 passed easily, mostly on a party line vote. One exception was State Sen. John Moorlach, a Republican from Costa Mesa, who voted in favor of the bill.

Moorlach said he’s supported vote-by-mail options since his term as an Orange County Supervisor, saying he wants to see as many eligible people vote as possible. But when AB 1921 came up, Moorlach said, he envisioned it as an option for voters to use in case of emergency.

“I just didn’t anticipate ballot harvesting,” he said, stopping short of saying he regretted his vote on the bill. “I anticipated people going that route in extreme situations, where someone needed to hand over the ballot because they were incapacitated for whatever rare or unforeseen reason.”

Ballot collection not uncommon

Voting rights advocates say California’s law put a national spotlight on ballot collection programs.

In 27 states and Washington, D.C., it’s legal for residents to let someone other than a family member mail in or drop off their ballot, according to policies tracked by the National Conference of State Legislatures. However, many of those states impose more restrictions on that process than the rules imposed in California.

In Colorado, for example, ballot collectors can only submit up to 10 ballots each election. In Maine, collectors can’t be candidates or members of a candidate’s immediate family. And in Kansas, collectors must sign a statement saying they have “not exercised undue influence” on the voter and agreeing to deliver the ballot as directed. (While no such required statement exists in California, it’s still a felony for anyone to intimidate a voter.)

Rep. Ken Calvert, R-Corona, tried in 2019 to block ballot collections nationwide by inserting a ban on the practice into H.R. 1., a sweeping political ethics bill. House Democrats killed Calvert’s proposal before sending the law to the Senate, where it hasn’t been brought to a vote.

But some national clarity about ballot collection could come via another route.

Arizona law, since 2016, has said that only a family member, household member or caregiver can...
What is ballot harvesting and how is it affecting Southern California elections? – San Bernardino Sun

return an absentee ballot on behalf of a voter. But the Democratic National Committee sued over that law, saying it discriminated against minority voters including Native Americans who may live on remote tribal lands with limited access to mail.

Earlier this year, the 9th U.S. Circuit Court of Appeals sided with Democrats, and now Arizona’s Attorney General is asking the U.S. Supreme Court to weigh in.

Cause for concern?

Though there’s no evidence that ballot harvesting has been tied to fraud in California — or that voter fraud is a widespread problem anywhere — opponents still argue that ballot collection is ripe for abuse.

“I think that ballot harvesting is very dangerous for our country,” said Republican Mimi Walters, a former congresswoman from the 45th District who says her 2018 loss to Rep. Katie Porter, D-Irvine — by about 4.2 percentage points, or 12,523 votes — was largely due to ballot harvesting.

While she didn’t say anything illegal happened in her race, Walters said she believes ballot harvesting presents “too much opportunity for fraud.”

Fears of illegal voting and rigged elections have become more common since 2016, when Trump made unfounded claims about widespread voter fraud. But experts say extensive research — including a study commissioned by the Trump administration — shows that all forms of voter fraud are extremely rare.

Los Angeles, Orange and San Bernardino county elections officials said they carefully check for evidence of envelope tampering and for matching signatures, but said they haven’t found any suspected problems with collected ballots. Secretary of State spokesman Sam Mahood also said his office hasn’t been made aware of any issues related to ballot collecting in California.

The only criminal case specifically tied to ballot harvesting happened in North Carolina, where all vote harvesting is illegal. A political operative working for Republican candidate Mark Harris was indicted on charges that he took absentee ballots and destroyed or changed them.

While opponents also blame ballot harvesting for delaying election results, Kelley said a rise in mail-in voting and a separate law that lets people mail their ballots on Election Day have extended the vote count and there is no evidence that ballot harvesting is a factor. In 2018, for example, Kelley said collectors dropped off some stacks of ballots shortly after ballots were mailed out, but that they didn’t see big volumes coming in that way on Election Day.
Rick Hasen, a professor at UC Irvine who specializes in election law, said he sees value to states having reasonable limits on ballot harvesting, such as Colorado’s cap of 10 ballots per collector.

“Not because collecting ballots itself in and of itself is a problem,” he said.

“But giving ballots to a third party can provide an opportunity for there to be tampering with the ballots,” he added. “And during a time period when people are so skeptical about the integrity of elections and so quick to yell ‘fraud,’ I think not having outside groups handle large numbers of ballots makes sense.”

Both sides will try

Despite the controversy, both parties intend to use ballot collection programs during this year’s elections.

Rep. Devin Nunes, R-Visalia, told Fox News this week that the GOP is “forced to have to ballot harvest because it’s the only way to win” before falsely asserting that the practice is “illegal in 49 states.” Previously, a spokeswoman for the National Republican Congressional Committee also told the Register that her party would work to collect ballots.

Still, Republicans say the practice just doesn’t work with their voters.

Fred Whitaker, chair of the Republican Party of Orange County, said they spent money on a ballot harvesting program in 2018 but saw almost no results. He said, “Republicans will basically tell you, ‘You’re not prying my ballot from my hand.’”

Local Democrats call that sour grapes. They insist they simply have a better ground game and that ballot harvesting has become a convenient scapegoat for the GOP, which has seen voter registration numbers continually decline across Southern California.

Ada Briceño, chair of the Democratic Party of Orange County, said her staff and volunteers have collected mail-in ballots for GOP candidates and turned them in along with Democratic and independent ballots.

Briceño said her favorite story about ballot collection came in 2018, after she knocked on the door of a Latino man in his 70s. Her told her he’d never voted because he’d been intimidated by the ballot and process. Briceño said she spent time walking him through how it worked and discussing the candidates with him. By the end of their talk, she said the man was crying because he’d just finished voting for the first time in his life.
Briceño said she has a hard time understanding how anyone could object to such a process.

“If that’s their complaint, let them complain,” she said.