Board of Trustees

MEETING: April 13, 2020, 8:00 pm, Eastern Time

Pursuant to notice duly given, this executive session meeting of the Board of Trustees of the Unitarian Universalist Association was held via Zoom conferencing.

MEMBERS PRESENT: Genevieve Baldwin (youth trustee), Greg Boyd, Kathy Burek, Pablo de Vos-Deak (youth trustee), Suzanne Fast, Susan Frederick-Gray (President), Mr. Barb Greve (Co-Moderator), Sarah Dan Jones, Sherman Logan, Manish Mishra-Marzetti, Patrick McLaughlin, John Newhall, Lucia Santini Field (Financial Advisor), Tom Schade, Elandria Williams (Co-Moderator)

ADDITIONAL PARTICIPANTS: Carey McDonald (Recording Secretary & Executive Vice President), Andrew McGeorge (Treasurer), LaTonya Richardson, Barbara de Leeuw, Bill Young, Rebecca Throop, Charles Du Mond, Leslie Takahashi, Marcus Fogliano, Danielle Di Bona, Chris Buice

Meeting Minutes

EXECUTIVE SESSION

Co-Moderator Elandria Williams opened the meeting at 8:00 pm, and members shared a brief personal check-in. The Board entered Executive Session for the purpose of considering sensitive business and fiduciary matters.

It was reported that the Board unanimously approved the following items:

- "Findings and Resolutions of the Board of Trustees of the Unitarian Universalist Association of Congregations Concerning GA 2020 in Providence, Rhode Island" (attached).
- Proposed GA 2021 rates, so that in-person registrations from 2020 could be partially applied to 2021:

Milwaukee 2021 GA Registration Rates	April–June, 2020 If registered for GA 2020 before 4/15/20	Oct 2020–Feb 2021 Early Bird Registration	March–April, 2021 General Registration I	May–June, 2021 General Registration II
Adult	\$400	\$450	\$500	\$525
Reduced	\$200	\$200	\$200	\$225
Youth	\$150	\$200	\$200	\$225
Part-time	\$200	\$200	\$225	\$225
Virtual	\$150	\$200	\$200	\$200

- Affirmation of the UUA's application for a Paycheck Protection Program federal stimulus loan.
- Affirmation for the work of UUA staff, in particular General Assembly and Conference Services Director LaTonya Richardson, in preparing to transition to a virtual General Assembly.



The meeting closed 9:00 pm.

Respectfully submitted,

/s/ Carey McDonald

Recording Secretary



FINDINGS AND RESOLUTIONS OF THE BOARD OF TRUSTEES OF THE UNITARIAN UNIVERSALIST ASSOCIATION OF CONGREGATIONS <u>CONCERNING GA 2020 IN PROVIDENCE, RHODE ISLAND</u>

(ADOPTED ON APRIL 13, 2020)

WHEREAS, the Bylaws of the Unitarian Universalist Association (the "Association") provide that the business of the Association shall be conducted at meetings called "General Assembly," and that "General Assembly shall make overall policy for carrying out the purposes of the Association and shall direct and control its affairs";

WHEREAS, since the 1961 merger of the Unitarians and the Universalists ("UUs"), the Association has held a General Assembly in June of each year ("GA"), after most schools have closed and before summer vacations have begun in an effort to maximize attendance from adults and youth, in different parts of the United States and Canada;

WHEREAS, General Assembly brings together ministers, religious educators, delegates from the majority of the over one thousand member congregations in the Association, and other UUs, to make business decisions about the functioning of the Association, to worship as a gathered faithful body, to provide informative, inspiring and educational and workshops that help attendees learn strategies for strengthening our congregations, to further the social justice work of the UU faith movement, and to engage in other related events, all to foster a sense of community, a deepening of faith, and greater connection to the UU faith tradition which traces its roots back hundreds of years;

WHEREAS, the Bylaws of the Association provide that "[t]he Board of Trustees [the "Board"] shall act for the Association between General Assemblies";

WHEREAS, in 2017, the Board selected Providence, Rhode Island, as the city in which to hold General Assembly in June 2020;

WHEREAS, the Association books convention space years in advance because, based on decades of experience planning GA, the Association knows the amount of time required to organize GA, with planning tasks including, without limitation:

- A. contracting with nationally-recognized individuals to speak and present at GA;
- B. coordinating among the Board of Trustees, UUA administration and senior leadership, staff groups, and hundreds of musicians, ministers and worship leaders;
- C. organizing volunteers from around the country to staff and/or assist with various aspects of GA; including:

(i) ushers for large gatherings;

(ii) conference room set-up;

(iii) event flow; and

(iv) technology needs (the "tech deck" is staffed by more than a dozen technology professionals); and

(v) Youth and Young Adult Leadership and Staff;

WHEREAS, because of the preparation required and details requiring attention, each year in April before June GA, the Association hosts a meeting in the host city where it transports – at its expense – its Volunteer GA Planning Committee, Youth and Young Adult Leadership and Staff, National Volunteers and others to tour the space and finalize logistics regarding room assignments, set-up diagrams, assess technical needs and event flow, and to explore the surrounding neighborhood to assess the accessibility of public transport, sidewalk cutouts, wheelchair/scooter access at neighboring eateries and public restrooms and parks, as well as to identify food options for the overwhelming number of constituents with food allergies and restrictions, yet was unable to hold this meeting due to current travel and business restrictions;

WHEREAS, the Association held General Assembly 2014 at the Rhode Island Convention Center ("RICC") in Providence, an assembly attended by over 4700 registrants, more than 95% of whom came from states and the District of Columbia outside the state of Rhode Island;

WHEREAS, because the Association expected a similar number of attendees at GA 2020, it entered into a contract with the RICC and its management company dated as of October 2, 2017, to license the entire 100,000 square feet of space at the RICC, plus meeting space at the adjacent Dunkin' Donuts Center, from Monday, June 22, 2020 through Monday, June 29, 2020 (the "RICC Contract"), to hold the General Assembly 2020 convention ("GA 2020");

WHEREAS, pursuant to the RICC Contract and accompanying cover letter, and other communications between the parties concerning that contract, the parties' shared principal purpose in entering into that contract was to provide the Association with space to conduct the GA 2020 convention for several thousand people;

WHEREAS, because the Association expects thousands of people from outside of Rhode Island to attend GA 2020 at the RICC, it entered into contracts with eleven hotels and colleges in Providence (together, the "Lodging Contracts") to provide lodging and additional conference meeting space. Specifically, it entered into agreements with the following facilities for the following number of room nights and dates:

- Homewood Suites by Hilton (Downtown Providence), for 145 room nights from June 22-29, 2020;
- Residence Inn Providence Downtown Hotel, for 135 room nights from June 19-29, 2020;
- Providence Courtyard by Marriott, for 577 room nights from June 21-29, 2020;

- Hilton Providence, for 667 bed nights from June 20-29, 2020, plus thirty-five conference rooms and ballrooms, as well as a commitment to food and beverage sales;
- Johnson & Wales University ("JWU"), for a minimum of 50 and a maximum of 150 rooms per night from June 24-29, 2020;
- Marriott Providence Downtown for 577 room nights from June 21-29, 2020;
- Omni Providence Hotel for 2608 room nights from June 20-29, 2020, plus meeting and function rooms to be determined, as well as a commitment to food and beverage sales;
- Providence Biltmore, currently operating as "The Graduate Hotel" for 956 room nights from June 20-29, 2020, plus meeting and function space, as well as a commitment to food and beverage sales;
- Renaissance Providence Downtown Hotel for at least 667 room nights from June 20-29, 2020;
- Hotel Providence for 139 room nights from June 21-28, 2020; and
- Rhode Island School of Design ("RISD") for an estimated 130 residents from June 24-29, 2020;

WHEREAS, the Lodging Contracts and any conference rooms reserved therein, and communications between the parties concerning the Lodging Contracts, demonstrate that the shared purpose of those contracts was to provide lodging for people to attend a convention, including General Assembly, in Providence in June 2020;

WHEREAS, on January 21, 2020, <u>after</u> the Association had entered into the RICC and Lodging Contracts, the Center for Disease Control and Prevention ("CDC") confirmed the first case of COVID-19 in the United States;¹

WHEREAS, on March 9, 2020, Rhode Island Governor Gina Raimondo ("Governor Raimondo"), issued an Executive Order entitled "Declaration of Disaster Emergency," for the period through April 8, 2020, "due to the dangers to health and life posed by COVID 19,"² a

¹ <u>See</u> Press Release, CDC, First Travel-related Case of 2019 Novel Coronavirus Detected in United States (Jan. 21,2020), <u>https://www.cdc.gov/media/releases/2020/p0121-novel-coronavirus-travel-case.html (attached hereto as Exhibit 1)</u>.

² <u>See Rhode Island & Providence Plantations Governor's Office, Exec. Order 20-02: Declaration of Disaster Emergency (Mar. 9, 2020), http://www.governor.ri.gov/documents/orders/Executive-Order-20-02.pdf, (attached hereto as <u>Exhibit 2</u>).</u>

declaration that she has extended to May 8, 2020, pursuant to her Fifteenth Supplemental Emergency Declaration – entitled "Extension of Declaration of Disaster Emergency";³

WHEREAS, on March 11, 2020, the World Health Organization classified COVID-19 as a pandemic;⁴

WHEREAS, on March 13, 2020, the President of the United States issued a proclamation declaring a national emergency due to the COVID-19 pandemic;⁵

WHEREAS, on March 28, 2020, Governor Raimondo issued Executive Order 20-14, entitled "Amended Eleventh Supplemental Emergency Declaration – Staying At Home, Reducing Gatherings, Certain Retail Business Closures And Further Quarantine Provisions" (the "Emergency Declaration"), in which she ordered, among other things:

- "All gatherings of more than five (5) people in any public or private space such as an auditorium, stadium, arena, large conference room, meeting hall, library, theater, place of worship, parade, fair, festival, park or beach, are prohibited."
- "All Rhode Island residents are required to stay home unless traveling to work, traveling for medical treatment or obtaining necessities (food, medicine, gas, etc.). Rhode Island residents may still go outside to exercise and get fresh air, however, they must practice social distancing while outside and avoid touching surfaces frequently touched by others."
- "Any person coming to Rhode Island from another state for a non-workrelated purpose must immediately self-quarantine for 14 days." ⁶

³ <u>See</u> RHODE ISLAND & PROVIDENCE PLANTATIONS GOVERNOR'S OFFICE, EXEC. ORDER 20-18: FIFTEENTH SUPPLEMENTAL EMERGENCY DECLARATION-EXTENSION OF DECLARATION OF DISASTER EMERGENCY. http://www.governor.ri.gov/documents/orders/Executive-Order-20-18.pdf (attached hereto as <u>Exhibit 3</u>).

⁴ <u>See</u> Bill Chappell, *Coronavirus: COVID-19 Is Now Officially a Pandemic, WHO Says*, NPR (Mar. 11, 2020, 12:30 PM) <u>https://www.npr.org/sections/goatsandsoda/2020/03/11/ 814474930/coronavirus-covid-19-is-now-officially-a-pandemic-who-says</u> (attached hereto as <u>Exhibit 4</u>).

⁵ <u>See</u> EXEC. OFFICE OF THE PRESIDENT, PROCLAMATION ON DECLARING A NATIONAL EMERGENCY CONCERNING THE NOVEL CORONAVIRUS DISEASE (COVID-19) OUTBREAK (Mar. 13, 2020), https://www.whitehouse.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/ (attached hereto as <u>Exhibit 5</u>)

⁶ RHODE ISLAND & PROVIDENCE PLANTATIONS GOVERNOR'S OFFICE, EXEC. ORDER 20-14: AMENDED ELEVENTH SUPPLEMENTAL EMERGENCY DECLARATION- STAYING AT HOME, REDUCING GATHERINGS, CERTAIN RETAIL BUSINESS CLOSURES AND FURTHER QUARANTINE PROVISIONS (Mar. 28, 2020, http://www.governor.ri.gov/documents/orders/Executive-Order-20-14.pdf (attached hereto as <u>Exhibit 6</u>).

WHEREAS, Governor Raimondo ordered that the Emergency Declaration remain in effect until April 13, 2020 unless renewed, modified, or terminated by subsequent Executive Order;⁷

WHEREAS, on April 8, 2020, Governor Raimondo extended until May 8, 2020, at least those provisions of the Emergency Declaration prohibiting groups larger than five from gathering and requiring persons entering Rhode Island from another state for a non-work-related purpose to immediately self-quarantine for fourteen days.;⁸

WHEREAS, as of April 6, 2020, the Governors of 41 states, the Mayors of cities in four other states and the District of Columbia, and county leaders in Salt Lake County, Utah, had issued orders directing people to, among other things, stay at home to protect the public health by minimizing the spread of COVID-19 (together, the "Stay at Home Orders"),⁹ thereby requiring over ninety percent of the people living in the United States to remain at home;¹⁰

WHEREAS, in discussing COVID-19, the CDC website observed that "large-scale isolation and quarantine was last enforced during the influenza ('Spanish Flu') pandemic in 1918–1919",¹¹

WHEREAS, the Association projects, based on having conducted decades of General Assemblies, that more than fifty percent of the attendees at GA 2020 will come from the ten states with the greatest number of people diagnosed with COVID-19, the Governors of which states have all issued Stay at Home orders;

WHEREAS, the Association projects, based on having conducted decades of General Assemblies including GA 2014 in Providence, that more than 95% of the attendees at GA 2020 will come from states other than Rhode Island, and thus, if the Emergency Declaration remains in force through the first day of General Assembly, would be required to self-quarantine for fourteen days upon arrival in Rhode Island;

¹⁰ Philip Bump, *Nearly all Americans are under stay-at-home order. Some may have come too late,* WASH. POST (Apr. 2, 2020), https://www.washingtonpost.com/politics/2020/04/02/nearly-all-americans-are-under-stay-at-home-orders-some-may-have-come-too-late/_(attached hereto as Exhibit 9).

¹¹ Quarantine and Isolation: Legal Authorities for Public Health Orders, CDC https://www.cdc.gov/quarantine/aboutlawsregulationsquarantineisolation.html (last visited Apr. 8, 2020) (attached hereto as Exhibit 10); Quarantine and Isolation: History of Quarantine, CDC, https://www.cdc.gov/quarantine/historyquarantine.html (last visited Apr. 8, 2020) (attached hereto as Exhibit 11).

⁷ <u>Id</u>.

⁸ Raimondo Extends Dining, Social Distancing Executive Orders Until May 8 - Some Orders Indefinitely, GOLOCALPROV (Apr. 7, 2020), https://www.golocalprov.com/news/raimondo-extends-dining-social-distancingexecutive-orders-until-may-8-some (attached hereto as <u>Exhibit 7</u>).

⁹ Sarah Mervosh, et al., *See Which States and Cities Have Told Residents to Stay at Home*, N.Y. TIMES (Apr. 7, 2020), https://www.nytimes.com/interactive/2020/us/coronavirus-stay-at-home-order.html_(attached hereto as <u>Exhibit 8</u>).

WHEREAS, at GA 2019, 43% of the attendees were between the ages of 55-69, and 28% were age 70 or older, percentages the Association projects will reflect the ages of the attendees at GA 2020, such that at least one-third of the attendees at GA 2020 are expected to be age 65 or older, all of whom, according to the CDC, are at "high risk" for COVID-19;¹²

WHEREAS, airline, rail, and bus transportation have been curtailed, particularly in the northeastern United States. Specifically, but without limitation,

- A. Multiple commercial airlines have reduced the number of flights arriving at and departing from Providence,¹³ New York City¹⁴ and Boston;¹⁵
- B. American Airlines suspended 60% of its capacity in April 2020 as compared to the same period in 2019,¹⁶ Alaska Airlines suspended 80% of its capacity in April and May, 2020,¹⁷ and Southwest Airlines has cancelled flights;¹⁸
- C. Amtrak is running trains in many areas of the country, including New England, on a reduced schedule, and has suspended services on some routes including Boston-Washington, a train that stops in Providence;¹⁹ and

¹⁴ David Schaper, *Airline Flights Into And Out of New York City Cut Drastically Because Of Coronavirus*, NPR (Apr. 6, 2020), https://www.scpr.org/news/2020/04/06/91744/airline-flights-into-and-out-of-new-york-city-cut/ (attached hereto as Exhibit 14).

¹⁵ Zeninjor Enwemeka, *Travel Plunges 93% At Boston Logan Airport Amid Coronavirus Outbreak*, WBUR: BOSTONOMIX (Apr. 6, 2020), https://www.wbur.org/bostonomix/2020/04/06/travel-decline-boston-logan-airport-coronavirus (attached hereto as Exhibit 15).

¹⁶ American Airlines Announces Additional Schedule Suspensions in Response to Reduced Customer Demand Related to COVID-19, AM. AIRLINES (Mar. 27, 2020, 8:00 AM), http://news.aa.com/news/newsdetails/2020/American-Airlines-Announces-Additional-Schedule-Suspensions-in-Response-to-Reduced-Customer-Demand-Related-to-Covid-19-OPS-DIS-03/ (attached hereto as Exhibit 16).

¹⁷ Alaska Air reports 80%+ drop in flight demand due to COVID-19 outbreak, KOMO (Apr. 7, 2020, 8:52 AM), https://www.chron.com/local/komo/article/Alaska-Air-reports-80-drop-in-flight-demand-due-15184037.php (attached hereto as <u>Exhibit 17</u>).

¹⁸ Coronavirus (COVID-19) Travel Information, SOUTHWEST AIRLINES, https://www.southwest.com/Coronavirus/ (last visited Apr. 8, 2020) (attached hereto as <u>Exhibit 18</u>).

¹⁹ Service Adjustments Due to Coronavirus, AMTRAK (Apr. 6, 2020, 5:00 PM), https://www.amtrak.com/alert/service-adjustments-due-to-coronavirus.html (attached hereto as <u>Exhibit 19</u>).

¹² Coronavirus Disease 2019 (COVID-19): Underlying Conditions, CDC, https://www.cdc.gov/coronavirus/2019-ncov/hcp/underlying-conditions.html_(last visited Apr. 8. 2020) (attached hereto as <u>Exhibit 12</u>).

¹³ Gina Marini, *Data shows sharp decline in road, air travel amid COVID-19 outbreak*, WPRI (Apr. 2, 2020, 9:24 PM), https://www.wpri.com/health/coronavirus/data-shows-sharp-decline-in-road-air-travel-amid-covid-19-outbreak/ (attached hereto as Exhibit 13).

D. Peter Pan Bus Company has reduced service in the Northeast,²⁰ and Greyhound Bus Company has suspended service in some regions (particularly in New England), and reduced it in others.²¹

WHEREAS, there is uncertainty in the scientific community as to precisely how long Americans will need to engage in social distancing as a result of COVID-19, reports suggests that social distancing will need to continue into the summer,²² such that as of the date hereof, the following facilities and events, among others, scheduled to be held in and after June 2020, have been postponed or cancelled, presumably due to the public health risks of, the national pandemic that is, and the effects of COVID-19, the Emergency Declaration, and/or the Stay at Home Orders:

- A. Cirque du Soleil, scheduled at Dunkin' Donuts Center in Providence, Rhode Island, for June 3-7, 2020, was cancelled;²³
- B. the Boston Pride parade, scheduled for June 13, 2020, was cancelled;²⁴
- C. the men's U.S. Open golf championship scheduled for June 15-21, 2020 in Mamaroneck, N.Y., was cancelled;²⁵
- D. the Rhode Island National Guard 2020 Air Show at Quonset State Airport scheduled for June 20-21, 2020, was cancelled;²⁶

²² <u>See, e.g.</u>, Jonathan Lambert, *When will the coronavirus pandemic and social distancing end?*, SCIENCENEWS (Mar. 24, 2020, 11:28 AM), https://www.sciencenews.org/article/covid-19-when-will-coronavirus-pandemic-social-distancing-end (attached hereto as <u>Exhibit 22</u>); Ed Yong, *How the Pandemic Will End*, THE ATLANTIC (Mar. 25, 2020), https://www.theatlantic.com/health/archive/2020/03/how-will-coronavirus-end/608719/ (attached hereto as <u>Exhibit 23</u>); Brenda Goodman, *Social Distancing May Need to Last Months: Study*, WEBMD (Mar. 25, 2020), https://www.webmd.com/lung/news/20200325/social-distancing-may-need-to-last-months-study (attached hereto as <u>Exhibit 24</u>).

²³ UPCOMING EVENTS, DUNKIN DONUTS CENTER, http://www.dunkindonutscenter.com/events (last visited Apr. 8, 2020) (attached hereto as <u>Exhibit 25</u>).

²⁴ Kevin Slane, *Boston Pride cancels 2020 parade and festival due to the coronavirus*, BOSTON GLOBE (Apr. 7, 2020), https://www.boston.com/culture/lifestyle/2020/04/07/boston-pride-2020-canceled-coronavirus (attached hereto as Exhibit 26).

²⁵ Jeff Altstadter, U.S. Open Postponed to September at Winged Foot U.S. Open, USGA (Apr. 6, 2020), https://www.usopen.com/2020/articles/usga-postpones-u-s--open-to-september.html (attached hereto as <u>Exhibit 27</u>).

²⁶ Rhode Island National Guard Cancels 2020 Airshow, 10 WJAR (Mar. 25, 2020), https://turnto10.com/news/local/rhode-island-national-guard-cancels-2020-air-show (attached hereto as Exhibit 28).

²⁰ *COVID-19 Update: Schedule Updates & Changes*, PETER PAN BUS LINES, https://peterpanbus.com/covid-19-update-schedule-updates-changes/ (last visited Apr. 8, 2020) (attached hereto as <u>Exhibit 20</u>).

²¹ *COVID-19 Update: Schedule and Service Changes*, GREYHOUND (Apr. 6, 2020), https://www.greyhound.com/en/help-and-info/travel-info/schedule-service-changes (attached hereto as Exhibit 21).

- E. the entire season of the Jacobs' Pillow Dance Festival in western Massachusetts, scheduled for June 24-August 30, 2020, was cancelled for the first time in its eighty-eight year history;²⁷
- F. Boston's Museum of Fine Arts has closed through June 30, 2020;²⁸
- G. the Democratic party's national convention in Milwaukee, WI, was postponed from July 13-16, 2020, to the week of August 17, 2020;²⁹
- H. the Massachusetts bar examination, taken by 1377 people in 2019,³⁰ was postponed by the Massachusetts Supreme Judicial Court and the Massachusetts Board of Bar Examiners from July 28-29, 2020,³¹ until September 30-October 1, 2020;³²
- I. the New York bar examination, which was scheduled for July 28-29, 2020, was postponed by the Court of Appeals of the State of New York.³³

WHEREAS, ESPN reported that during a call on April 4, 2020, the U.S. President told commissioners of a United States professional sports league that he "hopes to have fans back in stadiums and arenas by August and September,"³⁴ more than thirty days <u>after</u> the date GA 2020 is scheduled to close;

²⁸ Murray Whyte, *Museum of Fine Arts will remain closed, furloughs staffers through June 30*, BOSTON GLOBE (Apr. 3, 2020), <u>https://www.bostonglobe.com/2020/04/03/arts/museum-fine-arts-will-remain-closed-furlough-staffers-through-june-30</u>/ (attached hereto as <u>Exhibit 30</u>).

²⁹ Ried J. Epstein, et al., *Democrats Postpone Convention, and a Test of Wills With Republicans Looms*, N.Y. TIMES (Apr. 2, 2020), https://www.nytimes.com/2020/04/02/us/politics/milwaukee-democratic-convention-delayed.html_(attached hereto as <u>Exhibit 31</u>).

³⁰ MASSACHUSETTS BAR EXAM RESULTS, MASS. BOARD OF LAW EXAMINERS, https://www.mass.gov/service-details/massachusetts-bar-exam-results_(last visited Apr. 4, 2020) (attached hereto as <u>Exhibit 32</u>).

³¹ Press Release, Mass. Board of Law Examiners, Massachusetts Bar Examination Postponed (Mar. 30, 2020), https://www.mass.gov/news/massachusetts-bar-examination-postponed_(attached hereto as <u>Exhibit 33</u>).

³² New dates set for postponed July bar exam, MASS. LAWYERS WEEKLY (Apr. 4, 2020), https://masslawyersweekly.com/2020/04/04/new-date-set-for-postponed-july-bar-exam/ (attached hereto as Exhibit <u>34</u>).

³³ THE NEW YORK STATE BOARD OF LAW EXAMINERS: NOTICES (Apr. 6, 2020), https://www.nybarexam.org/ (attached hereto as <u>Exhibit 35</u>).

³⁴ President Trump says NFL season should stay on schedule, ASSOC. PRESS (Apr. 4, 2020) https://www.bostonglobe.com/2020/04/04/sports/president-trump-says-nfl-season-should-stay-schedule/_(attached hereto as Exhibit 36).

²⁷ Kari Njiri, *Why Jacob's Pillow Canceled A Season For The 1st Time In Its 88-Year History*, NEW ENG. PUBLIC RADIO (Apr. 3, 2020), <u>https://www.nepr.net/post/why-jacobs-pillow-canceled-season-1st-time-its-88-year-history#stream/0</u> (attached hereto as <u>Exhibit 29</u>).

WHEREAS, as of April 7, 2020, thirteen states, including Vermont, had decided to close their schools, and two more, including California, had recommended closure, for the remainder of the school year,³⁵

WHEREAS, on April 6, 2020, RISD advised the Association that: "[g]iven the uncertain projections for when COVID-19 will slow, RISD has decided the most responsible course of action for summer is to not hold any programming on campus. As a result, we will not be able to provide accommodations for the UUA program",³⁶

WHEREAS, on April 9, 2020, JWU advised the Association that it was cancelling its summer programs and its lodging contract with the Association due to COVID-19;

WHEREAS, the square footage of the RICC and the conference rooms set aside for the Association by the counterparties to the Lodging Contracts is insufficiently large to accommodate the number of people expected to attend GA <u>and</u> comply with the CDC guidelines that people maintain social distance from one another of at least six feet (24 square feet per person);³⁷

WHEREAS, the square footage of each of the lobbies of the hotels that entered into the Lodging Contracts are insufficiently large to accommodate the number of people attending GA staying in their hotels <u>and</u> comply with the CDC guidelines that people maintain social distance from one another of at least six feet (24 square feet person);

WHEREAS, on April 6, 2020, the RICC advised the Association in writing that it did not have any availability after the dates scheduled for GA 2020 to which it could reschedule the convention this year,³⁸

WHEREAS, it is important to hold GA 2020, even if not in person, to, among other things, elect new Co-Moderators for the Association and new members of the Association's Board of Trustees and standing committees, to conduct the worship and hold the inspiring educational and spiritual workshops and social justice events to the greatest extent possible, to foster the connection and faith development General Assembly provides for UUs;

WHEREAS, while the Association has never held a "virtual" GA, video-conference technology has improved, and people have become more comfortable using that technology, such that the Association believes it will be possible to hold the business and much of the

³⁵ *Map: Coronavirus and School Closures*, EDUCATION WEEK (Apr. 8, 2020, 7:30 PM), https://www.edweek.org/ew/section/multimedia/map-coronavirus-and-school-closures.html (attached hereto as <u>Exhibit 37</u>).

³⁶ A true and accurate copy of this email is attached as Exhibit 38.

³⁷ Coronavirus Disease 2019 (COVID-19): Public Health Recommendations after Travel-Associated COVID-19 Exposure, CDC, https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html (last visited Apr. 8, 2020) (attached hereto as Exhibit 39).

³⁸ A true and accurate copy of this email is attached hereto as <u>Exhibit 40</u>.

programming planned for GA 2020 by video-conference, and that preparation for a "virtual" GA will require months of preparation; and

WHEREAS, the UUA's belief that it may conduct GA 2020 "virtually" is supported by the decision of, among other organizations, the Material Handling Equipment Distributors Association,³⁹ Young Living Essential Oils,⁴⁰ and perhaps the Democratic party,⁴¹ to holds its conventions "virtually" this year.

NOW, BASED ON THE FOREGOING, THE ASSOCIATION'S BOARD OF TRUSTEES FINDS AS FOLLOWS:

1. The Association and the RICC each have obligations yet to perform under the RICC Contract.

2. The Association and the counter-parties to the Lodging Contracts all have obligations yet to perform under them.

3. The public health risks of, the national pandemic that is, and the consequences of COVID-19 ("COVID-19), the Emergency Declaration (A) prohibiting gatherings of more than five people, (B) requiring Rhode Island residents to stay home unless traveling for a limited number of specified purposes; and (C) requiring any person coming to Rhode Island from another state for a non-work-related purpose to immediately self-quarantine for 14 days, and the Stay at Home Orders (the "Emergency Declaration and the Stay at Home Orders") (together, the "Orders"), were all supervening events that occurred after the RICC Contract and the Lodging Contracts were executed, events that have led to cancellation or postponement of numerous events in Rhode Island and elsewhere in the Rhode Island region of the United States.

4. The non-occurrence of COVID-19 and the Orders were basic assumptions on which the RICC Contract and the Lodging Contracts were executed.

5. The occurrence of COVID-19 and the Orders has frustrated the parties' principal purpose in entering into the RICC Contract and the Lodging Contracts, *i.e.*, to provide a space for the business, educational and spiritual workshops, social justice and other events, of GA 2020, and lodging and conference room space for persons attending GA 2020.

6. The frustration of the parties' principal purpose in entering into the RICC contract and the Lodging Contracts is substantial in that COVID-19 and the Orders make it unsafe, impracticable, impossible and illegal for, among other things, more than five non-Rhode

³⁹ 2020 VIRTUAL CONVENTION, MHEDA, https://www.mheda.org/mheda-annual-convention/2020-virtual-convention/ (last visited Apr. 8, 2020) (attached hereto as Exhibit 41).

⁴⁰ Young Living Essential Oils 2020 Virtual International Grand Convention, CVENT, http://www.cvent.com/events/virtual-international-grand-convention/event-summary-1a6c7e2035df46939edf9ada1f59b99a.aspx (last visited Apr. 8, 2020) (attached hereto as Exhibit 42).

⁴¹ Molly Nagle, et al., *Biden says 2020 convention may be 'virtual,' will wear mask in public amid COVID-19 outbreak*, ABC NEWS (Apr. 5, 2020, 1:11 PM), https://abcnews.go.com/Politics/biden-2020-convention-virtual-wear-mask-public-amid/story?id=69971828 (attached hereto as Exhibit 43).

Islanders to attend GA, and even those five, if they came from outside of Rhode Island, may be required to self-quarantine for fourteen days, and thus for the Association to hold, GA 2020 as planned.

7. Because, according to the CDC, "large-scale isolation and quarantine was last enforced during the influenza pandemic in 1918–1919, the large scale isolation and quarantine arising from COVID-19 and the Orders were not foreseeable.

8. The occurrence of COVID-19 and the Orders have rendered use of the RICC for GA 2020 unsafe, illegal, impossible, and impracticable.

9. The occurrence of the RICC being unsafe, illegal, impossible, and impracticable for GA 2020 was a supervening event that occurred after the parties executed the Lodging Contracts.

10. The non-occurrence of the RICC being unsafe, illegal, impossible and impracticable for GA 2020 was a basic assumption on which the parties' executed the Lodging Contracts.

11. The risk to safety, illegality, impossibility, and impracticability of using the RICC for GA 2020 has frustrated the parties' principal purpose in entering into the Lodging Contracts, *i.e.*, to provide lodging for thousands of people attending GA 2020 at the RICC.

12. The frustration of the parties' principal purpose in entering into the Lodging Contracts was substantial in that without the RICC holding GA 2020, the parties would not have entered into the Lodging Contracts.

13. For the reasons set forth above, it was not foreseeable that it would be unsafe, impracticable, illegal, and impossible, to use the RICC for GA 2020 in June 2020, and that the Lodging Contracts would be unnecessary.

14. COVID-19 and the Orders constitute government restrictions and/or causes beyond the reasonable control of the Association that prevent the parties from performing the RICC Contract and the Lodging Contracts.

15. COVID-19 and the Orders are evidence of an emergency and constitute government restrictions or regulations and/or causes beyond the reasonable control of the Association, that have resulted in a curtailment of transportation, and that render it illegal, impossible, and impractical to hold GA 2020 in person on the dates scheduled.

16. Based on the postponement and cancellation of events scheduled from June through August listed in the recitals above, the closure of schools in ten states through June, the comments of the U.S. President about the time frame for the return of fans to professional sports, and the scientific uncertainty as to when the public health risks posed by the national pandemic and epidemic that is COVID-19, will slow, there is reason to believe that the public health risks will continue during all or a portion of the period from June 20-29, 2020, at least for "high risk"

individuals age 65 and over who represent a significant percentage of people expected to attend GA 2020, and that all or a portion of the Emergency Declaration and/or Stay at Home Orders will be extended through that period.

17. Because (a) there is scientific reason to believe that the public will need to continue to engage in social distancing due to the public health risks of COVID-19 during all or a portion of the period of the period from June 20-29, 2020, (b) the RICC does not have availability to reschedule GA 2020 at any time after the dates now set for the conference, (c) the Association has never planned a "virtual" GA, and preparation therefore will require months of work, (d) registrants for GA 2020 must make or amend travel plans in the midst of curtailment of transportation, and (e) canceling the RICC Contract and the Lodging Contracts now enable the Association to mitigate any exposure for such cancellation and "free up" the rooms that have been reserved for the Association in the Lodging Contracts, and (f) the principal purpose for which the parties entered into the RICC Contract and the Lodging Contracts have been frustrated and the force majeure provisions in those contracts have been satisfied, the Association believes that the responsible course of action is to decide now whether to cancel the RICC Contract and Lodging Contracts, and to cancel them.

BASED ON SUCH FINDINGS, THE ASSOCIATION'S BOARD OF TRUSTEES, IN THE EXERCISE OF ITS REASONABLE BUSINESS JUDGMENT, RESOLVES:

A. THAT, the Association will hold GA 2020 on the dates for which it is scheduled in June 2020 "virtually," *i.e.*, through video-conference rather than having attendees jeopardize their health and safety, and risk violating the Emergency Declaration, the Stay at Home orders, and/or any other orders or government regulations that may be in effect on those dates;

B. THAT, an officer of the Association is authorized, but not required, to execute an amendment to the RICC Contract in the form attached hereto as <u>Exhibit 44</u> (the "RICC Amendment"), with such modifications thereto as the officer may reasonably determine, to reserve space at the RICC and the Dunkin' Donuts Center for GA 2024;

C. THAT, an officer of the Association shall provide notice of termination of the Lodging Contracts to all counter-parties to those contracts due to, among other things, frustration of purpose and each contract's force majeure clause(s), by delivering to them a copy of these Resolutions in the manner prescribed by the Lodging Contracts, requesting (a) that all deposits and other amounts paid by the Association be refunded within thirty days, and (b) written confirmation that the Association has no liabilities and obligations to the counter-party arising under or related to the lodging contract; provided, however, that the officer need not give notice of termination to (x) RISD and JWU, which canceled its lodging contracts; and (y) any counter-party that agrees to an amendment to its lodging contract similar in substance to the amendment agreed to by RICC attached hereto if the RICC Amendment is executed; and

D. THAT, the officers of the Association are hereby authorized and directed to take such further steps as they deem necessary or appropriate to implement the intent and purposes of the foregoing resolutions.



CDC Newsroom

First Travel–related Case of 2019 Novel Coronavirus Detected in United States

Press Release

For Immediate Release: Tuesday, January 21, 2020 **Contact: Media Relations** (404) 639-3286

The Centers for Disease Control and Prevention (CDC) today confirmed the first case of 2019 Novel Coronavirus (2019nCoV) in the United States in the state of Washington. The patient recently returned from Wuhan, China, where an outbreak of pneumonia caused by this novel coronavirus has been ongoing since December 2019. While originally thought to be spreading from animal-to-person, there are growing indications that limited person-to-person spread is happening. It's unclear how easily this virus is spreading between people.

The patient from Washington with confirmed 2019-nCoV infection returned to the United States from Wuhan on January 15, 2020. The patient sought care at a medical facility in the state of Washington, where the patient was treated for the illness. Based on the patient's travel history and symptoms, healthcare professionals suspected this new coronavirus. A clinical specimen was collected and sent to CDC overnight, where laboratory testing yesterday confirmed the diagnosis via CDC's Real time Reverse Transcription-Polymerase Chain Reaction (rRT-PCR) test.

CDC has been proactively preparing for the introduction of 2019-nCoV in the United States for weeks, including:

- First alerting clinicians on January 8, 2020, to be on the look-out for patients with respiratory symptoms and a history of travel to Wuhan, China.
- Developing guidance for clinicians for testing and management of 2019-nCoV, as well as guidance for home care of patients with 2019-nCoV.
- Developing a diagnostic test to detect this virus in clinical specimens, accelerating the time it takes to detect infection. Currently, testing for this virus must take place at CDC, but in the coming days and weeks, CDC will share these tests with domestic and international partners
- On January 17, 2020, CDC began implementing public health entry screening at San Francisco (SFO), New York (JFK), and Los Angeles (LAX) airports. This week CDC will add entry health screening at two more airports – Atlanta (ATL) and Chicago (ORD).
- CDC has activated its Emergency Operations Center to better provide ongoing support to the 2019-nCoV response.

CDC is working closely with the state of Washington and local partners. A CDC team has been deployed to support the ongoing investigation in the state of Washington, including potentially tracing close contacts to determine if anyone else has become ill.

Coronaviruses are a large family of viruses, some causing respiratory illness in people and others circulating among animals including camels, cats and bats. Rarely, animal coronaviruses can evolve and infect people and then spread between people, such as has been seen with Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). When person-to-person spread has occurred with SARS and MERS, it is thought to happen via respiratory droplets with close contacts, similar to how influenza and other respiratory pathogens spread. The situation with regard to 2019-nCoV is still unclear. While severe illness, including illness resulting in several deaths, has been reported in China, other patients have had milder illness and been discharged. Symptoms associated with this virus have included fever, cough and trouble breathing. The confirmation that some limited person-to-person spread with this virus is occurring in Asia raises the level of concern about this virus, but CDC continues to believe the risk of 2019-nCoV to the American public at large remains low at this time. This is a rapidly evolving situation. CDC will continue to update the public as circumstances warrant.

For more information about the current outbreak in China, visit: https://www.cdc.gov/coronavirus/novel-coronavirus-2019.html

- For more information about Coronaviruses: https://www.cdc.gov/coronavirus/index.html
- For travel health information: https://wwwnc.cdc.gov/travel/notices/watch/pneumonia-china

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 🗹

CDC works 24/7 protecting America's health, safety and security. Whether disease start at home or abroad, are curable or preventable, chronic or acute, or from human activity or deliberate attack, CDC responds to America's most pressing health threats. CDC is headquartered in Atlanta and has experts located throughout the United States and the world.

Page last reviewed: January 21, 2020

EXHIBIT 2



SECHETARY OF STATE PUBLIC INFORMATION CENTER 2020 MAR -9 PM 4: 47

State of Rhode Island and Providence Plantations

Gina M. Raimondo Governor

EXECUTIVE ORDER

20-02

March 9, 2020

DECLARATION OF DISASTER EMERGENCY

WHEREAS, on January 30, 2020, the World Health Organization designated the novel coronavirus, COVID-19, outbreak as a Public Health Emergency of International Concern;

WHEREAS, on January 31, 2020 the Rhode Island Department of Health established an Incident Command System response to COVID-19;

WHEREAS, on January 31, 2020, United States Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the entire United States to aid the nation's healthcare community in responding to COVID-19;

WHEREAS, the number of countries that are experiencing community transmission of COVID-19 continues to grow;

WHEREAS, community transmission in the United States has occurred in some states and is an immediate public health threat to the elderly and those with underlying health conditions;

WHEREAS, cases of COVID-19 have been documented in the State of Rhode Island;

Executive Order 20-02 March 9, 2020 Page 2

WHEREAS, the State has worked tirelessly to contain the spread of COVID-19 within its borders;

WHEREAS, the State needs to take additional measures to limit the spread of COVID-19; and

WHEREAS, Rhode Island General Laws § 30-15-9(e)(1) permits the Governor to suspend the provisions of any regulatory statute prescribing the procedures for conduct of state business, or the orders, rules, or regulations of any state agency, if strict compliance with the provisions of any statute, order, rule, or regulation would in any way prevent, hinder, or delay necessary action in coping with this emergency.

NOW, THEREFORE, I, GINA M. RAIMONDO, by virtue of the authority vested in me as Governor of the State of Rhode Island and Providence Plantations, pursuant to Article IX of the Rhode Island Constitution and the Rhode Island General Laws, including, but not limited to, Title 30, Chapter 15, do hereby order and direct the following:

- 1. A state of emergency is declared for the State of Rhode Island due to the dangers to health and life posed by COVID-19 and the state disaster emergency plan is activated.
- 2. The Rhode Island Emergency Management Agency (RIEMA) is directed to stand up the state emergency operations center and to activate all other necessary state emergency response plans, policies, compacts and agreements, to create and establish mobile support units, and to activate and deploy disaster response teams and disaster response workers to perform disaster response services.
- 3. The Adjutant General is authorized to order Rhode Island National Guard members to state active duty, if necessary, to assist in the response to this event.
- 4. All state departments, agencies or quasi-state agencies and boards and commissions performing executive functions shall cooperate fully with RIEMA in all matters concerning this Order. Efforts to provide emergency disaster relief to affected cities and towns should be coordinated by and through RIEMA.
- 5. All state offices and operations shall remain open until further notice and continue to operate in their ordinary course of business.
 - 6. As of the date of this order, no person, firm or corporation shall increase the price of personal protective equipment, including masks and gloves, hand sanitizer, soap, bleach or other household disinfectant it sells or offers for sale at retail. Pursuant to section 6-13-21 of the Rhode Island General Laws, it shall be an unfair sales practice for individuals or retailers to participate in price gouging for any other essential commodity during the pendency of this emergency.

Executive Order 20-02 March 9, 2020 Page 3

7. Pursuant to the emergency powers granted by the Rhode Island General Laws, and any other applicable provisions of state or federal law, I shall from time to time issue additional recommendations, directions and orders as circumstances require, either written or verbal.

This Order shall take effect immediately and remain in full force and effect until April 8, 2020, unless renewed, modified or terminated by subsequent Executive Order.

So Ordered:

Gina M.'Raimondo Governor

EXHIBIT 3



2020

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State of Rhode Island and Providence Plantations

Gina M. Raimondo Governor

EXECUTIVE ORDER

20-18

April 08, 2020

FIFTEENTH SUPPLEMENTAL EMERGENCY DECLARATION – EXTENSION OF DECLARATION OF DISASTER EMERGENCY

WHEREAS, on March 9, 2020, I declared a state of emergency due to the dangers to health and life posed by COVID-19;

WHEREAS, aggressive and sustained efforts are necessary to slow the spread of the COVID-19 virus and to lessen the strain on our healthcare system; and

WHEREAS, the COVID-19 virus continues to spread and threatens to overwhelm the State's ability to respond.

NOW, THEREFORE, I, GINA M. RAIMONDO, by virtue of the authority vested in me as Governor of the State of Rhode Island and Providence Plantations, pursuant to Article IX of the Rhode Island Constitution and the Rhode Island General Laws, including, but not limited to, Title 30, Chapter 15, do hereby extend the following Executive Order:

1. Executive Order 20-02 (Declaration of Disaster Emergency).

This Executive Order shall remain in full force and effect until May 8, 2020 unless renewed, modified or terminated by subsequent Executive Order.

So Ordered. Gina M. Raimondo



Goats and Soda

THE CORONAVIRUS CRISIS

Coronavirus: COVID-19 Is Now Officially A Pandemic, WHO Says

March 11, 2020 · 12:30 PM ET

BILL CHAPPELL



The World Health Organization called the COVID-19 viral disease a pandemic Wednesday. Here, workers in Spain place a medical mask on a figure that was to be part of the Fallas festival in Valencia. The festival has been canceled over the coronavirus outbreak.

Alberto Saiz/AP

Updated at 3:20 p.m. ET

The COVID-19 viral disease that has swept into at least 114 countries and killed more than 4,000 people is now officially a pandemic, the World Health Organization announced Wednesday.

"This is the first pandemic caused by a coronavirus," WHO Director-General Tedros Adhanom Ghebreyesus said at a briefing in Geneva.

It's the first time the WHO has called an outbreak a pandemic since the H1N1 "swine flu" in 2009.

Even as he raised the health emergency to its highest level, Tedros said hope remains that COVID-19 can be curtailed. And he urged countries to take action now to stop the disease.

"WHO has been in full response mode since we were notified of the first cases," Tedros said. "And we have called every day for countries to take urgent and aggressive action. We have rung the alarm bell loud and clear."



8,874 12:16 PM - Mar 11, 2020

9,021 people are talking about this

Eight countries — including the U.S. — are now each reporting more than 1,000 cases of COVID-19, caused by the coronavirus that has infected nearly 120,000 people worldwide.

"In the past two weeks, the number of cases of COVID-19 outside China has increased 13-fold, and the number of affected countries has tripled," Tedros said.

"In the days and weeks ahead, we expect to see the number of cases, the number of deaths and the number of affected countries climb even higher."

The WHO is "deeply concerned, both by the alarming levels of spread and severity and by the alarming levels of inaction" by world leaders in response to the outbreak, Tedros said.

"We have therefore made the assessment that COVID-19 can be characterized as a pandemic," he said.



SHOTS - HEALTH NEWS You Have A Fever And A Dry Cough. Now What?



SHOTS - HEALTH NEWS Coronavirus: 1,000 Cases Now In U.S. And 'It's Going To Get Worse,' Fauci Says

By dubbing COVID-19 a pandemic, the WHO is placing it in a different category than several recent deadly outbreaks, including the recent Ebola outbreak in the Democratic Republic of Congo, the Zika virus outbreak in 2016 and the 2014 Ebola outbreak in West Africa. All three of those outbreaks were deemed to be international emergencies. In the last pandemic, the H1N1 influenza virus killed more than 18,000 people in more than 214 countries and territories, according to the WHO. In recent years, other estimates have put H1N1's toll even higher.

Still, Tedros said that people should not fear the designation and that it should not be taken to mean that the fight against the virus is over.

"Describing the situation as a pandemic does not change WHO's assessment of the threat posed by the virus," Tedros said. "It doesn't change what WHO is doing. And it doesn't change what countries should do."

The WHO had declared the outbreak a global health emergency in January, as cases surged in China, where the novel coronavirus was first detected.

In Italy, more than 630 people have died of COVID-19, and the total number of cases continues to rise sharply. The country now has 10,000 cases, second only to China. There are 9,000 cases in Iran and more than 7,700 in South Korea.

Those four nations are all imposing drastic measures in an attempt to slow the spread of the COVID-19 illness, which has a higher fatality rate for elderly people and those with underlying health conditions.

Those countries also have more than 90% of current cases, Tedros noted, adding that both China and South Korea have had success in reining in their epidemics. Data from China, he said, showed that the number of new cases there peaked in late January and early February.

"We cannot say this loudly enough, or clearly enough, or often enough: All countries can still change the course of this pandemic," Tedros said.

However, the viral disease continues to spread around the globe.

"In the Americas, Honduras, Jamaica and Panama, are all confirming coronavirus infections for the first time," NPR's Jason Beaubien reports. "Elsewhere, Mongolia and Cyprus are also now reporting cases." As the outbreak has ballooned, so has speculation that the WHO would characterize it as a pandemic. But Tedros said WHO experts had previously determined that the scale of the coronavirus' impact didn't warrant that description. And he noted that calling the outbreak a pandemic would raise the risk of a public panic.



SHOTS - HEALTH NEWS

No Guarantee You'll Get Tested For COVID-19, Even If Your Doctor Requests It

It's now up to other countries to prove they can stop the disease, Tedros reiterated.

"The challenge for many countries who are now dealing with large clusters or community transmission is not whether they can do the same," he said. "It's whether they will."

"People, we're in this together — to do the right things with calm and protect the citizens of the world," Tedros said as he concluded his remarks.

"It's doable."

Coronavirus symptoms and prevention

To prevent the coronavirus from spreading, the Centers for Disease Control and Prevention recommends washing hands with soap and water for at least 20 seconds or using a hand sanitizer if a sink isn't available. The World Health Organization says people should wear face masks only if they're sick or caring for someone who is.

"For most people, COVID-19 infection will cause mild illness; however, it can make some people very ill and, in some people, it can be fatal," the WHO says. "Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease."

The most common symptoms of COVID-19, according to a recent WHO report that draws on more than 70,000 cases in China, are the following: fever (in 88% of cases), dry cough (68%), fatigue (38%) and sputum/phlegm production (33%).

Shortness of breath occurred in nearly 20% of cases, and about 13% had a sore throat or headache, the WHO said.

covid-19 coronavirus world health organization

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EXHIBIT 5



PROCLAMATIONS

Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak

Issued on: March 13, 2020

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In December 2019, a novel (new) coronavirus known as SARS-CoV-2 ("the virus") was first detected in Wuhan, Hubei Province, People's Republic of China, causing outbreaks of the coronavirus disease COVID-19 that has now spread globally. The Secretary of Health and Human Services (HHS) declared a public health emergency on January 31, 2020, under section 319 of the Public Health Service Act (42 U.S.C. 247d), in response to COVID-19. I have taken sweeping action to control the spread of the virus in the United States, including by suspending entry of foreign nationals seeking entry who had been physically present within the prior 14 days in certain jurisdictions where COVID-19 outbreaks have occurred, including the People's Republic of China, the Islamic Republic of Iran, and the Schengen Area of Europe. The Federal Government, along with State and local governments, has taken preventive and proactive measures to slow the spread of the virus and treat those affected, including by instituting Federal quarantines for individuals evacuated from foreign nations, issuing a declaration pursuant to section 319F-3 of the Public Health Service Act (42 U.S.C. 247d-6d), and releasing policies to accelerate the acquisition of personal protective equipment and streamline bringing new diagnostic capabilities to laboratories. On March 11, 2020, the World Health Organization announced that the COVID-19 outbreak can be characterized as a pandemic, as the rates of infection continue to rise in many locations around the world and across the United States.

The spread of COVID-19 within our Nation's communities threatens to strain our Nation's healthcare systems. As of March 12, 2020, 1,645 people from 47 States have been infected with the virus that

causes COVID-19. It is incumbent on hospitals and medical facilities throughout the country to assess their preparedness posture and be prepared to surge capacity and capability. Additional measures, however, are needed to successfully contain and combat the virus in the United States.

NOW, THEREFORE, I, DONALD J. TRUMP, President of the United States, by the authority vested in me by the Constitution and the laws of the United States of America, including sections 201 and 301 of the National Emergencies Act (50 U.S.C. 1601 *et seq.*) and consistent with section 1135 of the Social Security Act (SSA), as amended (42 U.S.C. 1320b-5), do hereby find and proclaim that the COVID-19 outbreak in the United States constitutes a national emergency, beginning March 1, 2020. Pursuant to this declaration, I direct as follows:

<u>Section 1</u>. <u>Emergency Authority</u>. The Secretary of HHS may exercise the authority under section 1135 of the SSA to temporarily waive or modify certain requirements of the Medicare, Medicaid, and State Children's Health Insurance programs and of the Health Insurance Portability and Accountability Act Privacy Rule throughout the duration of the public health emergency declared in response to the COVID-19 outbreak.

<u>Sec</u>. <u>2</u>. <u>Certification and Notice</u>. In exercising this authority, the Secretary of HHS shall provide certification and advance written notice to the Congress as required by section 1135(d) of the SSA (42 U.S.C. 1320b-5(d)).

<u>Sec</u>. <u>3</u>. <u>General Provisions</u>. (a) Nothing in this proclamation shall be construed to impair or otherwise affect:

(i) the authority granted by law to an executive department or agency, or the head thereof; or

(ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.

(b) This proclamation shall be implemented consistent with applicable law and subject to the availability of appropriations.

(c) This proclamation is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

IN WITNESS WHEREOF, I have hereunto set my hand this thirteenth day of March, in the year of our Lord two thousand twenty, and of the Independence of the United States of America the two hundred and forty-fourth.

DONALD J. TRUMP





State of Rhode Island and Providence Plantations

Gina M. Raimondo Governor

EXECUTIVE ORDER

20-14

March 28, 2020

<u>AMENDED ELEVENTH SUPPLEMENTAL EMERGENCY DECLARATION –</u> <u>STAYING AT HOME, REDUCING GATHERINGS, CERTAIN RETAIL BUSINESS CLOSURES</u> <u>AND FURTHER QUARANTINE PROVISIONS</u>

WHEREAS, on March 9, 2020, I declared a state of emergency due to the dangers to health and life posed by COVID-19;

WHEREAS, aggressive and sustained efforts are necessary to slow the spread of the COVID-19 virus and to lessen the strain on our healthcare system;

WHEREAS, the COVID-19 virus continues to spread and threatens to overwhelm the State's ability to respond;

WHEREAS, on March 13, 2020, I issued Executive Order 20-03 imposing quarantine restrictions on persons returning to Rhode Island from outside the 50 states or the District of Columbia;

WHEREAS, on March 23, 2020, I issued Executive Order 20-10 imposing quarantine restrictions on domestic air travelers returning to Rhode Island; and

WHEREAS, there are now numerous COVID-19 clusters or hotspots in states throughout the country.

EXHIBIT 6

March 28, 2020 Executive Order 20-14 Page 2

NOW, THEREFORE, I, GINA M. RAIMONDO, by virtue of the authority vested in me as Governor of the State of Rhode Island and Providence Plantations, pursuant to Article IX of the Rhode Island Constitution and the Rhode Island General Laws, including, but not limited to, Title 30, Chapter 15, and Title 23, Chapter 8 do hereby order and direct the following:

Staying at and Working from Home

- 1. All Rhode Island residents are required to stay home unless traveling to work, traveling for medical treatment or obtaining necessities (food, medicine, gas, etc.). Rhode Island residents may still go outside to exercise and get fresh air, however, they must practice social distancing while outside and avoid touching surfaces frequently touched by others.
- 2. Any Rhode Island employer with employees who live in other states shall use all means available to enable these employees to telecommute or make other work-from-home arrangements. This provision shall not apply to public health, public safety, or healthcare workers.

Reducing the Size of Gatherings

3. All gatherings of more than five (5) people in any public or private space such as an auditorium, stadium, arena, large conference room, meeting hall, library, theater, place of worship, parade, fair, festival, park or beach, are prohibited.

Certain Retail Business Closures

4. Effective Monday, March 30, 2020, all non-critical retail businesses shall cease in-person operations. Critical retail businesses include, but are not limited to, food and beverage stores (e.g., supermarkets, liquor, specialty food, and convenience stores, farmers' markets, food banks and pantries), pharmacies and medical supply stores, compassion centers, pet supply stores, printing shops, mail and delivery stores and operations, gas stations, laundromats, electronics and telecommunications stores, office supply, industrial and agricultural/seafood equipment and supply stores, hardware stores, funeral homes, auto repair and supply, banks and credit unions, firearms stores, healthcare and public safety professional uniform stores, and other stores and businesses identified as critical by the Department of Business Regulation. Restaurants will be permitted to operate only for pickup, drive-through, and delivery in accordance with previous executive orders.

March 28, 2020 Executive Order 20-14 Page 3

Quarantine for All Travelers

- 5. Any person coming to Rhode Island from another state for a non-work-related purpose must immediately self-quarantine for 14 days. This quarantine restriction shall not apply to public health, public safety, or healthcare workers. Executive Order 20-12 entitled "Tenth Supplemental Emergency Declaration Quarantine Restrictions on Travelers from New York State" is hereby repealed in its entirety.
- 6. Any person who lives in Rhode Island and works in another state who can work from home is required to do so. To the extent such a person cannot perform his or her functions via telework or other work from home arrangements, that person shall self-quarantine when not at work. This quarantine restriction shall not apply to public health, public safety, or healthcare workers.
- 7. Instructions for self-quarantine can be found at the Rhode Island Department of Health website: <u>https://health.ri.gov/diseases/ncov2019/</u>

This Order shall take effect immediately and shall remain in full force and effect until April 13, 2020 unless renewed, modified, or terminated by subsequent Executive Order.

So Ordered,

and.

Gina M. Raimondo

GoLocalProv | Raimondo Extends Dining, Social Distancing Executive Orders Until May... Page 1 of 6 EXHIBIT 7



Raimondo Extends Dining, Social Distancing Executive Orders Until May 8 - Some Orders Indefinitely



Rhode Island Governor Gina Raimondo announced on Tuesday three additional

coronavirus deaths in the state for a total of 30 COVID-19 related fatalities.

According to Raimondo, Rhode Island had 147 new COVID-19 cases since Monday for a total of 1229, with 123 in the hospital.

"I want to begin today with another very serious reminder that at this point in the crisis, everyone has to be keeping a journal of your contacts," said Raimondo.

"We're getting to the point that we won't allow for testing unless you show up with your contract tracing notebook," said Raimondo, who said the state was "not at that point" at this time.

"Let's be honest, this is getting old, and it's getting hard to remember to wash our hands constantly, not touch our faces, use a face covering, wipe down surfaces, cough into your elbow. Simple stuff, but we have to be vigilant," said Raimondo. "Nobody should be going to work if you're sick. I



Governor Raimondo announced 3 more COVID-19 deaths on Tuesday in Rhode Island -- and more.

don't care who you are, how essential you are -- it's not OK to put on a mask and go to work sick."

Extending Executive Orders

On Tuesday, Raimondo said that she is extending several executive orders until May 8 -- and some, indefinitely.

"I realize it's been confusing, and I've changed regulations," said Raimondo, who said she wanted to provide "clarity around extensions."

According to Raimondo, all social gatherings of more than 5 people will continue to be prohibited -- as well as dine-in service at restaurants -- until May 8.

The order closing recreation and entertainment facilities will be extended, as well as the requirement that anyone returning to Rhode Island from domestic or international travel must self-quarantine for 14 days — by any means of transportation, and the order extending the maximum gun-buying background check wait period from 7 to 30 days.

Raimondo said the orders that will be extended "indefinitely" include the Rhode Island State House being closed to visitors; nursing homes, the ACI, and assisted living facilities being closed to visitors; and state parks and beaches being closed.

State government agencies — DHS, HHS, HSRI -- will operate remotely indefinitely, and the DMV will remain open by appointment only, with driving tests suspended indefinitely.

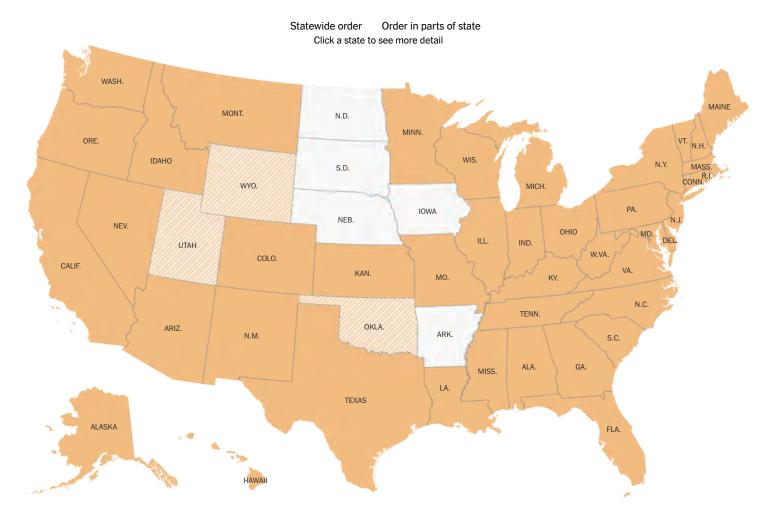
Raimondo said that she will have an announcement about schools and child care centers in the coming weeks.

The Coronavirus Outbreak

See Which States and Cities Have Told Residents to Stay at Home

By Sarah Mervosh, Denise Lu and Vanessa Swales Updated April 7, 2020

Markets



In a matter of weeks, millions of Americans have been asked to do what would have been unthinkable only a few months ago: Don't go to work, don't go to school, don't leave the house at all, unless you have to.

The directives to keep people at home, which began in California in mid-March, have quickly swept the nation. Today, a vast majority of states, the Navajo Nation and many cities and counties have instructed residents to stay at home in a desperate race to stunt the spread of the coronavirus.

This means at least **316 million people** in at least **42 states**, **three counties**, **nine cities**, **the District of Columbia** and **Puerto Rico** are being urged to stay home.

See how the directives spread across the country:



Source: Times research, local governments and news reports.

Under a mass of state and local directives that use a variety of definitions, like "shelter in place" or "safer at home," people can generally still leave their homes for necessities — to go to the grocery store, to go to the doctor and to get fresh air.

Still, the changes so fundamentally alter life and the economy that some states have resisted increasingly urgent calls to shut down.

A handful of more rural states — Arkansas, Iowa, Nebraska, North Dakota, and South Dakota — did not have statewide stay-at-home orders in place as of Tuesday. A few others had only partial orders, issued locally by cities or counties.

Still, the number of Americans under instructions to stay at home has steadily surged upwards in recent weeks, now accounting for a stunning 95 percent of the population.

Here is a guide to how the orders affect each state in the list below.

Choose a state

Alabama About 4.9 million people

Gov. Kay lvey had resisted a statewide order, saying that she wanted to balance the health of the state's residents with the health of the economy. "We are not California," she said on a conference call with reporters, according to AL.com. But after Birmingham, the largest city in the state, issued a shelter-in-place order for its residents, and amid growing pressure, the governor issued a statewide order. "You need to understand we are past urging people to stay at home," she said. "It is now the law."

Stay at home, effective April 4 at 5 p.m. Read local coverage

Alaska About 737,000 people

"We crossed a line today," Gov. Mike Dunleavy said, issuing instructions for people to stay home or remain six feet or more from one another when outside. The mayor of Anchorage had previously asked residents to "hunker down."

Stay at home, effective March 28 at 5 p.m. See announcement | Read local coverage

Arizona About 7.2 million people

Gov. Doug Ducey said he issued the order at the recommendation of health officials. "I'm grateful to everyone making adjustments to fight this virus and protect others," he said. "We need to keep these efforts up."

Stay at home, effective March 31 at 5 p.m. See announcement | Read local coverage

California About 39.6 million people

California, America's most populous state, was the first to order all residents to stay home. Others quickly followed suit. "This is not a permanent state, this is a moment in time," Gov. Gavin Newsom said. "We will look back at these decisions as pivotal."

Stay at home, effective March 19 See announcement | Read local coverage

Colorado About 5.7 million people

A number of counties and cities in the state, including Denver and Boulder, had issued their own stay-at-home orders, but Gov. Jared Polis also issued a statewide order, reiterating the need for everyone to stay at home. "We owe it to ourselves and our fellow Americans in order to save lives," he said.

Stay at home, effective March 26 at 6 a.m. See announcement | Read local coverage

Connecticut About 3.6 million people

"At this critical time it is essential that everyone just stay home," Gov. Ned Lamont said.

Stay at home, effective March 23 at 8 p.m. See announcement | Read local coverage

Delaware About 973,000 people

"I don't want Delaware to be the example of what not to do in response to this crisis," Gov. John Carney said.

Shelter in place, effective March 24 at 8 a.m. See announcement | Read local coverage

District of Columbia About 702,000 people

Mayor Muriel E. Bowser issued a stay-at-home order for all residents, joining the nearby states of Maryland and Virginia in a move that virtually shut down the nation's capital region. "Many people want to know how they can help right now," the mayor said. "For most people this is how — by staying home."

Stay at home, effective April 1 at 12:01 a.m. See announcement | Read local coverage

Florida About 21.5 million people

Gov. Ron DeSantis, who for weeks resisted more stringent statewide measures even as cities and counties took action, announced that he would order the state's more than 21 million residents to largely stay at home. The governor said he started coming around to the necessity of a statewide order once the White House extended national guidelines to combat the coronavirus until April 30. "To me, that was, 'People aren't just going to back to work,'" Mr. DeSantis said at a news conference in Tallahassee, the state capital. "That's a national pause button."

Stay at home, effective April 3 at 12:01 a.m. Read local coverage

Georgia About 10.6 million people

Gov. Brian Kemp announced that he would issue a statewide order for all residents to shelter in place, following a similar stay-at-home order in Atlanta and other areas. He said he made the decision, in part, after learning that many people without symptoms are transmitting the virus. "At this point," he said, "I think it's the right thing to do."

Shelter in place, effective April 3 Read local coverage

Hawaii About 1.4 million people

As in other states, there are exceptions to the stay-at-home order in Hawaii, including leaving the house to go surfing and swimming. But the governor's office said violations could be punishable by a fine of up to \$5,000, or as much as one year in jail. "The threat of COVID-19 is unprecedented and requires aggressive action," Gov. David Ige said.

Stay at home, effective March 25 at 12:01 a.m. See announcement | Read local coverage

Idaho About 1.8 million people

"Our health care and public safety workers are putting themselves in harm's way to respond to the coronavirus emergency, and we owe it to them to do our part by following this statewide stay-home order," Gov. Brad Little said.

Stay at home, effective March 25 at 1:30 p.m. See announcement | Read local coverage

Illinois About 12.7 million people

"I don't come to this decision easily," Gov. J.B. Pritzker said. "I fully recognize that, in some cases, I am choosing between people's lives and saving people's livelihood. But ultimately, you can't have a livelihood if you don't have your life."

Stay at home, effective March 21 at 5 p.m. See announcement | Read local coverage

Indiana About 6.7 million people

Gov. Eric J. Holcomb asked "Hoosiers to hunker down." He added: "You must be part of the solution, not the problem."

Stay at home, effective March 24 at 11:59 p.m. See announcement | Read local coverage

Kansas About 2.9 million people

After several municipalities in Kansas issued stay-at-home instructions in quick succession, including in the greater Kansas City region, Gov. Laura Kelly issued a statewide order. "While I left these decisions to local health departments as long as possible," she said, "the reality is that the patchwork approach that has developed is inconsistent and is a recipe for chaos."

Stay at home, effective March 30 at 12:01 a.m. See announcement | Read local coverage

Kentucky About 4.5 million people

Gov. Andy Beshear ordered all non-essential businesses to stop operating in-person services by March 26 and urged residents to stay "healthy at home." In a news conference on March 27, he clarified that the state's campaign amounted to telling residents to stay home. "That doesn't mean you need to cower down in your home," he said. But "you stay at home, unless you are getting groceries or other supplies that you may need."

Healthy at home, effective March 26 at 8 p.m. See announcement | Read local coverage

Louisiana About 4.6 million people

"If we want to flatten the curve, we have to take action today," Gov. John Bel Edwards said. New Orleans had previously issued its own order.

Stay at home, effective March 23 at 5 p.m. See announcement | Read local coverage

Maine About 1.3 million people

"We are in the midst of one of the greatest public health crises this world has seen in more than a century," Gov. Janet Mills said. "This virus will continue to sicken people across our state; our cases will only grow, and more people will die. I say this to be direct, to be as honest with you as I can. Because saving lives will depend on us."

Stay at home, effective April 2 at 12:01 a.m. See announcement | Read local coverage

Maryland About 6 million people

Citing a drastic uptick in cases and deaths in Maryland and the United States, Gov. Larry Hogan issued a statewide stay-at-home order. "We are no longer asking or suggesting that Marylanders stay home," he said. "We are directing them to do so."

Stay at home, effective March 30 at 8 p.m. See announcement | Read local coverage

Massachusetts About 6.9 million people

Gov. Charlie Baker stopped short of declaring a formal order, but announced an advisory for residents to stay home. "I do not believe I can or should order U.S. citizens to be confined to their home for days on end," he said. "It doesn't make sense from a public health point of view, and it's not realistic."

Stay at home advisory, effective March 24 at 12 p.m. See announcement | Read local coverage

Michigan About 10 million people

"Without a comprehensive national strategy, we, the states, must take action," Gov. Gretchen Whitmer said, urging residents to stay home.

Stay at home, effective March 24 at 12:01 a.m. See announcement | Read local coverage

Minnesota About 5.6 million people

Gov. Tim Walz emphasized the need to slow the spread of the virus over time and not overwhelm hospitals in Minnesota. "We are asking you — because it is going to take cooperation and collaboration — stay home," he said.

Stay at home, effective March 27 at 11:59 p.m. See announcement | Read local coverage

Mississippi About 3 million people

Gov. Tate Reeves announced a shelter-in-place order and asked all residents to take enforcement seriously. "If you will self-enforce this, it will go a long way to slowing the spread," he said.

Shelter in place, effective April 3 at 5 p.m. See announcement | Read local coverage

Missouri About 6.1 million people

Residents in the Kansas City, St. Louis and St. Louis County areas were among those under instructions to stay at home before Gov. Mike Parson issued a statewide order. The governor had previously rejected the step, but issued the order to "stay ahead of the battle."

Stay at home, effective April 6 at 12:01 a.m. See announcement | Read local coverage

Montana About 1.1 million people

"We cannot rebuild our economic strength without doing everything we can now to flatten the curve and slow the spread of this virus," Gov. Steve Bullock said.

Stay at home, effective March 28 at 12:01 a.m. See announcement | Read local coverage

Nevada About 3.1 million people

Gov. Steve Sisolak had shut down all nonessential businesses and encouraged residents to stay home for weeks before issuing a formal order, codifying a message he had been trying to send for weeks: "STAY HOME for our State," he said on Twitter.

Stay at home, effective April 1 See announcement | Read local coverage

New Hampshire About 1.4 million people

Gov. Chris Sununu had earlier described a stay-at-home order as not a "practical ask" of residents, but later put one in place. "We can't stress this enough — you should stay at your house unless absolutely necessary," he said.

Stay at home, effective March 27 at 11:59 p.m. See announcement | Read local coverage

New Jersey About 8.9 million people

"We know the virus spreads through person-to-person contact, and the best way to prevent further exposure is to limit our public interactions," Gov. Phil Murphy said.

Stay at home, effective March 21 at 9 p.m. See announcement | Read local coverage

New Mexico About 2.1 million people

Addressing questions about whether she was issuing a shelter-in-place order, Gov. Michelle Lujan Grisham said that "the tantamount effect of what we're doing is basically the same." She added: "This is quite frankly an instruction to stay home."

Stay at home, effective March 24 at 8 a.m. See announcement | Read local coverage

New York About 19.5 million people

Gov. Andrew M. Cuomo has shied away from the language of a shelter-in-place order, which he said evoked images of shooter situations or nuclear war. "Words matter," the governor said, instead describing it as putting all of New York on pause. "This is the most drastic action we can take," he said.

Stay at home, effective March 22 at 8 p.m. See announcement | Read local coverage

North Carolina About 10.4 million people

A number of cities and counties in North Carolina had already ordered their residents to stay home, but Gov. Roy Cooper made it official statewide. "Even if you don't think you have to worry about yourself, consider our nurses, doctors, custodial staff & other hospital workers who will be stretched beyond their capacity if we are unable to slow the spread of this disease," he said on Twitter.

Stay at home, effective March 30 at 5 p.m. See announcement | Read local coverage

Ohio About 11.7 million people

Gov. Mike DeWine has been notably aggressive in his response to the coronavirus, and Ohio was among the first wave of states to adopt this measure. "We haven't faced an enemy like we are facing today in 102 years," he said. "We are at war."

Stay at home, effective March 23 at 11:59 pm. See announcement | Read local coverage

Oklahoma

Gov. Kevin Stitt has told older and vulnerable people across Oklahoma to stay home, but mayors in the state's major cities, including Oklahoma City, Tulsa and Norman, ordered all residents to do so. "We want to leave no doubt," Mayor David Holt of Oklahoma City said. "The safest course of action during this public health crisis is to stay home."

Claremore About 19,000 people Stay at home, effective April 6 at 8 a.m. See announcement | Read local coverage

Edmond About 93,000 people Shelter in place, effective March 30 at 11:59 p.m. See announcement | Read local coverage

Moore About 62,000 people Shelter in place, effective April 4 at 11:59 p.m. See announcement | Read local coverage

Norman About 123,000 people Stay at home, effective March 25 at 11:59 p.m. See announcement | Read local coverage

Oklahoma City About 649,000 people Shelter in place, effective March 28 at 11:59 p.m. See announcement | Read local coverage

Sallisaw About 9,000 people Shelter in place, effective April 4 at 11:59 p.m. See announcement | Read local coverage

Stillwater About 50,000 people Shelter in place, effective March 30 at 11:59 p.m. See announcement | Read local coverage

Tulsa About 401,000 people Shelter in place, effective March 28 at 11:59 p.m. See announcement | Read local coverage

Oregon About 4.2 million people

Gov. Kate Brown took the action after seeing the state's scenic trails and beaches packed with people over the weekend. "If you're still not sure about an activity, skip it," she said. "Staying home will save lives."

Stay at home, effective March 23 See announcement | Read local coverage

Pennsylvania About 12.8 million people

Starting March 23, Gov. Tom Wolf began ordering an expanding number of counties to stay at home, including in the Philadelphia and Pittsburgh regions. On April 1, he announced he was enacting the order statewide. "We appreciate the shared sacrifice of all 12.8 million Pennsylvanians," he said. "We are in this together."

Stay at home, effective April 1 at 8 p.m. See announcement | Read local coverage

Puerto Rico About 3.2 million people

Gov. Wanda Vázquez issued an order imposing a nightly curfew and allowing people to leave their homes during the day only to buy groceries or medicine, go to the bank, attend medical appointments, tend to caregiving responsibilities or work in businesses deemed essential. "All citizens will have to stay home to stop the spread of this virus," she said.

Curfew, effective March 15 at 6 p.m. See announcement | Read local coverage

Rhode Island About 1.1 million people

Gov. Gina Raimondo issued a stay-at-home order in a state that has gone to great lengths to protect itself from outsiders, especially people fleeing New York City. She said a surge in cases was inevitable. "This is going to get very real very fast for all of us," she said.

Stay at home, effective March 28 See announcement | Read local coverage

South Carolina About 5.1 million people

Charleston and Columbia had previously ordered residents in those cities to stay at home before Gov. Henry McMaster issued a statewide "home or work order," which requires all South Carolinians to limit movement outside their home or place of work except for essential activities. South Carolina became the last state on the East Coast to issue such an order.

Tennessee About 6.8 million people

Residents in the Nashville and Memphis areas were already under instructions to stay at home as much as possible when Gov. Bill Lee issued statewide guidelines urging everyone to do so. "We need you to do that to protect the lives of your neighbors," he said.

Stay at home, effective March 31 at 11:59 p.m. See announcement | Read local coverage

Texas About 29 million people

For weeks, Gov. Greg Abbott left it to local officials to impose the most restrictive orders. Millions of people in certain cities and counties were told to stay home, including in Harris County, which includes Houston; Dallas and Tarrant Counties in the Dallas-Fort Worth region; and Bexar County, which includes San Antonio. On March 31, Mr. Abbott tightened guidelines, but said that "this is not a stay-at-home strategy." The next day, he released a video message to Texans, saying he had ordered "all Texans to stay at home, except to provide essential services or do essential things like going to the grocery store." A spokesman for Mr. Abbott later confirmed that Texas was under a statewide stay-athome mandate.

Stay at home, effective April 2 at 12:01 a.m. See announcement | Read local coverage

Utah

Summit County, a popular area for skiing and tourism, became the first in Utah to issue such a restriction, The Salt Lake Tribune reported. Salt Lake County also issued a similar order. "The goals are to save lives and stop our hospital system from being overrun," Mayor Jenny Wilson of Salt Lake County said.

Davis County About 352,000 people Stay at home, effective April 1 at 11:59 p.m. See announcement | Read local coverage

Salt Lake County About 1.2 million people Stay at home, effective March 30 at 12:01 a.m. See announcement | Read local coverage

Summit County About 42,000 people Stay at home, effective March 27 at 12:01 a.m. See announcement | Read local coverage

Vermont About 626,000 people

"I need all Vermonters to understand that the more quickly and closely we follow these stay-at-home measures, the faster and safer we can get through this and get our daily lives, and our economy, moving again," Gov. Phil Scott said.

Virginia About 8.5 million people

Gov. Ralph Northam, who shut down schools and nonessential businesses and banned gatherings of more than 10 people, had said that issuing a stay-at-home order was a matter of semantics. But after seeing beaches and other public areas packed with people, he issued a formal order. "It is clear more people still need to hear this basic message: Stay home."

Stay at home, effective March 30 See announcement | Read local coverage

Washington About 7.5 million people

Gov. Jay Inslee tried begging people to stay at home in Washington State, which has among the worst outbreaks of the virus in the country. Then he made it mandatory. "The fastest way to get back to normal is to hit this hard," he said.

Stay at home, effective March 23 See announcement | Read local coverage

West Virginia About 1.8 million people

West Virginia was the last state to have a confirmed case of the virus, but Gov. Jim Justice quickly joined a chorus of other governors calling on residents to stay inside. "A stay-at-home order is not martial law," he said, reminding residents that they could still leave their homes for food and outdoor activity. But he warned: "The magnitude of this is unbelievable."

Stay at home, effective March 24 at 8 p.m. See announcement | Read local coverage

Wisconsin About 5.8 million people

Gov. Tony Evers initially thought he would not have to issue such an order, but later changed his mind. "You can still get out and walk the dogs — it's good exercise and it's good for everyone's mental health — but please don't take any other unnecessary trips," he said. "Limit your travel to essential needs like going to the doctor, grabbing groceries or getting medication."

Stay at home, effective March 25 at 8 a.m. See announcement | Read local coverage

Wyoming

Jackson, a popular tourist destination for skiers in the Jackson Hole valley, was the first town in the state to issue a stay-at-home order, according to the Casper Star-Tribune.

Jackson About 10,000 people Stay at home, effective March 28 Note: All times are local. Sources: State and local governments, local news reports, Census Bureau

Vanessa Swales, Patricia Mazzei and Mike Baker contributed reporting.

Correction: March 31, 2020

A label on some maps in an earlier version of this article incorrectly included a U.S. territory in the total number of statewide orders. While Puerto Rico did have a stay-at-home order in place, it is a territory, not a state.

The Washington Post

Democracy Dies in Darkness

Politics	Primary results	White House	Congress	Polling	The Trailer	Fact Checker

Nearly all Americans are under stay-at-home orders. Some may have come too late. ^{By Philip Bump}

April 2, 2020 at 3:49 p.m. EDT

When six counties in the San Francisco Bay area went under a mandatory stay-athome order on March 16, it seemed like an exceptional development in the effort to slow the spread of the <u>coronavirus</u> that arrived in the United States in January. At that point, there were fewer than 5,000 confirmed cases nationally, about 400 of which were in California.

Since then, of course, such orders have become commonplace. As of March 27, less than two weeks after the Bay Area's order, more than half the country's population was under a stay-at-home order at the statewide level. By the end of this weekend, nearly 9 in 10 Americans will be. Include localized orders, as in multiple places in Missouri, and the number tops 90 percent.

The goal of these orders is to limit the extent to which people interact with one another and, hopefully, to therefore limit the spread of the coronavirus that has now infected more than 200,000 Americans. Just because an order is in place, though, does not mean it came early enough to have the desired effect.

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Our current understanding of the virus is that it manifests within two weeks of infection. The idea of isolation efforts is to keep people separated for at least that long to contain and identify where it has spread. Within two weeks of a stay-at-home order, then, assuming that it is adhered to rigidly and that testing is robust, one would expect to see a slowdown in the number of confirmed coronavirus infections.

Both of those assumptions, though, are shaky in practice. The number of tests being conducted each day in the United States has stalled at about 100,000, limiting the ability to conduct robust testing. The orders themselves have been enforced unevenly.

Consider the state of New York. It has had a statewide order in place since March 22, but the number of confirmed cases has continued to rise. By now, there are more than 400 confirmed cases for every 100,000 people in the state — the highest ratio in the country and unquestionably an undercount of the actual total.

There have been a number of states with stay-at-home orders in place where the number of cases has grown relatively slowly. California is the poster child of a successful effort to slow the spread of the virus. When it implemented its statewide order only a few days after the Bay Area was locked down, there were about three infections for every 100,000 people in the state. Since then, the number has increased, but only to about 24 infections per 100,000 people.

Illinois has not done quite as well, climbing from six infections per 100,000 residents to 55, but the state has still seen a relatively slow increase in new cases.

A number of other states with statewide stay-at-home orders have seen much faster growth. You will notice we removed New York from these graphs because its growth has been so rapid. New Jersey is on a similar trajectory; it has already grown past the upper bound of the graph. Other large states like Massachusetts and Michigan are also seeing infection rates continue to climb quickly.

Washington, the site of the first reported case in the country, is something of an anomaly. It was relatively late to issuing a statewide stay-at-home order, but other localized efforts had been successful at limiting the number of new infections.

More worrisome are states and regions which only recently enacted stay-at-home orders. Many already have much higher rates of infection relative to population, like Florida's 32 cases per 100,000 residents. Most worrisome is Washington, D.C., where the stay-at-home order went into effect as the number of confirmed cases was at 83 per 100,000 residents — higher than the 81 per 100,000 when New York's order went into place.

Stay-at-home orders are only one component of the effort to slow the spread of the virus, and the effectiveness of the orders depends on how they are implemented and their scale. (In Florida, Gov. Ron DeSantis (R) has <u>mandated</u> that the statewide order take precedence over local orders, meaning local areas cannot have stricter policies than the state itself.) Other factors, like population density, also play an important role. The states which have not yet implemented stay-at-home orders are mostly heavily rural.

The extent to which these policies worked will be measured by a very grim metric: the number of people whose deaths are related to the virus or as a result of hospital capacity being overwhelmed by patients infected with the virus. We should all hope states will rapidly shift toward the path California is on. One might fear instead that states will look more like New York.

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Quarantine and Isolation

Legal Authorities for Isolation and Quarantine

Federal isolation and quarantine are authorized for these communicable diseases

- Cholera
- Diphtheria
- Infectious tuberculosis
- Plague
- Smallpox
- Yellow fever
- Viral hemorrhagic fevers
- Severe acute respiratory syndromes
- Flu that can cause a pandemic

Federal isolation and quarantine are authorized by Executive Order of the President. The President can revise this list by Executive Order.

Isolation and Quarantine

Isolation and quarantine help protect the public by preventing exposure to people who have or may have a contagious disease.

- Isolation separates sick people with a quarantinable communicable disease from people who are not sick.
- Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

In addition to serving as medical functions, isolation and quarantine also are "police power" functions, derived from the right of the state to take action affecting individuals for the benefit of society.

Federal Law

The federal government derives its authority for isolation and quarantine from the Commerce Clause of the U.S. Constitution.

Under section 361 of the Public Health Service Act (42 U.S. Code § 264), the U.S. Secretary of Health and Human Services is authorized to take measures to prevent the entry and spread of communicable diseases from foreign countries into the United States and between states.

The authority for carrying out these functions on a daily basis has been delegated to the Centers for Disease Control and Prevention (CDC).

CDC's Role

Under 42 Code of Federal Regulations parts 70 and 71, CDC is authorized to detain, medically examine, and release persons arriving into the United States and traveling between states who are suspected of carrying these communicable diseases.

As part of its federal authority, CDC routinely monitors persons arriving at U.S. land border crossings and passengers and crew arriving at U.S. ports of entry for signs or symptoms of communicable diseases.

When alerted about an ill passenger or crew member by the pilot of a plane or captain of a ship, CDC may detain passengers and crew as necessary to investigate whether the cause of the illness on board is a communicable disease.

State, Local, and Tribal Law

States have police power functions to protect the health, safety, and welfare of persons within their borders. To control the spread of disease within their borders, states have laws to enforce the use of isolation and quarantine.

These laws can vary from state to state and can be specific or broad. In some states, local health authorities implement state law. In most states, breaking a quarantine order is a criminal misdemeanor.

Tribes also have police power authority to take actions that promote the health, safety, and welfare of their own tribal members. Tribal health authorities may enforce their own isolation and quarantine laws within tribal lands, if such laws exist.

Who Is in Charge

The federal government

- Acts to prevent the entry of communicable diseases into the United States. Quarantine and isolation may be used at U.S. ports of entry.
- Is authorized to take measures to prevent the spread of communicable diseases between states.
- May accept state and local assistance in enforcing federal quarantine.
- May assist state and local authorities in preventing the spread of communicable diseases.

State, local, and tribal authorities

• Enforce isolation and quarantine within their borders.

It is possible for federal, state, local, and tribal health authorities to have and use all at the same time separate but coexisting legal quarantine power in certain events. In the event of a conflict, federal law is supreme.

Enforcement

If a quarantinable disease is suspected or identified, CDC may issue a federal isolation or quarantine order.

Public health authorities at the federal, state, local, and tribal levels may sometimes seek help from police or other law enforcement officers to enforce a public health order.

U.S. Customs and Border Protection and U.S. Coast Guard officers are authorized to help enforce federal quarantine orders.

Breaking a federal quarantine order is punishable by fines and imprisonment.

Federal law allows the conditional release of persons from quarantine if they comply with medical monitoring and surveillance.

In the rare event that a federal order is issued by CDC, those individuals will be provided with an order for quarantine or isolation. An example of a Quarantine Order for Novel Coronavirus (print-only) [PDF – 5 pages] is provided. This document outlines the rationale of the federal order as well as information on where the individual will be located, quarantine requirements including the length of the order, CDC's legal authority, and information outlining what the individual can expect while under federal order.

Federal Quarantine Rarely used

Large-scale isolation and quarantine was last enforced during the influenza ("Spanish Flu") pandemic in 1918–1919. In recent history, only a few public health events have prompted federal isolation or quarantine orders.

Specific Laws and Regulations Applying to Quarantine and Isolation

Visit the Specific Laws and Regulations Governing the Control of Communicable Diseases page.

Guidance for Importation of Human Remains into the United States for Interment

Visit the Guidance for Importation of Human Remains into the United States for Interment or Subsequent Cremation page. Page last reviewed: February 24, 2020



Quarantine and Isolation

History of Quarantine

The Middle Ages

The practice of quarantine, as we know it, began during the 14th century in an effort to protect coastal cities from plague epidemics. Ships arriving in Venice from infected ports were required to sit at anchor for 40 days before landing. This practice, called quarantine, was derived from the Italian words *quaranta giorni* which mean 40 days.

Early American Quarantine

When the United States was first established, little was done to prevent the importation of infectious diseases. Protection against imported diseases fell under local and state jurisdiction. Individual municipalities enacted a variety of quarantine regulations for arriving vessels.

State and local governments made sporadic attempts to impose quarantine requirements. Continued outbreaks of yellow fever finally prompted Congress to pass federal quarantine legislation in 1878. This legislation, while not conflicting with states' rights, paved the way for federal involvement in quarantine activities.



U.S. Public Health Service Officers, like those shown in this image taken circa 1912, wore uniforms while performing quarantine station duties beginning in the late 19th Century. Photo courtesy of the National Library of Medicine.

Late 19th Century

Outbreaks of cholera from passenger ships arriving from Europe prompted a reinterpretation of the law in 1892 to provide the federal government more authority in imposing quarantine requirements. The following year, Congress passed legislation that further clarified the federal role in quarantine activities. As local authorities came to realize the benefits of federal involvement, local quarantine stations were gradually turned over to the U.S. government. Additional federal facilities were built and the number of staff was increased to provide better coverage. The quarantine system was fully nationalized by 1921 when administration of the last quarantine station was transferred to the U.S. government.

Public Health Service Act

The Public Health Service Act 🗹 of 1944 clearly established the federal government's quarantine authority for the first time. The act gave the U.S. Public Health Service (PHS) responsibility for preventing the introduction, transmission, and spread of communicable diseases from foreign countries into the United States.

Reorganization and Expansion

This PHS cutter ship was used to transport quarantine inspectors to board ships flying the yellow quarantine flag. The flag was flown until quarantine and customs personnel inspected and cleared the ship to dock at the port.





This PHS cutter ship was used to transport quarantine inspectors to board ships flying the yellow quarantine flag. The flag was flown until quarantine and customs personnel inspected and cleared the ship to dock at the port.

Originally part of the Treasury Department, Quarantine and PHS, its parent organization, became part of the Federal Security Agency in 1939. In 1953, PHS and Quarantine joined the Department of Health, Education, and Welfare (HEW). Quarantine was then transferred to the agency now known as the Centers for Disease Control and Prevention (CDC) in 1967. CDC remained part of HEW until 1980 when the department was reorganized into the Department of Health and Human Services.

When CDC assumed responsibility for Quarantine, it was a large organization with 55 quarantine stations and more than 500 staff members. Quarantine stations were located at every port, international airport, and major border crossing.

From Inspection to Intervention

After evaluating the quarantine program and its role in preventing disease transmission, CDC trimmed the program in the 1970s and changed its focus from routine inspection to program management and intervention. The new focus included an enhanced surveillance system to monitor the onset of epidemics abroad and a modernized inspection process to meet the changing needs of international traffic.

By 1995, all U.S. ports of entry were covered by only seven quarantine stations. A station was added in 1996 in Atlanta, Georgia, just before the city hosted the 1996 Summer Olympic Games. Following the severe acute respiratory syndrome (SARS) epidemic of 2003, CDC reorganized the quarantine station system, expanding to 18 stations with more than 90 field employees.

Quarantine Now

The Division of Global Migration and Quarantine is part of CDC's National Center for Emerging and Zoonotic Infectious Diseases and is headquartered in Atlanta. Quarantine stations are located in Anchorage, Atlanta, Boston, Chicago, Dallas, Detroit, El Paso, Honolulu, Houston, Los Angeles, Miami, Minneapolis, New York, Newark, Philadelphia, San Diego, San Francisco, San Juan, Seattle, and Washington, D.C. (see contact lists and map).

Under its delegated authority, the Division of Global Migration and Quarantine is empowered to detain, medically examine, or conditionally release individuals and wildlife suspected of carrying a communicable disease.



Signs like this one, for the El Paso Quarantine Station, identify the Quarantine Station facilities located in airports and at land border crossings.

The list of quarantinable diseases is contained in an Executive Order of the President 🗹 and includes cholera, diphtheria, infectious tuberculosis, plague, smallpox, yellow fever, viral hemorrhagic fevers(such as Marburg, Ebola, and Congo-Crimean), and severe acute respiratory syndromes.

Many other illnesses of public health significance, such as measles, mumps, rubella, and chicken pox, are not contained in the list of quarantinable illnesses, but continue to pose a health risk to the public. Quarantine Station personnel respond to reports of ill travelers aboard airplanes, ships, and at land border crossings to make an assessment of the public health risk and initiate an appropriate response.

EXHIBIT 12



Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™

Coronavirus Disease 2019 (COVID-19)

Information for Healthcare Professionals: COVID-19 and Underlying Conditions

Patients at higher risk for infection, severe illness, and poorer outcomes from COVID-19 should protect themselves. <u>Guidance for patients</u> includes:

- Take steps to protect yourself.
- Call your healthcare provider if you are sick with a fever, cough, or shortness of breath.
- Follow CDC travel guidelines and the recommendations of your state and local health officials.

High-Risk Conditions

COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, **older adults** and **people of any age who have serious underlying medical conditions** might be at higher risk for severe illness from COVID-19.

Based upon available information to date, those at high-risk for severe illness from COVID-19 include:

- People 65 years and older
- · People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled, including

- · People with chronic lung disease or moderate to severe asthma
- · People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
- People with severe obesity (body mass index [BMI] of 40 or higher)
- · People with diabetes
- · People with chronic kidney disease undergoing dialysis
- People with liver disease

Page last reviewed: April 6, 2020 Content source: National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases LIVE NOW / Watch Eyewitness News This Morning

WEATHER ALERTS / Wind Advisory: Barnstable, Dukes, Nantucket

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CORONAVIRUS

Data shows sharp decline in road, air travel amid COVID-19 outbreak

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Your Email



by: Gina Marini Posted: Apr 2, 2020 / 09:24 PM EDT / Updated: Apr 2, 2020 / 09:24 PM EDT

PROVIDENCE, R.I. (WPRI) — The number of people hitting the road and taking to the skies dropped dramatically last month as the coronavirus pandemic took hold.

Graphs of data compiled by Flightradar24 show a sharp decline in the number of flights during the month of March.

John Goodman, the Rhode Island Airport Corporation's director of media and public relations, said passenger volume is down at T.F. Green Airport in Warwick.

"We're probably at 80% lower than we were this time last year," he said.

For those who plan to travel, Goodman advised keeping a close eye on the schedule.

"Because of the cancellations and consolidations by the airlines, we're encouraging them to check frequently on any flight changes," he said.

WPRI.com Flight Tracker »

Goodman said T.F. Green will remain open, and there's a vital reason why.

Your Email

The airport has taken a number of steps to ensure travelers' safety during the virus outbreak, according to Goodman.

"We put into effect some enhanced cleaning protocols on all high-touch areas," he said. "Escalator railings, arms of armchairs, anywhere you would touch, we would make sure we're making it a high priority in our cleaning."

Goodman also noted that they're using products recommended by the CDC and EPA to sanitize the airport.

Area roadways have also seen a drastic change in travel volume. The R.I. Department of Transportation released the following data from three counting stations:

I-95

- Monday, March 2 132,146 vehicles
- Monday, March 30 77,350 vehicles

I-195

- Monday, March 2 92,549 vehicles
- Monday, March 30 49,352 vehicles

I-295

- Monday, March 2 58,568 vehicles
- Monday, March 30 27,285 vehicles

That's roughly a 41% decrease in the number of vehicles traveling on I-95, a 47% reduction on I-195, and a 53% reduction on I-295.

Data provided by the Rhode Island State Police shows the number of crashes last month was down 32% compared to March 2019.

PDF: RI State Police crash data Download

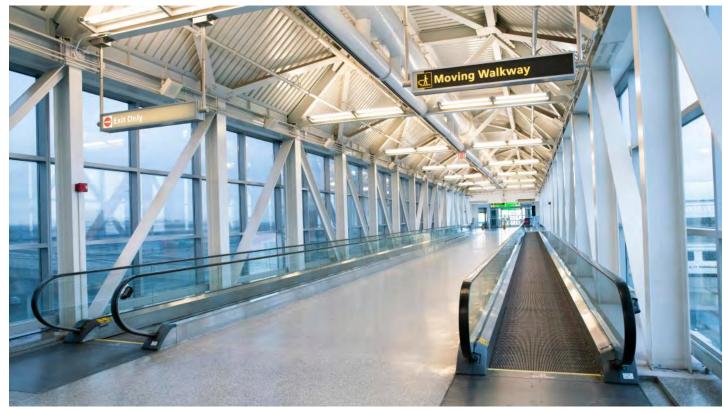
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Airline Flights Into And Out Of New York City Cut Drastically Because Of Coronavirus



An empty corridor at John F. Kennedy International Airport in New York last month. Social distancing to slow the spread of the coronavirus leaves little demand for flights. *Kena Betancur/AFP via Getty Images*

David Schaper | NPR | April 6, 2020

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Airports around the world are a lot quieter these days, with hardly anyone flying because of travel restrictions to help slow the spread of the coronavirus.

And some of the nation's busiest airports are about to get even quieter, as airlines slash service this week into and out of the three major New York City area airports.

American Airlines announced that as of Tuesday, April 7, it will reduce the number of departures from LaGuardia, JFK and Newark to just 13 a day. That's down from a average of 270 flights a day last April. Eight of those flights will be from LaGuardia, and three each from JFK and Newark.

According to airline industry observers, for the first time since the 1940's, American will not have a nonstop flight from New York City to Los Angeles.

United Airlines is cutting the number of flights into and out of the region to 17 a day, 15 of those from its hub at Newark, and just 2 from LaGuardia (United doesn't fly from JFK).

JetBlue, which has a hub at JFK, has eliminated 80% of its flights there. Spirit has suspended all service to and from the NYC area.

Delta will have the busiest flight schedule with 51 daily departures from the three airports; 29 from JFK,15 from LaGuardia and 7 from Newark.

The airlines say the reduction in flights is due to a combination of the high number of coronavirus cases in the New York metro area, an effort to minimize employees' potential exposure to the virus and the sharp reduction in demand.

American spokesperson Ross Feinstein said in a tweet that the airline's busiest flight out of LaGuardia Sunday "only had 27 passengers (on a 737-800 with 172 seats). Let's just say that flight boarded quickly. But not as quickly as the nine flights from JFK/LGA with one passenger on each."

Most of the service cuts are in effect until early May.

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Travel Plunges 93% At Boston Logan Airport Amid Coronavirus Outbreak



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Travel at Boston Logan has been on the steady decline since late February and early March. There was first a 4.5% in the week that ended on March 1; ultimately, Logan saw a whopping 76% drop off in the final of the four weeks recorded.

People appear to be heeding advisories to stay home and avoid non-essential travel.

Also, several <u>major airlines</u> have already cut down flight schedules. JetBlue — Logan's largest carrier — <u>reduced flights by 40%</u> for April and May, with plans for further cuts into July.

Gov. Charlie Baker has asked those still traveling to the state to <u>self-</u> <u>quarantine</u> for 14 days.

State officials are predicting <u>a surge in coronavirus cases</u>, with the virus peaking over the next two weeks. Boston has even implemented a 9 p.m. to 6 a.m. <u>curfew</u> in anticipation of the surge.

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NEWS RELEASE

American Airlines Announces Additional Schedule Suspensions in Response to Reduced Customer Demand Related to COVID-19

3/27/2020

FORT WORTH, Texas — American Airlines Group Inc. (NASDAQ: AAL) will make further capacity cuts in April and May to address record low customer demand.

Airline further reduces system capacity and extends waived change fees

FORT WORTH, Texas — American Airlines Group Inc. (NASDAQ: AAL) will make further capacity cuts in April and May to address record low customer demand.

April and May capacity will be reduced

American will suspend 60% of its capacity in April as compared to the same period in 2019 and is planning to suspend up to 80% of its capacity in May compared to the same period in 2019. These changes are due to significantly decreased customer demand and government travel restrictions related to coronavirus (COVID-19). The reduced April schedule will be reflected on **aa.com** Sunday, March 29, and the reduced May schedule will be loaded Sunday, April 5.

Entity	Capacity: April YoY	Capacity: May YoY
Domestic	Down 60-70%	Down 70-80%
International	Down 80-90%	Down 80-90%

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The domestic capacity reductions take into consideration the FAA's recent decision to grant additional flexibility in slot-use policies at U.S. airports during this unprecedented situation. These waivers will allow the airline to better align capacity with demand in light of adjustments to the flight schedule.

The most significant change is the reduction in service to Hawaii in April. In response to the new 14-day quarantine order for travelers flying to Hawaii, American has suspended operations into Kona (KOA), Lihue (LIH) and Maui (OGG). The airline will continue to operate one daily flight from Los Angeles (LAX) to Honolulu (HNL).

Travel waivers

American is also continuing to take care of customers by providing additional flexibility in purchasing future travel by extending its offer to waive change fees for customers who purchase tickets through April 15. The offer is available for any of American's published nonrefundable fares. Additional details can be found on **aa.com/travelalerts**.

About American Airlines Group

American Airlines offers customers 6,800 daily flights to more than 365 destinations in 61 countries from its hubs in Charlotte, Chicago, Dallas-Fort Worth, Los Angeles, Miami, New York, Philadelphia, Phoenix and Washington, D.C. With a shared purpose of caring for people on life's journey, American's 130,000 global team members serve more than 200 million customers annually. Since 2013, American has invested more than \$28 billion in its product and people and now flies the youngest fleet among U.S. network carriers, equipped with industry-leading high-speed Wi-Fi, lie-flat seats, and more inflight entertainment and access to power. American also has enhanced food and beverage options in the air and on the ground in its world-class Admirals Club and Flagship lounges. American was recently named a Five Star Global Airline by the Airline Passenger Experience Association and Airline of the Year by Air Transport World. American is a founding member of oneworld®, whose members serve 1,100 destinations in 180 countries and territories. Shares of American Airlines Group Inc. trade on Nasdaq under the ticker symbol AAL and the company's stock is included in the S&P 500. Learn more about what's happening at American by visiting **news.aa.com** and connect with American on Twitter **@AmericanAir** and at **Facebook.com/AmericanAirlines**.

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https://komonews.com/news/local/alaska-air-reports-80-drop-in-flight-demands-due-to-covid-19-outbreak

Alaska Air reports 80%+ drop in flight demand due to COVID-19 outbreak

KOMO News Staff Published 8:52 am CDT, Tuesday, April 7, 2020



Three Alaska Airlines planes lined up for service to begin out of a new passenger terminal at Paine Field in Everett on Monday, March 4, 2019.

SEATTLE -- As millions of people across the nation stay at home to help fight the coronavirus outbreak, the travel industry continues to take a strong punch to its bottom line.

Alaska Airlines says it continues to experience an 80% or more drop in demand for its flights, according to paperwork filed with investors. As a result, the company is implementing a corresponding 80% cut to its flight capacity in April and May. And the company is warning

that while its schedule for June and beyond will be decided later, given current trends, they expect sizable cuts to continue into the coming months.



In addition, the company has applied for government payroll support grants as part of the recently passed CARES Act.

Cuomo Says New York Is 'by No Means Out of the Woods' on Virus



"Given the uncertainty about when demand may bottom out and when a recovery may begin, the CARES Act payroll support grants will be critical as we weather the challenging months ahead," company officials wrote in the filing.

The company notes that as of April 6, it had about \$2 billion in cash and short term investments on hand.

Alaska Air officials had earlier announced a 70% reduction in flights last month, including the end of all "red-eye" overnight flights.

This article first appeared on KOMO News.

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Coronavirus (COVID-19) Travel Information



Destinations currently experiencing travel disruptions

<u>Arizona</u>	<u>Florida</u>	<u>Montego Bay</u>	<u>Rhode Island</u>
<u>Aruba</u>	<u>Grand Cayman</u>	<u>Nassau, Bahamas</u>	<u>San Jose, Costa Rica & Liberia,</u>
<u>Belize</u>	<u>Havana</u>	<u>New Mexico</u>	<u>Costa Rica</u>
<u>Cabo San Lucas/Los Cabos</u>	<u>Hawaii</u>	<u>Oklahoma</u>	South Carolina
<u>Cancun</u>	<u>Kentucky</u>	<u>Puerto Vallarta</u>	<u>Texas</u>
<u>Cozumel</u>	<u>Maine</u>	<u>Punta Cana</u>	Turks and Caicos

Need to rebook?

Change flight Cancel flight

Traveling to/from disrupted destinations

General Information

FAQs

Destinations experiencing travel disruptions & travel restrictions

Southwest Airlines[®] is aware that government mandates have resulted in restrictions on air travel due to the ongoing coronavirus (COVID-19) outbreak. Unfortunately, many of the restrictions will result in flight cancellations, potential quarantines upon arrival, and/or temperature checks upon landing, and we sincerely regret any inconvenience created by the travel disruptions.

Notifying affected Customers: Taking care of you

Once Southwest[®] becomes aware of any government's travel restriction that results in a flight cancellation or self-quarantine, our Team will notify you as soon as possible with your options. Rest assured, we will offer maximum flexibility and accommodate Customers to the best of our ability. As always, the Southwest Team appreciates your patience and trust in us during this unprecedented time.

If you want to rebook your Southwest flight due to disruptions

If you are scheduled to travel between today and April 30, you can change your travel to a date 60 days from the original date of travel without paying any difference in fare if you are traveling between the same origin and destination. You can do this online by visiting <u>Southwest.com/rebook</u>. Look for flights that display as "Available." Flights that show a price point are not eligible for a change without paying a fare difference. Doing this online is your best option as call volumes are likely to be very high, so wait times to reach a Southwest[®] Representative may be long.

Canceling your Southwest flight

If you decide not to travel, as long as you cancel your flight at least 10 minutes before its scheduled departure, the funds used to pay for a nonrefundable ticket (Wanna Get Away[®] fares) are normally valid for one year from the date of purchase.

However, in recognition of the current travel environment, we are extending the expiration date of some travel funds:

- Customers' funds that have expired or will expire between March 1 June 30, 2020, will now expire June 30, 2021.
- Any travel funds created because you cancel a flight between March 1 June 30, 2020, will expire June 30, 2021.

Destinations with operational restrictions

Arizona Updated April 8, 2020 at 10:00 a.m. CT.	+
Aruba Updated April 6, 2020 at 5:15 p.m. CT.	+
Belize Updated April 6, 2020 at 5:15 p.m. CT.	+
Cabo San Lucas/Los Cabos Updated March 27, 2020 at 6:30 p.m. CT.	+
Cancun Updated March 27, 2020 at 6:30 p.m. CT.	+
Cozumel Updated April 6, 2020 at 5:15 p.m. CT.	+
Florida Updated March 28, 2020 at 1:30 p.m. CT.	+
Grand Cayman Updated April 6, 2020 at 5:15 p.m. CT.	+
Havana Updated March 27, 2020 at 6:30 p.m. CT.	+
Hawaii Updated April 1, 2020 at 8:30 p.m. CT.	+
Kentucky Updated April 7, 2020 at 4:00 p.m. CT.	+
Maine Updated April 6, 2020 at 9:45 a.m. CT.	+
Montego Bay Updated March 30, 2020 at 3:05 p.m. CT.	+
Nassau, Bahamas Updated March 27, 2020 at 6:30 p.m. CT.	+

New Mexico Updated March 28, 2020 at 10:00 a.m. CT.

Puerto Vallarta Updated April 6, 2020 at 5:15 p.m. CT.

Punta Cana Updated April 6, 2020 at 5:15 p.m. CT.

Rhode Island Updated March 25, 2020 at 4:15 p.m. CT.

San Jose, Costa Rica & Liberia, Costa Rica Updated April 6, 2020 at 5:15 p.m. CT.

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Texas Updated March 29, 2020 at 7:30 p.m. CT.

Turks and Caicos Updated April 6, 2020 at 5:15 p.m. CT.

Finally, the Safety and well-being of our Customers and Employees, and all of those in the communities we serve, remains our top priority. We will approach this new challenge with our Southwest Hearts and determination to provide Customers with the utmost care and assistance.

We will continue to post any details or updates on additional travel restrictions as we learn about them on this page.

Once again, we appreciate your support, and we look forward to welcoming you back onboard soon.

General Information

Snack and beverage service temporarily suspended on all flights – Updated March 24, 2020 at 6:40 p.m. CT.

The well-being of our Customers and Employees is our uncompromising priority onboard every Southwest flight. In accordance with health officials' recommendations to limit close public interactions during the coronavirus (COVID-19) outbreak, Southwest is temporarily suspending **all onboard beverage and snack service from Wednesday, March 25, 2020 until further notice.**

Our desire to continue providing Southwest Hospitality is as strong as ever, and our entire Team truly appreciates your understanding of the difficult decisions we need to make during these uncharted times.

Aircraft Cleaning and Cabin environment – Keeping you safe within our experience

Southwest Airlines aircraft are maintained in accordance with an established program aimed at providing a clean and inviting cabin environment. In addition to tidying each aircraft between flights, we spend more than six hours cleaning each aircraft every night. As of March 4, 2020, we have enhanced our overnight cleaning procedures.

Typically, we use an EPA approved, hospital-grade disinfectant in the lavatories and an interior cleaner in the cabin. Now, we are expanding the use of the hospital-grade disinfectant throughout the aircraft, and it will be used in the cabin, on elements in the flight deck, and in the lavatory. These procedures

cabin, on elements in the flight deck, and in the lavatory. These procedures meet or exceed recommendations from the Centers of Disease Control and Prevention (CDC) and the World Health Organization (WHO).

All of our aircraft are equipped with HEPA (High-Efficiency Particulate Air) filters, which filter out airborne particles as the air onboard is recirculated with outside air. These same HEPA filters are used in many hospitals to enhance air quality within this environment.



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Our aircraft are also designed with an air circulation system that mixes in fresh air from outside the plane. The HEPA filter and the air circulation system work together to provide optimum air quality while onboard a Southwest plane which, in most cases, exceeds the quality of air that can be found outdoors, as well as a typical office building or similar public venue. On average, a complete exchange of cabin air and outside air is accomplished every three minutes.

Visit our blog to see what Southwest is doing to keep you safe.

Southwest Airlines change and cancellation policies

Southwest is unique in the airline industry because we do not charge fees to change or cancel flights. Nonrefundable tickets (Wanna Get Away fares) not flown on the travel date, but canceled in accordance with Southwest's No Show policy, can be applied to future travel. Refundable tickets (Anytime and Business Select[®] fares) not flown on the travel date can also be applied to future travel.

More information on refunds can be found on <u>Southwest.com</u>. We hope these policies continue to give our Customers options and flexibility as you plan your travel.

Personal safety recommendations

We recommend the <u>CDC's website</u> as a resource for ways that Customers can best protect themselves from becoming ill. Additionally, Customers are encouraged to wash their hands frequently and use hand sanitizer and/or anti-bacterial wipes when traveling.

Ongoing updates

As we make any changes to our operations or procedures, we will update this page with the most current information. A link to this page will remain on our homepage at <u>Southwest.com</u>.

>

A message from our SVP and Chief Marketing Officer, Ryan Green

Frequently Asked Questions

Can I receive a refund if I've booked a ticket on Southwest and feel uncomfortable flying?

Nonrefundable tickets (Wanna Get Away fares) not flown on the travel date, but canceled in accordance with Southwest's No Show Policy, can be applied to future travel up to one year from the original purchase date aside from the below exceptions.

All travel funds must be used by the individual named on the ticket.

In recognition of the current travel environment, we are extending the expiration date of some travel funds:

- Customers' funds that have expired or will expire between March 1-June 30, 2020, will now expire June 30, 2021
- Any newly created travel fund because you cancel a flight between March 1-June 30, 2020, will have an expiration date of June 30, 2021

For any nonrefundable tickets that do not fall within either date range noted above, the travel funds can be used up to one year from the original purchase date but must be used by the individual named on the ticket.

Any travel planned through the end of April can be changed online for up to 60 days from the original date of travel without paying any difference in fare if you are traveling between the same origin and destination. Look for flights that display as "Available." Flights that show a price point are not eligible for a change without paying a fare difference.

Refundable tickets not flown on the travel date can also be applied to future travel. <u>More information on Southwest</u> <u>refunds</u> can be found on <u>Southwest.com</u>. We hope these policies continue to give our Customers options and flexibility when planning travel.

If my funds are still active and have not expired, how can I use the funds or be notified of the

expiration date extension?

It will take several weeks to implement the expiration extension of unused funds. Once the extension is complete, more information will be provided on how Customers can access and apply their travel funds.

Is there a fee to change my flight to a different date?

Southwest does not charge fees to change or cancel flights, although applicable fare differences may apply.

Will my Southwest flight be canceled because of concerns over the coronavirus (COVID-19)?

We are continually revising our schedule and making adjustments as needed through April 14, 2020. For the time period between April 14 and June 5, 2020, we've reduced available seats by at least 20 percent. These flight schedule reductions are in addition to the existing capacity impact due to the Boeing 737 MAX groundings.

Customers who have already booked their travel and will be impacted by our amended schedule will be notified of their reaccommodated travel according to our flexible accommodation procedures.

How do I know your aircraft cabins are safe from the coronavirus (COVID-19)?

Southwest aircraft are regularly maintained in accordance with an established program aimed at providing a clean and inviting cabin experience. In addition to aircraft being tidied up between flights during the day, each aircraft receives a thorough review that includes cleaning, sanitizing, and disinfecting that meets or exceeds recommendations from the Center for Disease Control (CDC) and World Health Organization (WHO). As of March 4, we've enhanced our cleaning efforts in response to the current environment.

Southwest also equips all of our fleet with a HEPA (High Efficiency Particulate Air) filter, which filters out recirculated air onboard each plane to remove airborne particles. HEPA filters are also used in hospitals to provide patients with clean air.

Effective March 24, we also temporarily adjusted our inflight food and beverage service to limit Customer and Flight Attendant interactions. For now, there won't be any food and beverage service on any Southwest flight.

What enhanced cleaning is Southwest doing to ensure aircraft are safe?

We spend more than six hours cleaning each aircraft every night, and, as of March 4, 2020, we have enhanced our cleaning procedures. Typically, we use an EPA approved, hospital-grade disinfectant in the lavatories and an interior cleaner in the cabin. We have expanded the use of the hospital-grade disinfectant throughout the aircraft, and now are using it in the cabin, on elements in the flight deck, and in the lavatory.

Additionally, we equip all our aircraft with a HEPA (High Efficiency Particulate Air) filter, which filters out recirculated air onboard each plane to remove airborne particles (HEPA filters are also used in hospitals to provide patients with clean air).

Additional frequently asked questions >



Customer Service FAQ

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Service Adjustments Due to Coronavirus

April 6, 2020, 5:00 pm ET

Latest News & Updates

At this time, various states are undertaking specific safety precautions at stations for customers arriving from out of state. Check with each state for specific guidance. The Centers for Disease Control and Prevention (https://www.cdc.gov/ coronavirus/2019-ncov/travelers/travel-in-the-us.html) has urged residents of New York, New Jersey and Connecticut to refrain from non-essential travel for 14 days. Amtrak service continues to operate on the Northeast Corridor, providing essential services during this challenging time.

Essential Service Plan

While Amtrak continues to operate across the nation, we have adjusted our train services due to significantly reduced demand. The most up-to-date schedules are available when booking your trip on Amtrak.com and in the mobile app (/pl anning-booking/tickets-reservations/mobile.html) .

Operating on a reduced schedule

- Northeast Corridor (Boston New York Washington, DC Virginia)
- Adirondack (New York Montreal): No service north of Albany
- Amtrak Hartford Line (New Haven, CT Springfield, MA)
- Amtrak Thruway Bus routes
- California Zephyr (Chicago- Emeryville, CA): No service between Reno and Denver
- Capitol Corridor (San Jose Sacramento)
- Cascades (Eugene Vancouver, B.C.): No service north of Seattle
- Downeaster (Boston Brunswick, ME)
- Empire Service (New York Niagara Falls)
- Ethan Allen Express (New York Rutland, VT): No service north of Albany
- Hiawatha (Chicago Milwaukee)
- Illini/Saluki (Chicago Carbondale)
- Illinois Zephyr/Carl Sandburg Chicago Quincy)
- Lincoln Service (Chicago St. Louis)
- Maple Leaf (New York Toronto): No service west of Niagara Falls, NY
- Missouri River Runner (St. Louis Kansas City) starting March 30
- Pacific Surfliner (San Luis Obispo San Diego)
- Piedmont (Charlotte Raleigh)
- San Joaquins (Bakersfield Oakland and Sacramento)
- Valley Flyer (New Haven, CT Greenfield, MA)
- Vermonter (Washington St. Albans): No service north of New Haven (Monday-Saturday) and no service on Sundays.
- Wolverine (Chicago Pontiac)

Temporarily suspended services

- Acela (Boston Washington, DC)
- Carolinian (Charlotte New York)
- Keystone Service (Harrisburg New York)
- Pennsylvanian trains (New York Pittsburgh)

- Pere Marquette (Chicago Grand Rapids)
- Winter Park Express (Denver Winter Park Resort)

What to Expect

Due to service reductions, some stations may not be staffed. If the station is closed, please proceed directly to the platform to board your train. Café service will also be suspended on select trains. Other services may be impacted as circumstances change.

Travel Changes

Customers with reservations on trains that are being modified will be contacted and accommodated on trains with similar departure times or on another day.

Ticket Changes and/or Cancellations

Amtrak is waiving change fees for reservations made before May 31, 2020. To modify a reservation, log in to your account, go to 'Modify Trip' on Amtrak.com, or find your reservation from your account on the home screen in the Amtrak app. A fare difference may apply to your new itinerary. If you want to cancel your reservation with no fee, you must call 800-USA-RAIL and speak with an agent (not available via Amtrak.com or the app).

Need Help?

COVID-19 Update: Schedule Updates & Changes | Peter Pan Bus Lines

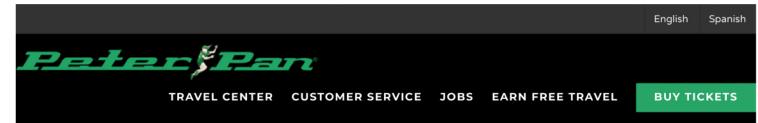


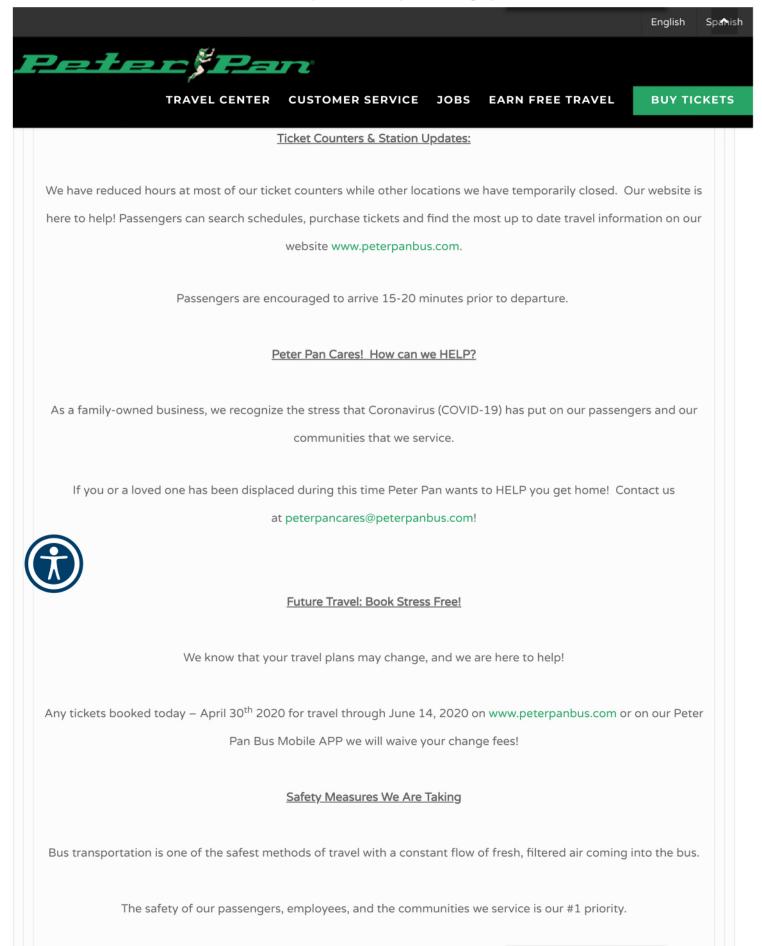
EXHIBIT 20

COVID-19 Update: Schedule Updates & Changes



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You can help p	prevent the spread of Cord	onavirus. The Centers for D	isease Cor	ntrol and Prevention (CDC) r	ecommend	
	these simple daily p	precautions to help preven	t the sprea	ad of Coronavirus:		
	Wash your hands often with soap and water for at least 20 seconds.					
•	Avoid touching your eyes, nose and mouth with unwashed hands.					
•	Cover your cough or sneeze with a tissue, then throw the tissue in the trash.					
		Stay home if you a	e sick.			



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SEARCH

EXHIBIT 21



TRAVEL ALERT: FIND OUT MORE DETAILS

COVID-19 Update: Schedule and Service Changes

Greyhound is temporarily reducing schedules across our network as a result of the drop in demand due to coronavirus. Unfortunately, this includes suspension of service in several cities, particularly in the Northeast. A complete list of suspended destinations is listed below. Because of the ongoing updates of city, state and national governmental policies intended to slow COVID-19, our most up to date schedules can be found by searching on Greyhound.com.

In addition, Greyhound is aware that government mandates related to COVID-19 have resulted in restriction in cross-border travel. As a result, Greyhound has cancelled services between the U.S. and Canada.

When Greyhound cancels service, we will notify you via email. Our team will be offering maximum flexibility and accommodating customers to the best of our ability.

Please note - we are currently experiencing extremely high call volume and longer than normal hold times. We are doing everything we can to answer your call as quickly as possible. Our call center is open 7 days a week 7 a.m. to 11 p.m. CT. If you're not scheduled to depart within the next three to five days, please call us back closer to your travel date.

Updated as of April 6, 2020

SERVICE IS BEING SUSPENDED IN THE FOLLOWING CITIES:

AKRON, OH ANNAPOLIS, MD ASHTABULA, OH BALLYS ATLANTIC CITY, NJ **BATTLE CREEK, MI BELLINGHAM, WA BENTON HARBOR, MI BINGHAMPTON, NY BLOOMINGTON PILOT STA, IL** BORON, CA BOSTON LOGAN ARPT, MA **BROOKHAVEN, MS** BROOKLYN, NY **BUFFALO AIRPORT, NY** BURLINGT TRANSIT CTR, VT BURLINGTON ARPT, VT **BURNS HARBOR, IN** BYEAS, AZ CAESARS ATLANTIC CITY, NJ CAMBRIDGE, MD

CENTRALIA, WA CLAYTON NM CONCORD, NH CORTLAND SUNY NY DURANT, MS EASTON, MD ENTERPRISE, AL EVERETT, WA FLORENCE, SC FOXWOOD MASHANTUCKET, CT GENEVA, NY GLENS FALLS, NY HANOVER, NH HARRAHS ATLANTIC CITY, NJ HNT HUNTSVILLE, TX HOLLYWOOD, CA HOUMA, LA ITHACA, NY KELSO, WA LIMA, OH LORDSBURG PILOT STA, NM LOS ANGELES AMTRAK, CA LOS BANOS, CA MANCHESTER ARPT, NH MANCHESTER, NH MANSFIELD, OH MARDELA SPRINGS, MD MARION, VA MATTOON, IL MOHEGAN SUN UNCASVILLE, CT MOJAVE, CA MONTPELIER, VT MORGANTOWN, WV MT VERNON, WA NASHUA, NH NEW LONDON, CT OLYMPIA, WA PERIDOT, AZ PLATTSBURGH, NY **PROVIDENCE**, RI **RESORTS ATLANTIC CITY, NJ** RS GRANTSVILLE PILOT STA, MD **RS MEBANE EXIT 152, NC RS TIFTON LOVES EXIT 59, GA** SARATOGA SPRINGS, NY SCRANTON, PA STAMFORD, CT SYRACUSE UNIV, NY TACOMA, WA **TEHACHAPI, CA** TROPICANA ATLANTIC CITY, NJ US CA CUSTOMS, VT VANCOUVER, BC VERMONINTX to use this site, you agree to the use of cookies by Greyhound and third-party partners to recognize users in order to VIEWINAC Wand customize content, offers and advertisements, and send email. To opt out, or for details on what we collect and why, and WALCSEN Bld Right Gand how to exercise them, visit our privacy policy.

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NEWS HEALTH & MEDICINE

When will the coronavirus pandemic and social distancing end?

Up to two-thirds of a population needs immunity, via infection or vaccines, to stop COVID-19



Across the United States, people are fighting the COVID-19 pandemic by withdrawing from public spaces and staying home, leaving normally busy places like 42nd Street in Midtown Manhattan deserted.

PATTI MCCONVILLE/ALAMY STOCK PHOTO

By Jonathan Lambert

MARCH 24, 2020 AT 11:28 AM

As the gears of the modern world grind to a near halt, one question is likely on the mind of many: When will the coronavirus pandemic — and social distancing — end?

No one knows for sure, but it's probably not any time soon. Here's what we do know about when it may be safe to come out of our homes and resume normal life.

It will almost certainly take herd immunity to end the pandemic.

Most experts say we're past the point of containing the virus, like we did with SARS and MERS. That means that COVID-19 is here to stay, and the pandemic will end only with herd immunity.

Herd immunity describes what proportion of a population has to be immune to a disease for the population as a whole to be protected from outbreaks. The exact threshold depends on the infectiousness of the disease, represented by the basic reproduction number, called R_0 (pronounced "R naught").

When a new virus emerges, no one is immune. A highly transmissible virus, like the coronavirus behind the current pandemic, can spread like wildfire, quickly burning through the dry kindling of a totally naive population. But once enough people are immune, the virus runs into walls of immunity, and the pandemic peters out instead of raging ahead. Scientists call that the herd immunity threshold.

Up to two-thirds of a population would need to be infected to reach that threshold.

Current estimates put the coronavirus's R_0 between two or three, meaning anyone with COVID-19 tends, on average, to infect two or three other people. While this number can change based on our behavior, researchers estimate that the herd immunity threshold for COVID-19 is about one-third to two-thirds of any given population. Worldwide, that means anywhere from 2.5 billion to 5 billion people.

Scientists aren't yet sure how long people infected with COVID-19 remain immune, but so far it seems that they aren't readily reinfected (*SN: 3/4/20*).

Letting the virus burn through the population would be the fastest approach. People acquire immunity against a virus in two ways: Either they have been infected and recovered — gaining some level of antibody protection — or they get a vaccine against the virus.

Since a <u>vaccine is at least 12 to 18 months from being available</u> (*SN: 2/21/20*), the fastest way to herd immunity would be to let the virus burn through the world's population unimpeded. According to a March 16 report released by researchers at Imperial College London, in the United States, the <u>pandemic would peak in about three months</u> under that scenario.

But....

The costs of such a strategy would be overwhelming. Upward of 2 million Americans would die from infection alone, according to the same report. Roughly 81 percent of the U.S. population would get infected, the team estimates.

The elderly and those with underlying health conditions would be hardest hit, but <u>younger</u> <u>people, too, can experience severe illness</u> (*SN: 3/19/20*). And the critical care capacity of U.S. hospitals would be exceeded as early as the second week of April, and eventually require 30 times as many critical care beds as currently exist, the team estimates. While there is much still unknown about the virus, most experts agree with this overall picture.

The costs of delaying action any further to slow the virus' spread could be catastrophic, the researchers conclude. That's why countries around the world are trying various strategies to quell the surge in cases, in effect <u>flattening the exponential curve of the pandemic</u> and lessening the strain on hospitals. Those measures primarily consist of aggressive social distancing, such as closing schools, cancelling large public events and encouraging people to work from home if possible (*SN: 3/13/20*).

Social distancing reduces deaths but delays herd immunity.

The necessary flipside of successful social distancing is that achieving herd immunity gets delayed as cases decrease, says Michael Mina, an epidemiologist at Harvard University's T.H. Chan School of Public Health in Boston. Even if collectively we prevent a surge in the coming weeks, he says, the virus could reemerge as soon restrictions are lifted.

"In the absence of robust herd immunity at the population level, we have some risk of a second wave of the epidemic," Mina says.

Social distancing will need to last 1 to 3 months at minimum, potentially longer.

Society could keep a lid on such a resurgence by maintaining broad social distancing. The Trump administration on March 16 called for significant social distancing for at least the following 15 days. But most experts expect such measures will need to be in place in the United States for one to three months, at minimum, to keep hospitals from being overwhelmed.

We could get a big break if the virus' spread slows with warmer weather, though so far there's no indication that will happen. "That would be a great stroke of luck," says Maciej Boni, an

epidemiologist at Penn State University, and may allow more people to return to work once the number of new cases begins to fall.

See all our coverage of the 2019 novel coronavirus outbreak

Keeping schools closed and encouraging people to generally stay home could suppress the pandemic after five months, according to the Imperial College London report. But once

such restrictions are lifted the virus would, in all probability, come roaring back. Until a vaccine becomes available, potentially in 12 to 18 months, the report argues that major, society-wide social distancing measures are necessary.

But such drastic changes to daily life may be difficult to sustain, Boni says. "It's like you're holding back a wave of infections with Saran Wrap."

More widespread diagnostic testing could ease the need for extensive social distancing.

Whether such strict isolation could be maintained for months on end is unknown. "We've never faced anything like this before," says Caitlin Rivers, an epidemiologist at the Johns Hopkins Center for Health Security. The economic costs would be enormous, especially for the most vulnerable members of society.

"But I'm not ready to give up on the lessons from places like South Korea and Taiwan," Rivers says. "They've shown the virus can be [locally] contained through general social distancing coupled with extensive testing, case isolation and contact tracing." South Korea, for instance, reported its <u>highest number of new cases, 909</u> on February 29. Since then, the number has steadily decreased. On March 24, only 76 new cases were reported.

While the United States is ramping up testing, it currently <u>cannot test as widely as many other</u> <u>countries</u> (*SN: 3/6/20*), allowing the virus to spread undetected widely across the country. Until that capacity increases significantly, the only tool the United States has to slow the virus' spread is blunt, widespread social distancing.

As staying home hopefully dampens the epidemic, Boni, Rivers and Mina all say it's key to use the coming months to rapidly expand testing infrastructure, while also bolstering health care systems.

Testing allows public health officials to identify new cases and isolate them, while tracing and testing their contacts as quickly as possible. Testing and isolating potential contacts before they develop symptoms is crucial, since the pandemic seems to be <u>driven by people who don't know</u> they're sick (*SN: 3/17/20*).

It would be "as though we're back at the beginning of the outbreak and taking targeted approaches," Mina says. With some luck, such an approach could keep outbreaks from spreading until a vaccine creates herd immunity.

The feasibility of such a program depends on many unknown variables. Firstly, it would require vastly more testing than is currently available. It also requires rigorous and rapid contact tracing after a positive case, which is no small task. Some countries have used cell phone tracking data to aid this process.

A big unknown: Are all these efforts sustainable?

At this point, there are still too many unknowns to know how — and when — we will reach herd immunity. In the coming weeks, epidemiologists will be closely tracking the number of new U.S. cases as well as the total number of tests to get a sense of whether social distancing is working in a particular region.

"It's been amazing to see the swing in society over the past week," Mina says. "Nearly everyone has gotten on board." But he worries about the sustainability of such strict measures as the weeks wear on. "Societal forces may end up overwhelming the science."

Editor's Note: This article was updated on March 24, 2020, to correct researchers' university affiliation. We meant Imperial College London, not University College London.

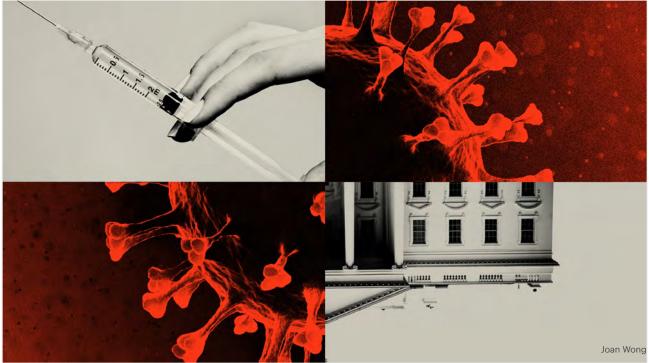
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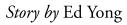
N.M. Ferguson *et al.* Impact of non-pharmaceutical interventions (NPIs) to reduce COVID19 mortality and healthcare demand. Imperial College London. Published online March 16, 2020. doi: 10.25561/77482



How the Pandemic Will End

The U.S. may end up with the worst COVID-19 outbreak in the industrialized world. This is how it's going to play out.





MARCH 25, 2020 HEALTH

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Editor's Note: The Atlantic *is making vital coverage of the coronavirus available to all readers. Find the collection <u>here</u>.*

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HREE MONTHS AGO, no one knew that SARS-CoV-2 existed. Now the virus has spread to almost every country, infecting at least 446,000 people whom we know about, and many more whom we do not. It has crashed economies and broken health-care systems, filled hospitals and emptied public spaces. It has separated people from their workplaces and their friends. It has disrupted modern society on a scale that most living people have never witnessed. Soon, most everyone in the United States will know someone who has been infected. Like World War II or the 9/11 attacks, this pandemic has already imprinted itself upon the nation's psyche.

TheAtlantic - How the Pandemic Will End - The Atlantic - Ed Yong To hear more feature stories, get the Audm iPhone app.

A global pandemic of this scale was inevitable. In recent years, hundreds of health experts have written books, white papers, and op-eds warning of the possibility. Bill Gates has been telling anyone who would listen, including the <u>18</u> <u>million viewers of his TED Talk</u>. In 2018, <u>I wrote a story for *The Atlantic*</u> arguing that America was not ready for the pandemic that would eventually come. In October, the Johns Hopkins Center for Health Security <u>war-gamed</u> <u>what might happen</u> if a new coronavirus swept the globe. And then one did. Hypotheticals became reality. "What if?" became "Now what?"

So, now what? In the late hours of last Wednesday, which now feels like the distant past, I was talking about the pandemic with a pregnant friend who was days away from her due date. We realized that her child might be one of the first of a new cohort who are born into a society profoundly altered by COVID-19. We decided to call them Generation C.

As we'll see, Gen C's lives will be shaped by the choices made in the coming weeks, and by the losses we suffer as a result. But first, a brief reckoning. On the <u>Global Health Security Index</u>, a report card that grades every country on its pandemic preparedness, the United States has a score of 83.5—the world's highest. Rich, strong, *developed*, America is supposed to be the readiest of nations. That illusion has been shattered. Despite months of advance warning as

the virus spread in other countries, when America was finally tested by COVID-19, it failed.

[Anne Applebaum: The coronavirus called America's bluff]

"No matter what, a virus [like SARS-CoV-2] was going to test the resilience of even the most well-equipped health systems," says Nahid Bhadelia, an infectiousdiseases physician at the Boston University School of Medicine. More transmissible and fatal than seasonal influenza, <u>the new coronavirus is also</u> <u>stealthier</u>, spreading from one host to another for several days before triggering obvious symptoms. To contain such a pathogen, nations must develop a test and use it to identify infected people, isolate them, and trace those they've had contact with. That is what South Korea, Singapore, and Hong Kong did to tremendous effect. It is what the United States did not.

<u>As my colleagues Alexis Madrigal and Robinson Meyer have reported</u>, the Centers for Disease Control and Prevention developed and distributed a faulty test in February. Independent labs created alternatives, but were mired in bureaucracy from the FDA. In a crucial month when the American caseload shot into the tens of thousands, only hundreds of people were tested. That a biomedical powerhouse like the U.S. should so thoroughly fail to create a very simple diagnostic test was, quite literally, unimaginable. "I'm not aware of any simulations that I or others have run where we [considered] a failure of testing," says Alexandra Phelan of Georgetown University, who works on legal and policy issues related to infectious diseases.

The testing fiasco was the original sin of America's pandemic failure, the single flaw that undermined every other countermeasure. If the country could have accurately tracked the spread of the virus, hospitals could have executed their pandemic plans, girding themselves by allocating treatment rooms, ordering extra supplies, tagging in personnel, or assigning specific facilities to deal with COVID-19 cases. None of that happened. Instead, a health-care system that already runs close to full capacity, and that was already challenged by a severe flu season, was suddenly faced with a virus that had been left to spread, untracked, through communities around the country. Overstretched hospitals became overwhelmed. Basic protective equipment, such as <u>masks</u>, gowns, and gloves, began to run out. Beds will soon follow, as will the ventilators that provide oxygen to patients whose lungs are besieged by the virus.

[Read: The people ignoring social distancing]

With little room to surge during a crisis, America's health-care system operates on the assumption that <u>unaffected states can help beleaguered ones</u> in an emergency. That ethic works for localized disasters such as hurricanes or wildfires, but not for a pandemic that is now in all 50 states. Cooperation has given way to competition; some worried hospitals have bought out large quantities of supplies, in the way that panicked consumers have bought out toilet paper.

Partly, that's because the White House is a <u>ghost town</u> of scientific expertise. A pandemic-preparedness office that was part of the National Security Council was <u>dissolved in 2018</u>. On January 28, Luciana Borio, who was part of that team, <u>urged the government</u> to "act now to prevent an American epidemic," and specifically to work with the private sector to develop fast, easy diagnostic tests. But with the office shuttered, those warnings were published in *The Wall Street Journal*, rather than spoken into the president's ear. Instead of springing into action, America sat idle.

[Derek Thompson: America is acting like a failed state]

Rudderless, blindsided, lethargic, and uncoordinated, America has mishandled the COVID-19 crisis to a substantially worse degree than what every health expert I've spoken with had feared. "Much worse," said Ron Klain, who coordinated the U.S. response to the West African Ebola outbreak in 2014. "Beyond any expectations we had," said Lauren Sauer, who works on disaster preparedness at Johns Hopkins Medicine. "As an American, I'm horrified," said Seth Berkley, who heads Gavi, the Vaccine Alliance. "The U.S. may end up with the worst outbreak in the industrialized world."

I. The Next Months

Having fallen behind, it will be difficult—but not impossible—for the United States to catch up. To an extent, the near-term future is set because COVID-19 is a slow and long illness. People who were infected several days ago will only start showing symptoms now, even if they isolated themselves in the meantime. Some of those people will enter intensive-care units in early April. As of last weekend, the nation had 17,000 confirmed cases, but the actual number was probably somewhere between 60,000 and 245,000. Numbers are now starting to rise exponentially: As of Wednesday morning, the official case count was 54,000, and the actual case count is unknown. <u>Health-care workers</u> are already seeing worrying signs: dwindling equipment, growing numbers of patients, and doctors and nurses who are themselves becoming infected.

Italy and Spain offer <u>grim warnings about the future</u>. Hospitals are out of room, supplies, and staff. Unable to treat or save everyone, doctors have <u>been forced</u> into the unthinkable: rationing care to patients who are most likely to survive, while letting others die. The U.S. has fewer hospital beds per capita than Italy. <u>A</u> study released by a team at Imperial College London concluded that if the pandemic is left unchecked, those beds will all be full by late April. By the end of June, for every available critical-care bed, there will be roughly 15 COVID-19 patients in need of one. By the end of the summer, the pandemic will have directly killed 2.2 million Americans, notwithstanding those who will indirectly die as hospitals are unable to care for the usual slew of heart attacks, strokes, and car accidents. This is the worst-case scenario. To avert it, four things need to happen—and quickly.

[Read: All the president's lies about the coronavirus]

The first and most important is to rapidly produce masks, gloves, and other personal protective equipment. If health-care workers can't stay healthy, the rest of the response will collapse. In some places, stockpiles are already so low that doctors are reusing masks between patients, calling for donations from the public, or sewing their own homemade alternatives. These shortages are happening because medical supplies are made-to-order and depend on byzantine international supply chains that are currently straining and snapping. Hubei province in China, the epicenter of the pandemic, was also a manufacturing center of medical masks.

In the U.S., the <u>Strategic National Stockpile</u>—a national larder of medical equipment—is already being deployed, especially to the hardest-hit states. The stockpile is not inexhaustible, but it can buy some time. Donald Trump could use that time to invoke the Defense Production Act, launching a wartime effort in which American manufacturers switch to making medical equipment. But after invoking the act last Wednesday, Trump has failed to actually use it, <u>reportedly due to lobbying</u> from the U.S. Chamber of Commerce and heads of major corporations.

Some manufacturers are <u>already rising to the challenge</u>, but their efforts are piecemeal and unevenly distributed. "One day, we'll wake up to a story of doctors in City X who are operating with bandanas, and a closet in City Y with masks piled into it," says Ali Khan, the dean of public health at the University of Nebraska Medical Center. A "massive logistics and supply-chain operation [is] now needed across the country," says Thomas Inglesby of Johns Hopkins Bloomberg School of Public Health. That can't be managed by small and inexperienced teams scattered throughout the White House. The solution, he says, is to tag in the Defense Logistics Agency—a 26,000-person group that prepares the U.S. military for overseas operations and that has assisted in past public-health crises, including the 2014 Ebola outbreak.

This agency can also coordinate the second pressing need: a massive rollout of COVID-19 tests. Those tests have been slow to arrive because of five separate shortages: of masks to protect people administering the tests; of nasopharyngeal swabs for collecting viral samples; of extraction kits for pulling the virus's genetic material out of the samples; of chemical reagents that are part of those kits; and of trained people who can give the tests. Many of these shortages are, again, due to strained supply chains. The U.S. relies on three manufacturers for extraction reagents, providing redundancy in case any of them fails—but all of them failed in the face of unprecedented global demand. Meanwhile, Lombardy, Italy, the hardest-hit place in Europe, houses one of the largest manufacturers of nasopharyngeal swabs.

[Read: Why the coronavirus has been so successful]

Some shortages are being addressed. The FDA is now moving quickly to approve tests developed by private labs. At least one can deliver results in <u>less than an</u> <u>hour</u>, potentially allowing doctors to know if the patient in front of them has COVID-19. The country "is adding capacity on a daily basis," says Kelly Wroblewski of the Association of Public Health Laboratories.

On March 6, Trump said that "anyone who wants a test can get a test." <u>That was (and still is) untrue</u>, and his own officials were quick to correct him. Regardless, anxious people still flooded into hospitals, seeking tests that did not exist. "People wanted to be tested even if they weren't symptomatic, or if they sat next to someone with a cough," says Saskia Popescu of George Mason University, who works to prepare hospitals for pandemics. Others just had colds, but doctors still had to use masks to examine them, burning through their already dwindling supplies. "It really stressed the health-care system," Popescu says. Even now, as capacity expands, tests must be used carefully. The first priority, says Marc Lipsitch of Harvard, is to test health-care workers and hospitalized patients, allowing hospitals to quell any ongoing fires. Only later, once the immediate crisis is slowing, should tests be deployed in a more widespread way. "This isn't just going to be: Let's get the tests out there!" Inglesby says.

These measures will take time, during which the pandemic will either <u>accelerate</u> <u>beyond the capacity of the health system</u> or slow to containable levels. Its course —and the nation's fate—now depends on the third need, which is <u>social</u> <u>distancing</u>. Think of it this way: There are now only two groups of Americans. Group A includes everyone involved in the medical response, whether that's treating patients, running tests, or manufacturing supplies. Group B includes *everyone else*, and their job is to buy Group A more time. Group B must now "flatten the curve" by physically isolating themselves from other people to cut off chains of transmission. Given the slow fuse of COVID-19, to forestall the future collapse of the health-care system, these seemingly drastic steps <u>must be taken</u> <u>immediately</u>, *before* they feel proportionate, and they must continue for several weeks.

[Juliette Kayyem: The crisis could last 18 months. Be prepared.]

Persuading a country to voluntarily stay at home is not easy, and <u>without clear</u> guidelines from the White House, mayors, governors, and business owners have been forced to take <u>their own steps</u>. Some states have banned large gatherings or <u>closed schools</u> and restaurants. <u>At least 21</u> have now instituted some form of mandatory quarantine, compelling people to stay at home. And yet many citizens <u>continue to crowd into public spaces</u>.

In these moments, when the good of all hinges on the sacrifices of many, clear coordination matters—the fourth urgent need. The importance of social distancing must be impressed upon a public who must also be reassured and informed. Instead, Trump has <u>repeatedly played down the problem</u>, telling America that "<u>we have it very well under control</u>" when we do not, and that cases were "going to be down to close to zero" when they were rising. In some cases, as with his claims about ubiquitous testing, his misleading gaffes have deepened the crisis. He has even <u>touted unproven medications</u>.

Away from the White House press room, Trump has apparently been listening to Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases. Fauci has advised every president since Ronald Reagan on new epidemics, and now sits on the COVID-19 task force that meets with Trump roughly every other day. "He's got his own style, let's leave it at that," Fauci told me, "but any kind of recommendation that I have made thus far, the substance of it, he has listened to everything."

[Read: Grocery stores are the coronavirus tipping point]

But Trump already seems to be wavering. In recent days, he has signaled that he is prepared to backtrack on social-distancing policies in a bid to protect the economy. Pundits and business leaders have used similar rhetoric, arguing that high-risk people, such as the elderly, could be protected while lower-risk people are allowed to go back to work. Such thinking is seductive, <u>but flawed</u>. It overestimates our ability to assess a person's risk, and to somehow wall off the "high-risk" people from the rest of society. It underestimates how badly the virus can hit "low-risk" groups, and how thoroughly hospitals will be overwhelmed if even just younger demographics are falling sick.

<u>A recent analysis</u> from the University of Pennsylvania estimated that even if social-distancing measures can reduce infection rates by 95 percent, 960,000 Americans will still need intensive care. There are only about 180,000 ventilators in the U.S. and, more pertinently, only enough respiratory therapists and critical-care staff to safely look after 100,000 ventilated patients. Abandoning social distancing would be foolish. Abandoning it now, when tests and protective equipment are still scarce, would be catastrophic.

[Read: America's hospitals have never experienced anything like this]

If Trump stays the course, if Americans adhere to social distancing, if testing can be rolled out, and if enough masks can be produced, there is a chance that the country can still avert the worst predictions about COVID-19, and at least temporarily bring the pandemic under control. No one knows how long that will take, but it won't be quick. "It could be anywhere from four to six weeks to up to three months," Fauci said, "but I don't have great confidence in that range."

II. The Endgame

Even a perfect response won't end the pandemic. As long as the virus persists *somewhere*, there's a chance that one infected traveler will reignite fresh sparks in countries that have already extinguished their fires. This is already happening in China, Singapore, and other Asian countries that briefly seemed to have the virus under control. Under these conditions, there are three possible endgames: one that's very unlikely, one that's very dangerous, and one that's very long.

The first is that every nation manages to simultaneously bring the virus to heel, as with the original SARS in 2003. Given how widespread the coronavirus pandemic is, and how badly many countries are faring, the odds of worldwide synchronous control seem vanishingly small.

The second is that the virus does what past flu pandemics have done: It burns through the world and leaves behind enough immune survivors that it eventually struggles to find viable hosts. This "herd immunity" scenario would be quick, and thus tempting. But it would also <u>come at a terrible cost</u>: SARS-CoV-2 is more transmissible and fatal than the flu, and it would likely leave behind many

millions of corpses and a trail of devastated health systems. <u>The United Kingdom</u> <u>initially seemed to consider this herd-immunity strategy</u>, before backtracking when models revealed the dire consequences. The U.S. now seems to be considering it too.

[Read: What will you do if you start coughing?]

The third scenario is that the world plays a protracted game of whack-a-mole with the virus, stamping out outbreaks here and there until a vaccine can be produced. This is the best option, but also the longest and most complicated.

It depends, for a start, on making a vaccine. If this were a flu pandemic, that would be easier. The world is experienced at making flu vaccines and does so every year. But there are no existing vaccines for coronaviruses—until now, these viruses seemed to cause diseases that were mild or rare—so researchers must start from scratch. The first steps have been impressively quick. Last Monday, a possible vaccine created by Moderna and the National Institutes of Health went into early clinical testing. That marks a <u>63-day gap</u> between scientists sequencing the virus's genes for the first time and doctors injecting a vaccine candidate <u>into a person's arm</u>. "It's overwhelmingly the world record," Fauci said.

But it's also the fastest step among many subsequent slow ones. The initial trial will simply tell researchers if the vaccine seems safe, and if it can actually mobilize the immune system. Researchers will then need to check that it actually prevents infection from SARS-CoV-2. They'll need to do animal tests and large-scale trials to ensure that the vaccine doesn't cause severe side effects. They'll need to work out what dose is required, how many shots people need, if the vaccine works in elderly people, and if it requires other chemicals to boost its effectiveness.

"Even if it works, they don't have an easy way to manufacture it at a massive scale," said Seth Berkley of Gavi. That's because Moderna is using a <u>new</u> <u>approach to vaccination</u>. Existing vaccines work by providing the body with inactivated or fragmented viruses, allowing the immune system to prep its defenses ahead of time. By contrast, Moderna's vaccine comprises a sliver of SARS-CoV-2's genetic material—its RNA. The idea is that the body can use this sliver to build its own viral fragments, which would then form the basis of the

immune system's preparations. This approach works in animals, but is unproven in humans. By contrast, French scientists are trying to modify the existing measles vaccine using fragments of the new coronavirus. "The advantage of that is that if we needed hundreds of doses tomorrow, a lot of plants in the world know how to do it," Berkley said. No matter which strategy is faster, Berkley and others estimate that it will take 12 to 18 months to develop a proven vaccine, and then longer still to make it, ship it, and inject it into people's arms.

[Read: COVID-19 vaccines are coming, but they're not what you think]

It's likely, then, that the new coronavirus will be <u>a lingering part of American life</u> for at least a year, if not much longer. If the current round of social-distancing measures works, the pandemic may ebb enough for things to return to a semblance of normalcy. Offices could fill and bars could bustle. Schools could reopen and friends could reunite. But as the status quo returns, so too will the virus. This doesn't mean that society must be on continuous lockdown until 2022. But "we need to be prepared to do multiple periods of social distancing," says Stephen Kissler of Harvard.

Much about the coming years, including the frequency, duration, and timing of social upheavals, depends on two properties of the virus, both of which are currently unknown. First: seasonality. Coronaviruses tend to be winter infections that wane or disappear in the summer. That may also be true for SARS-CoV-2, but seasonal variations might not sufficiently slow the virus when it has so many immunologically naive hosts to infect. "Much of the world is waiting anxiously to see what—if anything—the summer does to transmission in the Northern Hemisphere," says Maia Majumder of Harvard Medical School and Boston Children's Hospital.

Second: duration of immunity. When people are infected by the milder human coronaviruses that cause cold-like symptoms, they remain immune for less than a year. By contrast, the few who were infected by the original SARS virus, which was far more severe, stayed immune for much longer. Assuming that SARS-CoV-2 lies somewhere in the middle, people who recover from their encounters might be protected for a couple of years. To confirm that, scientists will need to develop accurate serological tests, which look for the antibodies that confer

immunity. They'll also need to confirm that such antibodies actually stop people from catching or spreading the virus. If so, immune citizens can return to work, care for the vulnerable, and anchor the economy during bouts of social distancing.

Scientists can use the periods between those bouts to develop antiviral drugs although such drugs are rarely panaceas, and come with possible side effects and the risk of resistance. Hospitals can stockpile the necessary supplies. Testing kits can be widely distributed to catch the virus's return as quickly as possible. There's no reason that the U.S. should let SARS-CoV-2 catch it unawares again, and thus no reason that social-distancing measures need to be deployed as broadly and heavy-handedly as they now must be. As <u>Aaron E. Carroll and Ashish Jha</u> <u>recently</u> wrote, "We can keep schools and businesses open as much as possible, closing them quickly when suppression fails, then opening them back up again once the infected are identified and isolated. Instead of playing defense, we could play more offense."

Whether through accumulating herd immunity or the long-awaited arrival of a vaccine, the virus will find spreading explosively more and more difficult. It's unlikely to disappear entirely. The vaccine may need to be updated as the virus changes, and people may need to get revaccinated on a regular basis, as they currently do for the flu. <u>Models suggest</u> that the virus might simmer around the world, triggering epidemics every few years or so. "But my hope and expectation is that the severity would decline, and there would be less societal upheaval," Kissler says. In this future, COVID-19 may become like the flu is today—a recurring scourge of winter. Perhaps it will eventually become so mundane that even though a vaccine exists, large swaths of Gen C won't bother getting it, forgetting how dramatically their world was molded by its absence.

III. The Aftermath

The cost of reaching that point, with as few deaths as possible, will be enormous. As my colleague <u>Annie Lowrey wrote</u>, the economy is experiencing a shock "more sudden and severe than anyone alive has ever experienced." About one in five people in the United States have <u>lost working hours or jobs</u>. Hotels are empty. Airlines are grounding flights. Restaurants and other small businesses are closing. Inequalities will widen: People with low incomes will be hardest-hit by social-distancing measures, and most likely to have the chronic health conditions that increase their risk of severe infections. Diseases have destabilized cities and societies many times over, "but it hasn't happened in this country in a very long time, or to quite the extent that we're seeing now," says Elena Conis, a historian of medicine at UC Berkeley. "We're far more urban and metropolitan. We have more people traveling great distances and living far from family and work."

After infections begin ebbing, a secondary pandemic of mental-health problems will follow. At a moment of profound dread and uncertainty, people are being cut off from soothing human contact. Hugs, handshakes, and other social rituals are now tinged with danger. People with anxiety or obsessive-compulsive disorder are struggling. Elderly people, who are already excluded from much of public life, are being asked to distance themselves even further, deepening their loneliness. Asian people are suffering racist insults, fueled by a president who insists on labeling the new coronavirus the "Chinese virus." Incidents of domestic violence and child abuse are likely to spike as people are forced to stay in unsafe homes. Children, whose bodies are mostly spared by the virus, may endure mental trauma that stays with them into adulthood.

[Read: The kids aren't all right]

After the pandemic, people who recover from COVID-19 might be shunned and stigmatized, as were survivors of Ebola, SARS, and HIV. Health-care workers will take time to heal: One to two years after SARS hit Toronto, <u>people who</u> dealt with the outbreak were still less productive and more likely to be experiencing burnout and post-traumatic stress. People who went through long bouts of quarantine will carry the scars of their experience. "My colleagues in Wuhan note that some people there now refuse to leave their homes and have developed agoraphobia," says Steven Taylor of the University of British Columbia, who wrote *The Psychology of Pandemics*.

But "there is also the potential for a much better world after we get through this trauma," says Richard Danzig of the Center for a New American Security. Already, communities are <u>finding new ways</u> of <u>coming together</u>, even as they

must stay apart. Attitudes to health may also change for the better. The rise of HIV and AIDS "completely changed sexual behavior among young people who were coming into sexual maturity at the height of the epidemic," Conis says. "The use of condoms became normalized. Testing for STDs became mainstream." Similarly, <u>washing your hands for 20 seconds</u>, a habit that has historically been hard to enshrine even in hospitals, "may be one of those behaviors that we become so accustomed to in the course of this outbreak that we don't think about them," Conis adds.

Pandemics can also <u>catalyze social change</u>. People, businesses, and institutions have been remarkably quick to adopt or call for practices that they might once have dragged their heels on, including <u>working from home</u>, conference-calling to accommodate people with disabilities, proper sick leave, and flexible child-care arrangements. "This is the first time in my lifetime that I've heard someone say, 'Oh, if you're sick, stay home,'" says Adia Benton, an anthropologist at Northwestern University. Perhaps the nation will learn that preparedness isn't just about masks, vaccines, and tests, but also about <u>fair labor policies</u> and a stable and equal health-care system. Perhaps it will appreciate that health-care workers and public-health specialists compose America's social immune system, and that this system has been suppressed.

Aspects of America's identity may need rethinking after COVID-19. <u>Many of the country's values have seemed to work against it</u> during the pandemic. Its individualism, exceptionalism, and tendency to equate doing whatever you want with an act of resistance meant that when it came time to save lives and stay indoors, some people <u>flocked to bars and clubs</u>. Having internalized years of anti-terrorism messaging following 9/11, Americans resolved to not live in fear. But SARS-CoV-2 has no interest in their terror, only their cells.

Years of isolationist rhetoric had consequences too. Citizens who saw China as a distant, different place, where bats are edible and authoritarianism is acceptable, failed to consider that they would be next or that they wouldn't be ready. (China's response to this crisis had its own problems, but that's for another time.) "People believed the rhetoric that containment would work," says Wendy Parmet, who studies law and public health at Northeastern University. "We keep *them* out, and we'll be okay. When you have a body politic that buys into these

ideas of isolationism and ethnonationalism, you're especially vulnerable when a pandemic hits."

[Graeme Wood: The 'Chinese virus' is a test. Don't fail it.]

Veterans of past epidemics have long warned that American society is trapped in a cycle of panic and neglect. After every crisis—anthrax, SARS, flu, Ebola attention is paid and investments are made. But after short periods of peacetime, memories fade and budgets dwindle. This trend transcends red and blue administrations. When a new normal sets in, the abnormal once again becomes unimaginable. But there is reason to think that COVID-19 might be a disaster that leads to more radical and lasting change.

The other major epidemics of recent decades either barely affected the U.S. (SARS, MERS, Ebola), were milder than expected (H1N1 flu in 2009), or were mostly limited to specific groups of people (Zika, HIV). The COVID-19 pandemic, by contrast, is affecting everyone directly, changing the nature of their everyday life. That distinguishes it not only from other diseases, but also from the other systemic challenges of our time. When an administration prevaricates on climate change, the effects won't be felt for years, and even then will be hard to parse. It's different when a president says that everyone can get a test, and one day later, everyone cannot. Pandemics are democratizing experiences. People whose privilege and power would normally shield them from a crisis are facing quarantines, testing positive, and losing loved ones. Senators are <u>falling sick</u>. The consequences of defunding public-health agencies, losing expertise, and stretching hospitals are no longer manifesting as angry opinion pieces, but as faltering lungs.

After 9/11, the world focused on counterterrorism. After COVID-19, attention may shift to public health. Expect to see a spike in funding for virology and vaccinology, a surge in students applying to public-health programs, and more domestic production of medical supplies. Expect pandemics to top the agenda at the United Nations General Assembly. Anthony Fauci is now a household name. "Regular people who think easily about what a policewoman or firefighter does finally get what an epidemiologist does," says Monica Schoch-Spana, a medical anthropologist at the Johns Hopkins Center for Health Security. Such changes, in themselves, might protect the world from the next inevitable disease. "The countries that had lived through SARS had a public consciousness about this that allowed them to leap into action," said Ron Klain, the former Ebola czar. "The most commonly uttered sentence in America at the moment is, 'I've never seen something like this before.' That wasn't a sentence anyone in Hong Kong uttered." For the U.S., and for the world, it's abundantly, viscerally clear what a pandemic can do.

The lessons that America draws from this experience are hard to predict, especially at a time when online algorithms and partisan broadcasters only serve news that <u>aligns with their audience's preconceptions</u>. Such dynamics will be pivotal in the coming months, says Ilan Goldenberg, a foreign-policy expert at the Center for a New American Security. "The transitions after World War II or 9/11 were not about a bunch of new ideas," he says. "The ideas are out there, but the debates will be more acute over the next few months because of the fluidity of the moment and willingness of the American public to accept big, massive changes."

One could easily conceive of a world in which most of the nation believes that America defeated COVID-19. Despite his many lapses, Trump's approval rating has surged. Imagine that he succeeds in diverting blame for the crisis to China, casting it as the villain and America as the resilient hero. During the second term of his presidency, the U.S. turns further inward and pulls out of NATO and other international alliances, builds actual and figurative walls, and disinvests in other nations. As Gen C grows up, foreign plagues replace communists and terrorists as the new generational threat.

One could also envisage a future in which America learns a different lesson. A <u>communal spirit</u>, ironically born through social distancing, causes people to turn outward, to neighbors both foreign and domestic. The election of November 2020 becomes a repudiation of "<u>America first</u>" politics. The nation pivots, as it did after World War II, from isolationism to international cooperation. Buoyed by steady investments and an influx of the brightest minds, the health-care workforce surges. Gen C kids write school essays about growing up to be epidemiologists. Public health becomes the centerpiece of foreign policy. The

U.S. leads a new global partnership focused on solving challenges like pandemics and climate change.

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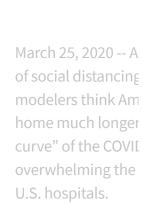
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the preprint server MedRxiv, found that one-

time social distancing -- by itself -- does very

infections to spike in the fall and winter, just

Instead, it found that the U.S. might need to

try "intermittent social distancing," where

periods of isolation are interspersed with

periods of normal interaction, for the next

year or more to keep from exceeding the

beds and equipment available to care for

little to reduce the burden on critical care beds and equipment. It might even cause

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Trump has said he would like to end national mitigation efforts against the infection in time for Easter services. At a press briefing Wednesday, he said there is ''virtually no problem or a very small problem'' in some areas of the country not hard hit by the pandemic. He suggested the re-opening would be rolled out, depending on how hardhit an area is.

But Yonatan Grad, MD, PhD, an assistant professor of immunology and infectious disease at the Harvard T.H. Chan School of Public Health, said even though it doesn't solve all problems, "social distancing is really the key thing that we can do right now."

"A too hasty retreat from social distancing risks a threat to our health care infrastructure, which itself carries huge economic consequences," he says.

Those comments were echoed on Wednesday by WHO officials who warned that countries that don't take recommended steps to control the virus could face a resurgence if they relax restrictions too soon.

"The last thing any country needs is to reopen schools and businesses only to have to close them again," said WHO Director-General Tedros Adhanom Ghebreyesus.

While a single burst of social distancing probably won't reduce the number of infections we eventually see in this country, study authors say it does buy time to get



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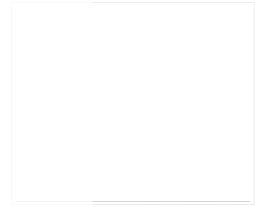
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recovered and might have immunity from the virus.

"Without having better testing data, we are in some ways flying blind," he says.

Grad says the U.S. should also double the critical care capacity of its hospitals -- adding more intensive care beds, buying more ventilators, and finding people who can run those machines. New York is currently pushing to make this happen.

"We don't want to end up in the same place as we have seen in Wuhan and Northern Italy where the bottleneck is the number of ventilators and staff," Grad says.

For their study, Grad and his team looked at different periods of social distancing in the U.S. -- everything from 1 to 5 months. They also modeled the strictness of those periods of isolation, trying to imagine social distancing strategies that cut the transmission of the virus by 20% to 60%.

In every scenario they ran -- even if the U.S. strictly isolated everyone for 5 months -social distancing proved to be only a very short-term fix. Eventually, the virus catches up, and the critical care capacity at U.S. hospitals is overwhelmed.

"The short, modestly successful social distancing interventions don't delay the peak by very much or diminish it very much," he says.

This is particularly true if the seasons play

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Infection. when restrictions on movement are lifted, those people are susceptible and once again mixing with others, and it creates a second wave of infection. Because infections spread more easily in the winter, when people spend more time together indoors, the Harvard study predicts that a fall or winter peak could be as high as, or even higher, than the one they expect to see this spring.

The only way not to overwhelm the critical care capacity of hospitals is to pump the brakes. That means periods of social distancing to spread cases out. In order for this to work, the U.S. would need to do periods of social distancing through at least the end of the year, and under some scenarios, through 2022. This strategy would also depend on having widespread testing so that experts could tell when cases were picking up again and order everyone back into isolation. Rules could be relaxed when space in critical care beds opens again.

If the U.S. doubles its ICU capacity, as New York is trying to do right now, these periods of isolation could stop by February 2021, the models show.

The amount of social distancing needed could also change if researchers develop an effective vaccine or find a drug that helps people recover more quickly or blunts the severity of the illness.

While the modeling shows this combination

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social distancing many times, as would be needed," Grad says.

Instead, he said, we should use the precious time we're buying to build up hospital capacity and testing, and train more people to do contact tracing, so that once enough testing is in place, public health departments can track the spread and isolate those who are infected and exposed. That's a labor intensive effort. Most states don't currently have enough testing or manpower to do it. But contact tracing breaks the chains of transmission so a country can get back to work.

WHO infectious disease epidemiologist Maria Van Kerkhove, PhD, says they are learning from other countries what works. China, for example, didn't lock down the entire country in its efforts to control the virus, but used very aggressive measures in areas like Wuhan where the epidemic started. As China is now relaxing restrictions, it is using a staggered approach instead of doing it all at once. China has not had a new case of local transmission in days, she says.

"These are things that work," Van Kerkhove says. "We know they are incredibly difficult." But countries that don't implement these measures may face an "endless cycle" of lockdown, she says. "We want to break that endless cycle."

Writer Kathleen Doheny contribtued to this

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EXHIBIT 25

Dunkin' Donuts Center Providence

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Boston Pride cancels 2020 parade and festival due to

the coronavirus

The celebration will return June 2021, organizers said.



 Tens of thousands participated in the annual Boston Pride Parade on Saturday, June 8, 2019. –*Craig F. Walker/Globe Staff*

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By **Kevin Slane**, Staff Writer April 7, 2020

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The latest on closures and cancellations at Mass. cultural institutions

Boston Pride, which had been set to commemorate its 50th anniversary this June, has canceled its annual parade and festival this year, postponing the 50th anniversary celebration until June 2021. The organization announced the decision in a joint press release with the City of Boston on Tuesday morning.

"I know this was a very hard decision to make and I know it's very hard news to hear, but it's the right decision. As we fight the coronavirus pandemic, everyone's safety and health is our top priority," Boston Mayor Marty Walsh said in the release. "To our LGBTQ community, we may not be able to celebrate Boston Pride 50th Anniversary this summer, but once we are able, we'll have the biggest and strongest Pride to date. The partnership between Boston Pride and the City of Boston has never been stronger, and I look forward to joining everyone to commemorate the many years of fighting for equality."

Boston Pride typically holds a number of events throughout June, highlighted by the Boston Pride Parade and Festival. The new date for the parade and festival is Saturday, June 12, 2021, at which point Boston Pride will commemorate its 50 years of working for social justice and human rights for the LGBTQ community, according to the release.

"Our foremost concern is for the health, safety, and wellbeing of the LGBTQ community and allies. We cannot afford to put anyone at risk," Boston Pride president Linda J. DeMarco said in the release. "There will be time to celebrate

the 50th anniversary of Boston Pride and recognize not only the struggles that our community has faced over the years, but also celebrate our strength and resiliency which we all need during this difficult time."

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EXHIBIT 27

U.S. Open Postponed to September at Winged Foot

APRIL 6, 2020 • LIBERTY CORNER, N.J. • BY JEFF ALTSTADTER, USGA



U.S. Open Postponement FAQs

D ue to the unprecedented nature of the COVID-19 pandemic and the continued uncertainty surrounding it, the 120th U.S. Open Championship, originally scheduled to be contested June 18-21 at Winged Foot Golf Club in Mamaroneck, N.Y., is being rescheduled to Sept. 17-20 at Winged Foot.

"We are hopeful that postponing the championship will offer us the opportunity to mitigate health and safety issues while still providing us with the best opportunity to conduct the U.S. Open this year," said Mike Davis, CEO of the USGA. "We are incredibly thankful to the membership and staff at Winged Foot for their flexibility and support. We are also grateful for the wonderful collaboration among the professional tours and other majors in working through a complicated schedule."

The USGA is currently evaluating how the postponement will affect exemption categories, and definitive changes will be communicated as soon as possible. As previously announced, the USGA will strive to conduct qualifying that fits health and safety guidelines while accommodating the rescheduled championship dates.

More information about the postponement can be found here.

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Rhode Island National Guard cancels 2020 air show

by NBC 10 NEWS Wednesday, March 25th 2020



The USAF Thunderbirds fly in formation. (WJAR)

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Air Show as it focuses on responding to the coronavirus pandemic.

The air show was expected to return this year after a hiatus in 2019 because of troop deployments.

Maj. Gen. Christopher Callahan said the air show was an opportunity to highlight the work of its service men and women for the public, but he said the National Guard has more pressing matters.

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66 "During this pandemic response, your Rhode Island National Guard has been mobilized to fight against the spread of the virus, training civilian medical personnel, staffing various call centers, distributing food and necessities to the most vulnerable, and performing a number of other critical functions. As such, our resources need to be acutely focused on the mitigation of the spread of this virus while remaining ready for our mission as the primary combat reserve of the Army and Air Force," Callahan said in a statement.

The air show was scheduled for June 20-21 at Quonset State Airport. The USAF Thunderbirds were scheduled to be the headliners.

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Why Jacob's Pillow Canceled A Season For The 1st Time In Its 88-Year History

By KARI NJIIRI (/PEOPLE/KARI-NJIIRI) • APR 3, 2020

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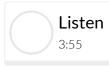
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Dancers with the National Dance Institute perform at Jacob's Pillow Dance Festival in 2008 in Becket, Massachusetts. ANGEL GARDNER / CREATIVE COMMONS / NATIONAL DANCE INSTITUTE / FLICKR.COM/PHOTOS/90613332@N02



Jacob's Pillow — the country's longest-running international dance festival — is the latest cultural casualty of the COVID-19 pandemic.

The festival, in Becket, Massachusetts, typically draws more than 100,000 visitors to the Berkshires every summer. But this week Jacob's Pillow announced it is canceling its upcoming season (https://www.jacobspillow.org/wp-content/uploads/2020/03/FINAL_-JPFestivalCancellation_3.31.20.pdf) for the first time in its 88-year history.

Pamela Tatge, executive and artistic director at Jacob's Pillow, said several factors prompted the decision.

Pamela Tatge, **Jacob's Pillow**: If you look at the trajectory of the virus in China — that's still not at the end of it — it's been five months since they first reported outbreaks, so that would take us through to the end of August.

Secondly, we are a festival that celebrates a form that's all about intimacy and touching, and requires rigorous rehearsal. And many of the companies that are preparing to perform at the festival — none of them are able to rehearse right now, except virtually.

Another factor is we serve an older demographic, the demographic that is squarely at risk during this outbreak. And we were having a hard time imagining when people would feel comfortable gathering again.

So for all of those factors, the safety of our staff, we took what we felt was the only responsible action.

Kari Njiiri, NEPR: What is the financial impact on on the Pillow? It runs not only the festival, but a school as well.

That's right. Fifty percent of our annual income comes from the festival and our gala and all of the related activities that generate revenue during the summer.

That, coupled with the losses in spring programming — we had to cut our budget in half. We went from an \$8 million organization to a \$4 million organization in just two weeks.

And the impact on staff?

We had to reduce our workforce by 40%. We reduced other positions to part-time positions. And everybody at the Pillow that remains will receive pay cuts ranging from 20 to 30%. We had to cancel all of our seasonal staff. That's more than 40 people.

And then our internationally renowned internship program had to be canceled as well. And that brings together 33 really talented young people from around the world. And that was just terrible news to have to deliver.

But most importantly, people's livelihoods, those that were laid off — those moments have been some of the worst of my professional life.

Beyond the impact at the Pillow, what is the economic impact to the local region?

Well, when you think about the numbers of hotels, restaurants, the vendors that provide the cafeteria services for the dancers and staff, the people that run a restaurant or cafe — all of the many vendors. The impact is really hard to quantify, but it's in the millions.

That's a major hit on the region.

It really is. And it's a hit on the spiritual health of our region as well, because of how Jacob's Pillow brings people together around a form that is all about possibility and agility and strength and imagination.

And to lose that for a community — for a group of tourists who flock to western Massachusetts every summer — we're so sorry that they won't have that experience. But you know, there will be 2021 to look forward to.

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WATCH LIVE: TODAY'S WHITE HOUSE CORONAVIRUS BRIEFING BREAKING: WATCH LIVE: TODAY'S WHITE HOUSE CORONAVIRUS BRIEFING

MUSEUMS

Museum of Fine Arts will remain closed, furlough staffers through June 30

By Murray Whyte Globe Staff, Updated April 3, 2020, 4:59 p.m.



Boston's Museum of Fine Arts will be closed through June 30. BLAKE NISSEN/THE BOSTON GLOBE

Boston's Museum of Fine Arts announced Friday that it would remain closed through June 30 due to the ongoing coronavirus crisis. There will be no layoffs despite significant financial losses, the MFA said. Instead the museum will be furloughing 340 staff members whose income can be maintained (at or near current levels) by a combination of unemployment insurance and government assistance to the museum through the Coronavirus Aid, Relief, and Economic Security Act.

"In making this decision, we struck a balance between work needs during closure and a calculation of how to keep all staff — for this period — as close to their original compensation as possible," said spokesperson Karen Frascona. She added that the museum will continue to carry health insurance for furloughed staffers.

As part of these cost-saving measures, museum director Matthew Teitelbaum will voluntarily reduce his salary by 30 percent over the same time span. According to the museum's 2018 tax return, the most recent available, Teitelbaum's salary was \$841,921.

Staff are expected to return to their jobs on July 1, the day currently pegged by the MFA for reopening. With a capricious pandemic yet to reach its height, Frascona conceded that the date could be revised depending on the arc of the crisis. Earlier this week, the museum announced it was canceling all ticketed programs and events through Aug. 31.

Murray Whyte can be reached at murray.whyte@globe.com. Follow him on Twitter @TheMurrayWhyte

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Democrats Postpone Convention, and a Test of Wills With Republicans Looms

The move is the biggest disruption to the political calendar so far because of the coronavirus, but could give Joe Biden, the likely presidential nominee, a lift heading into the fall.



By Reid J. Epstein, Katie Glueck and Jonathan Martin

April 2, 2020

WASHINGTON — The Democratic National Committee on Thursday postponed its presidential convention because of the coronavirus, moving it from mid-July to mid-August, and making it the largest political event to be upended by the public health crisis sweeping the country.

The convention will still be held in Milwaukee, as planned, the week of Aug. 17, officials said — a week before Republicans plan to gather in Charlotte, N.C., to renominate President Trump. The adjacent dates mean that both parties will be using expert health data from the same time frame to assess the safety of bringing together thousands of people at one event — and, ultimately, deciding whether the benefit of staging the conventions outweighs the medical risks.

The timing sets the stage for a high-stakes test of wills and judgment over the next four months between Mr. Trump and former Vice President Joseph R. Biden Jr., the likely Democratic nominee, as the public health crisis paralyzes the country through the summer. Neither will want to be the first to cancel his convention.

The decision to postpone the Democratic convention was made over the previous two days, officials involved in the planning said, but the issue was amplified Wednesday night by Mr. Biden, who called for rescheduling the convention during an appearance on "The Tonight Show."

Tom Perez, the chairman of the Democratic National Committee, said he did not consider moving the event to September, after the Republicans, and was averse to conducting a virtual convention that would be less likely to attract hours of television coverage.

"We're going to hold a very exciting and safe convention in Wisconsin to highlight our nominee and to make sure that people know the values of the Democratic Party and what we're fighting for," he said in a telephone interview.

Advisers to Mr. Biden and senior party leaders stressed Thursday that they remained flexible on the format and that they would be guided by the principle of safety first.

But campaign officials and other Democrats said Mr. Biden's team also wanted to preserve the prospect of a large, in-person convention whose pageantry and media coverage could provide a boost heading into the final months of the general election.

Mr. Trump has made clear his desire to proceed with plans for a celebratory convention that dominates the airwaves, and Republicans are determined to provide it. That resolve has in turn has put more pressure on Mr. Biden, who was already in need of ways to draw attention from a president with a fearsome bully pulpit. Democrats know that canceling one of their most prominent events could yield a significant advantage Mr. Trump just two months before the election.

Presidential challengers always prize three moments of dayslong publicity — with their vice-presidential selection, their conventions and in the fall debates. That sustained coverage is all the more important now that the virus is likely to keep Mr. Biden off the campaign trail for much of the spring and may substantially condense the general election period.

Latest Updates: Coronavirus Outbreak in the U.S.

- In New York, where there were a record number of deaths, 'the bad news is actually terrible.'
- The virus might not fade in warm weather, the National Academy of Sciences warns.
- Union for food workers asks C.D.C. to issue "mandatory" guidance to protect its members.

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"There are things you can do online, but there is something about the communal spirit that is important and people feed off of," said David Axelrod, a senior official in Barack Obama's presidential campaigns. "From a television standpoint it's hard to have the same impact if you're cobbling together a series of remotes."

Though an in-person convention would provide Mr. Biden a nationally televised boost, the later date carries potential downsides. In addition to potentially keeping Mr. Biden out of the spotlight for an extended period of time, it could complicate his timing on when to announce his vice-presidential choice. And it delays for a month his ability to access funds earmarked for the general election.

Concerns over the virus have already led to the cancellation of hundreds of state and local conventions from both parties. Moving the national convention back a month is an acknowledgment that the outlook for holding an inperson gathering in July — with some 4,500 delegates, and tens of thousands of others who convene on the convention city — was not feasible.

"We welcome the D.N.C.'s decision today to prioritize the health and safety of delegates and the greater Milwaukee community by postponing the Democratic National Convention until August," said Bill Russo, a campaign spokesman, adding that the campaign would continue to work closely with state parties and the D.N.C. "on any changes to the delegate selection process and the format of the convention."

But there is no guarantee that the crisis will be over by August, and travel could still be difficult or even dangerous for some. One of Mr. Biden's strongest constituencies is older Americans, the population most vulnerable to the virus, and the lingering effects of the outbreak could still have an effect on which delegates are able to travel.

Dr. Irwin Redlener, a clinical professor at Columbia University's Mailman School of Public Health, said he was deeply skeptical of a summer convention.

"It is unreasonably optimistic to think that a traditional presidential political convention can happen in the summer of 2020, there's so much we don't understand about this," said Dr. Redlener, who is also the director of the National Center for Disaster Preparedness. He said that gathering large numbers of people together "is counter to every reasonable public health guideline during the pandemic."

Dr. Redlener was named to Mr. Biden's public health advisory committee last month, but said he had since stepped aside because of a professional conflict.

Even though other major events scheduled for July had been canceled or postponed, planners had hoped to delay a decision on whether to move the Democratic convention for several more weeks. Mr. Perez told donors as recently as this week that the party had no plans to change the dates, according to people familiar with the conversations.

But Mr. Biden has been receiving extensive briefings from other members of his public health advisory committee. And his remarks on back-to-back nights expressing concern about a July gathering added force to the movement to push it into August.

On Tuesday he said during an interview with MSNBC that it was "hard to envision" the convention taking place as scheduled. The next day he was more forceful, telling the host of "The Tonight Show," Jimmy Fallon, "I think it's going to have to move into August."

"That was all he needed to do," said Leah Daughtry, who was the chief executive of the 2008 and 2016 Democratic conventions. "When the person who's the front-runner, and who most people consider to be the person who's going to get the nomination, expresses that strong an opinion, I think everybody has to pay attention."

An August convention is likely to be smaller than the planned July event. One senior Democratic official said the event would probably be a "bare minimum" convention, with scores of people who had planned to come staying away either because of health concerns or because they had other plans for mid-August.

Changing the date of the convention will be a daunting logistical feat, requiring the rebooking of thousands of hotel rooms, among other difficulties.

The venue in Milwaukee, the Fiserv Forum, and a nearby convention center are both available the week of Aug. 17, but they are booked the week before with the annual convention of the insurer Northwestern Mutual.

"This is the right decision for the safety of those involved in the convention and for Milwaukee," said Alex Lasry, a senior official with the Milwaukee Bucks who led the city's convention bid. "An August convention will provide a much-needed economic boost for Milwaukee and Wisconsin as we come out of this unprecedented time."

While Mr. Biden has a nearly insurmountable delegate lead over Senator Bernie Sanders, his last remaining rival for the Democratic presidential nomination, he cannot take formal control over convention planning until he clinches the nomination or Mr. Sanders drops out of the race.

Still, he and his team are in the early stages of the search for a potential running mate. The delayed convention could offer more time for the background check process. But some Democrats advised that there were good reasons to announce a vice-presidential pick before the convention.

"I probably would do sooner," Ms. Daughtry said. She pointed to June, when a host of states are slated to hold rescheduled nominating contests, as a promising moment to announce a choice.

"Folks who want to get energized again, want to turn attention elsewhere, would be energized by a dynamic ticket," she said. "That's one reason to do it before these next round of states vote."

Democratic officials, including Mr. Perez, had hoped and predicted that the party would have a nominee by late April, but with so many states postponing their primaries because of public health concerns about the coronavirus, Mr. Biden cannot clinch the nomination until June at the earliest if Mr. Sanders remains in the race.

In a brief virtual news conference on Thursday, Mr. Biden was asked whether he believed the Wisconsin primary should go forward in person next week, given news that the convention would be delayed.

"I listen to the scientists," Mr. Biden said via video. "A convention, having tens of thousands of people in one arena, is very different than having people walk into a polling booth with accurate spacing, to — six to 10 feet apart, one at a time, going in and having the machines scrubbed down."

The Coronavirus Outbreak >

Frequently Asked Questions and Advice

Updated April 4, 2020

Should I wear a mask?

The C.D.C. has recommended that all Americans wear cloth masks if they go out in public. This is a shift in federal guidance reflecting new concerns that the coronavirus is being spread by infected people who have no symptoms. Until now, the C.D.C., like the W.H.O., has advised that ordinary people don't need to wear masks unless they are sick and coughing. Part of the reason was to preserve medical-grade masks for health care workers who desperately need them at a time when they are in continuously short supply. Masks don't replace hand washing and social distancing.

• What should I do if I feel sick?

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EXHIBIT 32

EMERGENCY ALERTS

Coronavirus Update

Stay informed about coronavirus - COVID-19. Learn more. Apr. 8th, 2020, 4:55 pm Read more 🔊

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Massachusetts Bar Exam Results

Massachusetts posts the names of all who passed the written portion of the bar exam and provides the statistics of the Massachusetts law schools.

Before reporting to the Supreme Judicial Court of the Commonwealth of Massachusetts on the character, acquirements and qualifications of the petitioners, the Board of Bar Examiners must give public notice of those persons that have passed the law examination held on July 30th and 31st, 2019. If no objection is made, they may be recommended to the Supreme Judicial Court for admission.

Massachusetts statistics for the bar exam are included below.

The Board of Bar Examiners has posted the names of examinees who passed the July 2019 are listed on the Massachusetts Bar Exam Pass List

(/info-details/massachusetts-bar-exam-pass-list).

July 2019 Statistics: A total of 1,377 examinees sat for the July 2019 bar examination, of whom 985 (71.5%) passed. There were 1151 first time takers, of whom 939 (81.6%) passed

the exam. The statistics are as follows:

Examinees Taking Exam in Massachusetts	Number Taking	Number Passing	Percentage Passing
First time	1151	939	81.6%
Second Time	60	23	38.3%
Third Time	77	16	20.8%
Fourth Time	32	1	3.1%
Fifth Time or more	57	6	11.0%
TOTAL ALL EXAMINEES	1377	985	71.5%

A summary of statistics by Law School can be downloaded from the link below.

Additional Resources

Massachusetts Bar Exam Pass List (/info-details/massachusetts-bar-exam-pass-list)

July 2019 Bar Exam Statistics

(https://www.mass.gov/doc/july-2019-bar-exam-statistics/download) (PDF 29.21 KB)

Board of Bar Examiners

Address

John Adams Courthouse

One Pemberton Square, Suite 5-140, Boston, MA 02108

Directions

(https://maps.google.com/?q=One+Pemberton+Square%2C+Suite+5-140%2C+Boston%2C+MA+02108)

Phone

Main: (617) 482-4466 (tel:6174824466) Office hours are 8:30am-4:30pm M-F.

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Formal Admission to the Massachusetts Bar (/service-details/formal-admission-to-the-massachusetts-bar)

Posting names of applicants passing the July 2018 bar exam (/service-details/notice-of-petitioners-pending-admission-to-the-bar-of-massachusetts)

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EXHIBIT 33

EMERGENCY ALERTS

Coronavirus Update

Stay informed about coronavirus - COVID-19. Learn more. Apr. 8th, 2020, 4:55 pm Read more >

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PRESS RELEASE

Massachusetts Bar Examination Postponed

FOR IMMEDIATE RELEASE:

3/30/2020

Massachusetts Supreme Judicial Court

Massachusetts Court System

Massachusetts Board of Bar Examiners

MEDIA CONTACT

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(617) 557 - 1114 (tel:6175571114)

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BOSTON, MA – The Supreme Judicial Court and the Board of Bar Examiners today announced that, due to the ongoing public health emergency arising from the COVID-19 pandemic, the Massachusetts bar examination will not be administered on July 28 and July 29, 2020 as previously scheduled. The bar exam has been postponed until fall, on dates to be determined.

The Board of Bar Examiners, in consultation with the Supreme Judicial Court, will continue to closely monitor public health and safety guidelines, including prohibitions against large gatherings, related to the COVID-19 pandemic. In the event that limitations on large gatherings continue to interfere with a fall administration of the Massachusetts bar examination, alternative means for testing of applicants for Massachusetts bar admission will be devised and announced.

The Massachusetts Board of Bar Examiners (BBE) is established by G.L. c. 221 §§35 & 36 to evaluate the qualifications of persons seeking admission to the bar of the Commonwealth of Massachusetts.

###

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Massachusetts Supreme Judicial Court

(/orgs/massachusetts-supreme-judicial-court)

The Supreme Judicial Court is the Commonwealth's highest appellate court.

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Massachusetts Court System (/orgs/massachusetts-court-system)

The Massachusetts court system consists of the Supreme Judicial Court, the Appeals Court, the Executive Office of the Trial Court, the 7 Trial Court departments, the Massachusetts Probation Service, and the Office of Jury Commissioner.

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Massachusetts Board of Bar Examiners

(/orgs/massachusetts-board-of-bar-examiners)

A Message from the Massachusetts Board of Bar Examiners

The impact of the ongoing COVID-19 crisis on the Massachusetts administration of the July 2020 Uniform Bar Examination is not certain at this time. The Board of Bar Examiners is in close contact with the National Conference of Bar Examiners and other jurisdictions as we all consider possible options for the July exam in the event that bar admission office closures or prohibitions against large gatherings remain in effect. Please continue to monitor the Board of Bar Examiners website (www.mass.gov/bbe) and Facebook page for updated information. The Office of the Clerk of the Supreme Judicial Court for the County of Suffolk continues to accept, by mail, Petitions for Admission by Examination to the Massachusetts Bar. Information regarding Admission Petition filing requirements, including signature requirements, may be found at www.mass.gov/attorney-services. Questions may also be directed to the Clerk's Office at (617) 557-1050.

We thank you for your patience and understanding.

Sincerely,

Marilyn J. Wellington, Executive Director

Robert L. Harris, Chair

Marie Buckley, Bar Examiner

Barbara Healy Smith, Bar Examiner

Carol A. Kelly, Bar Examiner

Francis J. O'Connor, Bar Examiner

The Massachusetts Board of Bar Examiners (BBE) is established by G.L. c. 221 §§35 & 36 to evaluate the qualifications of persons seeking admission to the bar of the Commonwealth of Massachusetts.

More (/orgs/massachusetts-board-of-bar-examiners)

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EXHIBIT 34



New dates set for postponed July bar exam

∎ By: Mass. Lawyers Weekly Staff ⊙ April 4, 2020

The Supreme Judicial Court and the Board of Bar Examiners on April 4 announced that new dates have been set for the postponed July 2020 bar examination, which now will be held on Wednesday, Sept. 30, and Thursday, Oct. 1, in Boston.

The BBE said it would continue, in consultation with the SJC, to closely monitor public health and safety guidelines, including prohibitions against large gatherings, related to the COVID-19 pandemic. In the event that limitations on large gatherings continue to interfere with the administration of the bar examination on the rescheduled dates, alternative means for testing of applicants for Massachusetts bar admission will be devised and announced.

Issue: APRIL 13 2020 ISSUE

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The New York State Board of Law Examiners

Operating under the auspices of the New York State Court of Appeals, the New York State Board of Law Examiners is responsible for administering the bar examination to candidates seeking admission to practice law in the State of New York.

The Board has been in existence for over a hundred years, having been created by the New York State Legislature in 1894.

Its five members are attorneys appointed by the Court of Appeals. The Board maintains a business office in Albany, New York with a full-time staff that oversees the bar examination.

The bar examination is administered twice per year, on the last Tuesday and Wednesday of February and July.

In 2019, the Board processed 15,736 applications for the bar examination and examined 14,200 applicants.

NOTICES:

NEW April 6, 2020

COVID~19. UPDATE

The Board's office is closed until further notice as a result of the

ongoing COVID-19 crisis. Staff members are not presently available to answer phone calls. However, the Board continues to closely monitor the situation. The health and safety of applicants, our staff and the proctors who administer the bar exam are of paramount importance to the Board.

Updated information will be posted on this website as it is available.

JULY 2020 BAR EXAM: The New York Court of Appeals announced on March 27, 2020 that the New York State Bar Examiation will not be administered on July 28-29, 2020 as previously scheduledClick <u>here</u> to read the press release from the Court of Appeals.

The examination will be rescheduled to WEDNESDAY-THURSDAY. SEPTEMBER 9-10. 2020. The application period for the rescheduled examination is presently scheduled to open on May 5, 2020 at 12:00 AM and to close on May 30, 2020 at 11:59 PM.

Additional information regarding the impact of COVID-19 on the July 2020 bar exam is available on NCBE's website at: <u>http://www.ncbex.org/ncbe-covid-19-updates/.</u>

FEBRUARY 2020 BAR EXAM: The grading of the February 2020 UBE is progressing despite the crisis. However, due to the closure of the Board's office, the release of the February 2020 UBE results may be delayed beyond the usual time period (that is, on or before May 1st). All candidates who sat for the February 2020 UBE should monitor their emails and this website for any updated information.

JUNE 2020 NEW YORK LAW EXAM: The New York Law Exam scheduled for June 11, 2020 will proceed as scheduled. The Board is able to process and respond to timely applications and re-applications for test accommodations on the June 2020 NYLE, as well as appeal petitions from applicants denied test accommodations. See below for additional information.

Please continue to monitor this website for updated information.

(1) FEBRUARY 2020 BAR EXAM

The bar examination was administered on February 25-26, 2020 to 3563 candidates. Candidates are reminded that, if their residence address or email address should change, they must update their address by signing into the Applicant Services Portal. As noted above, the grading of the February exam is progressing, however, the release of results may be delayed. Candidates should monitor their emails and this website for any updated information.

(2) JULY 2020 BAR EXAM

As noted above, the New York State Bar Examination will not be administered in July 2020. The examination will be rescheduled to WEDNESDAY-THURSDAY, SEPTEMBER 9-10, 2020. The application period for the rescheduled examination is presently scheduled to open on May 5, 2020 at 12:00 AM and to close on May 30, 2020 at 11:59 PM.

Applicants who will be seeking test accommodations for this exam are encouraged to submit their application/re-application and all supporting documentation as soon as possible as the deadline will not be extended.



(3) NEW YORK LAW EXAM

The next administration of the NYLE is on June 11, 2020 at 12:00 pm Eastern. This exam will proceed as scheduled. The deadline to complete the New York Law Course and register for the June NYLE is May 12, 2020. Applicants who timely register with the Board to take the NYLE must also timely purchase, download and register the software with Examsoft. Examsoft will email applicants a few weeks before the date of the NYLE with all pertinent details and deadlines. Click <u>here</u> for future dates of the NYLE. Applicants experiencing any trouble watching the NYLC may send a faxed letter to the Board until regular staffing of the office resumes.

(4) REPORT OF THE IMPACT OF THE UNIFORM BAR EXAMINATION IN NEW YORK

The New York Court of Appeals announced on August 20, 2019 the release of the Study of the Impact of Adoption of the Uniform Bar Examination in New York. Click <u>here</u> to access the Press Release, Executive Summary, the Report and the Appendices.

(5) NOTICE TO CANDIDATES WHO HAVE PREVIOUSLY WITHDRAWN OR FAILED TO APPEAR FOR THE BAR EXAM

Effective with the July 2020 bar exam, candidates who have previously withdrawn from or failed to appear for the bar exam more than two times will no longer be required to automatically petition the Board for permission to sit for the bar exam. Candidates with multiple withdrawals may apply and sit for the July 2020 or a subsequent exam, without first petitioning the Board. However, if the candidate withdraws or fails to appear, the Board may then, in its discretion, require the candidate to petition the Board before applying for a subsequent exam. See Board Rule 6000.9(b)(3) and the Bar Exam Information Guide.

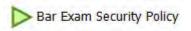
(6) NEW POLICY ON SEAT ASSIGNMENTS FOR BAR EXAM

The Board has changed its policy concerning Test Center assignments. Seating is no longer based on the applicant's residential address as provided by the applicant on the bar exam application. Test Center assignments will be based on availability and on a first come, first-served basis at the time of the Board's seating assignment email. No applicant is guaranteed a seat in any particular city or test center, even if the applicant lives or attended law school in that city. The Board's seating assignment email is sent out after the application period closes (usually in early June for a July exam and early January for a February exam) and instructs applicants to select a test location from the list of available locations in the email. Only locations with available seats will be listed in the email. First-time applicants who graduate with a Juris Doctor degree from a New York State law school will be given the first opportunity to select a location.

(7) DEADLINE TO SUBMIT SUPPORTING FOREIGN DOCUMENTATION FOR REVIEW:

- July Bar Exam To meet the six month deadline for review of your documents, you must submit your Foreign Evaluation Form and supporting foreign documentation no later than October 1st of the year preceding the exam you plan to sit.
- February Exam –To meet the six month deadline for review of your documents, you must submit your Foreign Evaluation Form and supporting documentation no later than May 1st of the year preceding the exam you plan to sit.

LLM applicants who fail to meet these deadlines run the risk that they may not receive a decision from the Board on their eligibility in time to take the exam, causing the application to be denied and the application fee to be forfeited.





ANOTHER 6.6 MILLION AMERICANS SEEK UNEMPLOYMENT AID

SPORTS LOG

President Trump says NFL season should stay on schedule

President expressed hope during a conference call Saturday with major US sports executives and commissioners.

By Associated Press Associated Press, Updated April 4, 2020, 6:04 p.m.



President Donald Trump held a conference call with US sports executives and commissioners and predicted that the NFL season would start on schedule in September. JIM WATSON/AFP VIA GETTY IMAGES

Since it with tota commissioners of the Co pro sports reagaes on suturally ne thinks the NFL should stay on schedule and kick off in September, according to ESPN. Leaders from the four major pro sports leagues - the NBA's Adam Silver, MLB's Rob **Manfred**, the NFL's **Roger Goodell**, and the NHL's **Gary Bettman** – along with executives from the WNBA, MLS, PGA Tour, LPGA Tour, IndyCar, Breeders Cup, and WWE, according to a White House pool report. Trump told the commissioners he "hopes to have fans back in stadiums and arenas by August and September," according to ESPN. The NBA shut down March 11, right after it was announced that Utah Jazz player Rudy Gobert tested positive for the virus. It was the first pro league in North America to stop playing games. Silver, the NBA's commissioner, told Trump on the call that the NBA would "love to lead the way" in restarting games, but that an " 'all clear' from public health officials" had to come first, according to ESPN. The NHL, the only other major pro league playing games in March, shut down soon after the NBA. Following the NBA and NHL's decisions, Major League Baseball closed down spring training and sent players home. The NFL has altered its offseason plans, including shifting the draft scheduled to begin April 23 to a virtual format, but has kept most of its league schedule intact. In a message posted on Twitter, President Trump also reassured Little League baseball players they would be playing the game again soon. "To all of our youth who are missing the start of their @LittleLeague seasons, hang in there! We will get you back out on the fields, and know that you will be playing baseball soon," the president tweeted.

Coronavirus

Astros' Verlander to donate weekly pay

Houston Astros ace **Justin Verlander** says he will donate his weekly paycheck during the coronavirus shutdown to organizations that are helping with relief efforts. Verlander and wife **Kate Upton** made the announcement in an Instagram post. The couple said it would pick an organization each week and highlight its work. The AL Cy Young Award winner is among a group of major leaguers getting \$4,775 a day for 60 days, a total of \$286,500. Verlander's salary this year is \$33 million, which is \$177,419 a day for the 186Baseball and the players' union on how to proceed during the stoppage . . . Potters Corner held on in a computer-simulated race to win the Virtual Grand National. The real Grand National Steeplechase, one of the iconic sporting events in Britain, was canceled on March 16 following the stringent measures put in place during the coronavirus pandemic. The 18-1 Potters Corner, trained by **Christian Williams** with teenager **Jack Tudor** onboard, withstood the challenge of runner-up Walk In The Mill and third-place Any Second Now. Favorite Tiger Roll, who would have been chasing a third straight win in the real race, was fourth in the event broadcast on British television.

Soccer

FIFA extends age limit for Olympics

FIFA has extended the age limit for the men's soccer tournament at next year's Tokyo Olympics, ensuring players who would have been able to compete in the 2020 Games retain their eligibility in 2021. The criteria for the rescheduled Tokyo Games remains the same: All players born on or after Jan. 1, 1997 will have the opportunity to suit up for their countries, essentially turning what has been under-23 tournament since 1992 into an under-24 event. Should the US qualify a men's team for the first time since 2008, its biggest star will be eligible to play. Christian Pulisic – as is the case with another surefire Olympic draw, France's Kylian Mbappe – was born in 1998 and would have been under the age limit anyway. As always, each of the 16 teams in the field may also select three players over the age limit for their rosters. There is no age limit for the women's tournament. FIFA also confirmed no international games for men or women will be played in June. A pair of women's World Cup tournaments - the under-20 World Cup set for Central America in August and September and the under-17 World Cup scheduled to be played in India in November – were also postponed. For the Tokyo Games, 14 of 16 nations have already secured their spots: Argentina, Australia, Brazil, Egypt, France, Germany, Ivory Coast, New Zealand, Japan, Romania, Saudi Arabia, Spain, South Africa and South Korea will compete. The final two spots in the field will be

filled by CONCACAF nations which is the only federation yet to complete its Olympic

qualifying tournament . . . Stephen Kenny was named the new Ireland soccer manager after replacing **Mick McCarthy** in a planned move brought forward by the coronavirus pandemic. McCarthy had originally been due to stay in charge until July 31, after the Euro 2020 finals – now put back a year – were originally due to finish. Kenny had been set to take over on Aug. 1 after being in charge of the under-21 national side ... Tajikistan has started a new soccer season, joining a small group of countries around the world where play has continued despite the coronavirus pandemic. Istiklol Dushanbe retained the Central Asian nation's season-opening Super Cup with a come-from-behind 2-1 win over Khujand. The game was played without fans and a large banner reading "stop coronavirus" in Tajik and Russian covered part of the stands. Tajikistan has not reported any cases of the new coronavirus, according to a tally by Johns Hopkins University ... Rafael Callejas, the former president of Honduras who was convicted in a FIFA soccer bribery scandal, has died. Callejas, who governed Honduras from 1990 to 1994, pleaded guilty in 2016 to soliciting hundreds of thousands of dollars in bribes in the wide-ranging FIFA soccer scandal over lucrative broadcast rights. He died while he was being held in prison in Atlanta. No cause of death of was given but he reportedly suffered from leukemia. He was 76.

contention indicates, which is the only rederation yet to complete its orympic

Miscellany

McLaughlin wins virtual Indy race

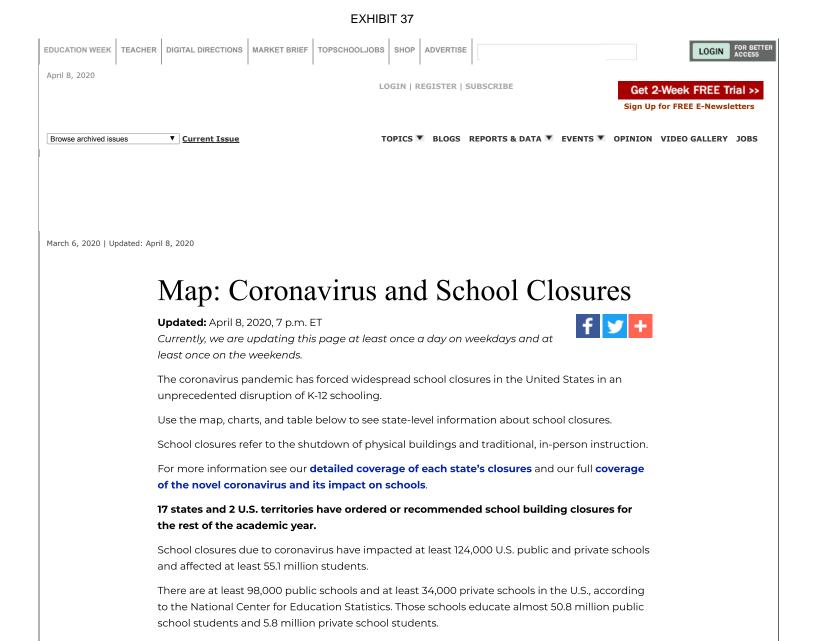
Scott McLaughlin, whose real IndyCar debut is on hold because of the coronavirus pandemic, didn't let that stop him from learning how to virtually drive open-wheeled race cars. The Australian V8 SuperCars champion, who drives for legendary car owner **Roger Penske** in Australia, won IndyCar's virtual race from virtual Barber Motorsports Park in Alabama, the second race in the series' attempt to create content during the worldwide shutdown of sports. Penske had planned to give McLaughlin his series debut in May on the road course at Indianapolis Motor Speedway, but the plan was scrapped when the IndyCar season was suspended last month. McLaughlin, like NASCAR's seven-

time champion .Iimmie .Iohnson who finished 19th was as an invited guest hv

IndyCar in the iRacing Series, but had to wake up at 2 a.m. in Brisbane, Australia, to compete on his simulator. It was 6 a.m. at McLaughlin's house when he virtually crossed the finish line. He beat Team Penske driver **Will Power**, a fellow Australian who was racing from his home in North Carolina, **Scott Speed** and IndyCar rookie **Alex Palou**, racing on a simulator in Spain. NBC Sports aired the race on its cable channel with its usual broadcast crew of **Leigh Diffey**, **Townsend Bell** and **Paul Tracy** all calling action from their respective homes.

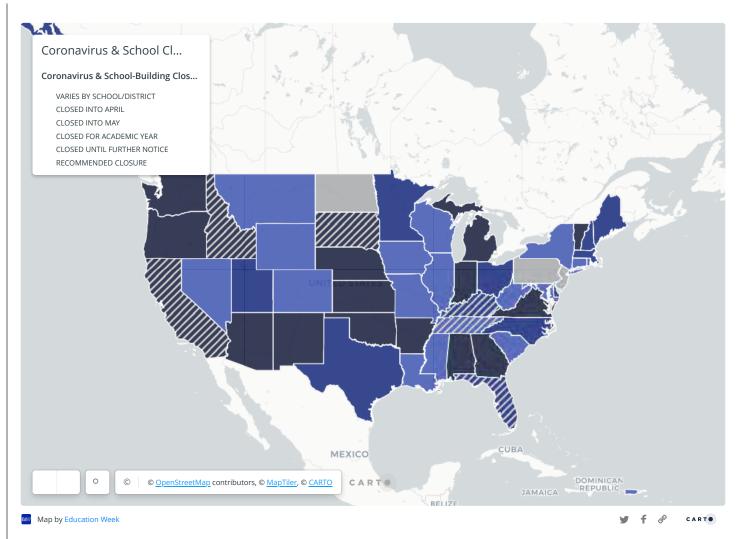
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State-by-State Map of School-Building Closures

Zoom in to see the status of individual states. Click a state to view more details.



Sources: Local news reporting; National Center for Education Statistics; school/district websites; government websites | Click here to view enlarged map.

Where School Buildings Are Closed and How Long They'll Be Shut Down

See how long schools are expected to be closed because of the coronavirus.

State Data

Explore the table below for detailed information about closures at the state level.

Download the Current Data

Download the Historical Data

Note: Historical data includes school- and district-level data collected from 3/9/2020 to 3/25/2020.

Corrections will be made as we learn of them, and will be included in the next update.

Education Week would like to know how you are using our map of school building closures and reopening timelines. Please share how this information is helping you by emailing **library@epe.org**.

Related

- Millions Will Be Out of School for Weeks Due to Coronavirus. It May Not Be Long Enough
 - If Coronavirus Closes School, Who Gets Paid and How?
 - Long School Closures Could Cost U.S. Billions, Cut Health-Care Capacity

Contact Information

For media or research inquiries about this map and data, contact **library@epe.org**. To contribute data or information, use the comments below.

How to Cite This Map

Map: Coronavirus and School Closures (2020, March 6). Education Week. Retrieved Month Day, Year from https://www.edweek.org/ew/section/multimedia/map-coronavirus-and-schoolclosures.html

Data Note

All numbers for student enrollment and schools are from the National Center for Education Statistics. Total U.S. public and private school enrollments reflect NCES' 2019 projections. Student enrollments in the state-level table and map are NCES' Fall 2016 data for public schools and Fall 2017 data for private schools. Numbers of schools in the state-level table and map are NCES' data for 2016-17 for public schools and Fall 2017 for private schools. In each case, we're using the latest NCES data that's available. School and enrollment numbers for the Department of Defense Education Activity were provided by the agency and are from 2020.

Reporting/Analysis: Holly Peele & Maya Riser-Kositsky, with contributions from Education Week staff

Design/Visualization: Hyon-Young Kim, with contributions from Education Week staff

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Thomas Bean

From: Anne Colasanto <acolasan@risd.edu>
Sent: Monday, April 06, 2020 10:35 AM
To: Steven Ransom <<u>SRansom@uua.org</u>>
Subject: RISD Summer Programming

Hi Steve,

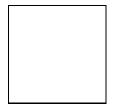
I hope you and your family are all well in these unprecedented times. I'm sad to be writing this note. Given the uncertain projections for when COVID-19 will slow, RISD has decided the most responsible course of action for summer is to not hold any programming on campus. As a result, we will not be able to provide accommodations for the UUA program. To be clear, we will not be hosting any student, or external guests, on campus for the duration of the summer. This was a huge decision that we did not take lightly. It was in the interest of the health, safety, and well-being of students, staff, instructors, and guests that we came to this conclusion. I know I share in your disappointment at this decision.

As an alternative, I have been in touch with Brown University. They are making decisions on their summer programming by 4/15. Should they be open and have space available, I would be happy to connect you with them.

I am happy to jump on a call to discuss further. We will be issuing a full refund for your deposit. I hope that should UUA return again to Providence in 2024, we would be able to work together. Stay safe and be well.

Anne Colasanto, CMP Director of Campus Conferences and Events

Rhode Island School of Design 2 College Street Providence, Rhode Island 02903 phone: 401-454-6369 email: acolasan@risd.edu





Coronavirus Disease 2019 (COVID-19)

Public Health Recommendations after Travel-Associated COVID-19 Exposure

CDC has separate guidance for exposures in healthcare settings, and U.S. communities. See also Guidance for essential workers 🖸 .

Summary of changes

On March 30, 2020

1. Separated guidance for travel-associated exposures and community-related exposures.

Background

The epidemic of respiratory illness (COVID-19) caused by novel coronavirus (SARS-CoV-2) is spreading in all regions internationally as well as in many communities in the United States. As part of a strategy aimed to limit continued COVID-19 seeding of US communities, the US government has recommended that travelers stay home voluntarily for 14 days after traveling from countries with widespread ongoing transmission or on cruise ships or river cruises.

Recommended Public Health Management

CDC's recommendations for travel-associated exposures are provided below. Individuals should always follow guidance of the state and local authorities for the area where they are located.

International and Cruise Travelers

Exposure

- Travel from a country with widespread ongoing transmission¹
- Travel on cruise ship or river boat

Recommended Precautions

- Stay home until 14 days after arrival and maintain a distance of at least 6 feet (2 meters) from others²
- Self-monitor for symptoms
 - Check temperature twice a day
 - Watch for fever³, cough, shortness of breath

- Travel from a country with ongoing community transmission
- Avoid contact with people at higher risk for severe illness (unless they live in the same home and had same exposure)
- Follow CDC guidance if symptoms develop
- Practice social distancing
 - Maintain a distance of at least 6 feet (2 meters) from others
 - Stay out of crowded places
- Be alert for symptoms
 - Watch for fever³, cough, shortness of breath
 - Take temperature if symptoms develop

• Follow CDC guidance if symptoms develop

¹As of March 27, 2020, this includes all countries.

²See below for guidance on air crews. Guidance for other essential workers can be found here: https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce 🖸 .

³For the purpose of this guidance, fever is defined as subjective fever (feeling feverish) or a measured temperature of 100.4°F (38°C) or higher. Note that fever may be intermittent or may not be present in some people, such as those who are elderly, immunosuppressed, or taking certain medications (e.g., NSAIDs).

Crews on Passenger or Cargo Flights

CDC and the Federal Aviation Administration have jointly provided interim health guidance for air carriers and crews Image: CDC and the Federal Aviation Administration have jointly provided interim health guidance for air carriers and crews Image: CDC guidance includes recommendations for air crews to self-monitor under the supervision of their employer's occupational health program and to remain in their hotel rooms and practice social distancing while on overnight layovers in the United States (applies to US-based crews and crews based in other countries) or internationally (applies to US-based crews). These recommendations were made because SARS-CoV-2 is spreading in all regions internationally as well as in the United States. Also, the rapidly changing situation means country-level geographic risk assessments cannot be relied on to accurately judge the risk to crewmembers in any given location. As long as they remain asymptomatic, crew members may continue to work on flights into, within, or departing from the United States. Crew members who follow their carrier's occupational health plan as well as the FAA-CDC guidance are not subject to restrictions applied to other travelers. If they develop fever, cough, or difficulty breathing, crew members should self-isolate and be excluded from work on commercial flights immediately, and remain excluded until cleared to work by their occupational health program and public health authorities.

Regardless of residence or travel history, crew members who have known exposure to persons with COVID-19 should be assessed and managed on a case-by-case basis.

Page last reviewed: March 30, 2020

Thomas Bean

From: Kathleen Ceseretti <<u>kceseretti@goprovidence.com</u>>
Sent: Monday, April 6, 2020 1:36 PM
To: LaTonya Richardson <<u>LRichardson@uua.org</u>>
Subject: Re: Providence

HI LaTonya

If there had been any possibility of moving this event to a date in 2020, we would have been THRILLED to do so! Unfortunately, there are no dates available.

I have been in touch with The Dunkin Donuts Center. They have a conflict for Monday, June 24.2024. Could your contract with them be modified for Tuesday, June 25-Monday, July 1? Ideally they would like to begin on Wednesday but understand that may not be possible. They would work on ways to make this shortened set up work for you. Additionally they would give you back Monday should it become available.

I will also reach out to hotels today to get their buy in.

Kathleen Ceseretti, CMP, CEM Director of National Accounts Providence Warwick Convention & Visitors Bureau Cell: 401-486-8689



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2020 VIRTUAL CONVENTION

For the first time in MHEDA's history, we were forced to make the difficult decision to <u>cancel the 2020 annual</u> <u>convention (https://www.mheda.org/mheda-annual-convention/2020-convention-exhibitor-showcase/)</u> in light of the impact of COVID-19. While it's not the same as being together in person, we hope that the Virtual Convention will provide you with a bit of the learning and connecting you would enjoy at a live convention.

This series will feature 2020 MHEDA convention speakers presenting and answering questions live from the audience. Space is limited for the live sessions and a recording will be available on-demand. The sessions are FREE for MHEDA members (optional reg fee respectfully requested and non-member fee applies).



WATCH ON-DEMAND (HTTPS://VIDEOS.MHEDA.ORG/LEADING-ON-PURPOSE-WITH-BRANT-MENSWAR)

(requires member login)



April 2, 2020

The Undiscovered Truth to Leading on Purpose

presented by Brant Menswar (http://brantmenswar.com)

Critically-acclaimed author/speaker, Brant Menswar, discusses the hidden truth to calming employee fears and making the "good" decisions needed to carry you through. Brant is available for organizational & client enrichment sessions designed to define and activate your core values

to start living and leading on purpose. For more information please visit <u>brantmenswar.com</u> (<u>http://brantmenswar.com)</u> or <u>findyourblacksheep.com (http://findyourblacksheep.com)</u>. **LEARN MORE** (/EVENTS/VIRTUAL-CONVENTION-THE-POWER-OF-BLACK-SHEEP-VALUES-AND-HOW-TO-FIND-YOURS/)



April 9, 2020, 12:00 pm CT

The Power of Black Sheep Values and How to Find Yours presented by <u>Brant Menswar (http://brantmenswar.com)</u>

Join critically-acclaimed author/speaker, Brant Menswar, to help you discover your core values and how to use them to choose and live out your purpose. Brant is available for organizational & client enrichment sessions designed to define and activate your core values to start living and

leading on purpose. For more information please visit <u>brantmenswar.com (http://brantmenswar.com)</u> or <u>findyourblacksheep.com (http://findyourblacksheep.com)</u>.

LEARN MORE (/EVENTS/VIRTUAL-CONVENTION-CYBERSECURITY-WHAT-MHEDA-MEMBERS-NEED-TO-KNOW/)



April 16, 2020, 12:00 pm CT Cybersecurity – What MHEDA Members Need to Know! presented by <u>Mike Foster (https://fosterinstitute.com/)</u> Mike Foster will help CEOs understand the threats that lurk at home and provide information needed to make positive changes in their organization's IT practices.

LEARN MORE (/EVENTS/VIRTUAL-CONVENTION-MASTERING-THE-ART-OF-VIRTUAL-MEETINGS-AND-PRESENTATIONS/)



April 23, 2020, 12:00 pm CT Mastering the Art of Virtual Meetings and Presentations presented by <u>Sylvie diGiusto (https://sylviedigiusto.com/)</u> In this session, Sylvie will walk you through some essential tips and steps required that ensure you are making a professional impression on the screens around the world.

LEARN MORE (/EVENTS/VIRTUAL-CONVENTION-AN-INTERVIEW-WITH-ECONOMIST-BRIAN-BEAULIEU/)



May 5, 2020, 12:00 pm CT An Interview with Economist Brian Beaulieu presented by <u>Brian Beaulieu (https://www.itreconomics.com/)</u> This interview with ITR Economist Brian Beaulieu will give real world insight on how material handling companies can face the economic crisis unfolding around the world.

Watch for more sessions to be added in the future!

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International Grand Convention update

At Young Living, health is at the center of all we do—from keeping ourselves and our families healthy to sharing abundant health with the world. With this as our guiding principle, the safety and well-being of the attendees and employees at any Young Living event is and always will be our highest priority.

We have been closely monitoring the coronavirus (COVID-19) outbreak and reviewing all updates from the Center for Disease Control (CDC), the World Health Organization (WHO), and the U.S. Department of State. As we look to the coming weeks and months, taking to heart what global experts predict this virus will do and how it will spread, we feel it's our responsibility to our members, employees, and the general public to make a fundamental change to the format of our International Grand Convention this year.

For 2020, our biggest annual event will become 100% virtual, utilizing our Virtual International Grand Convention platform, which is already in place.

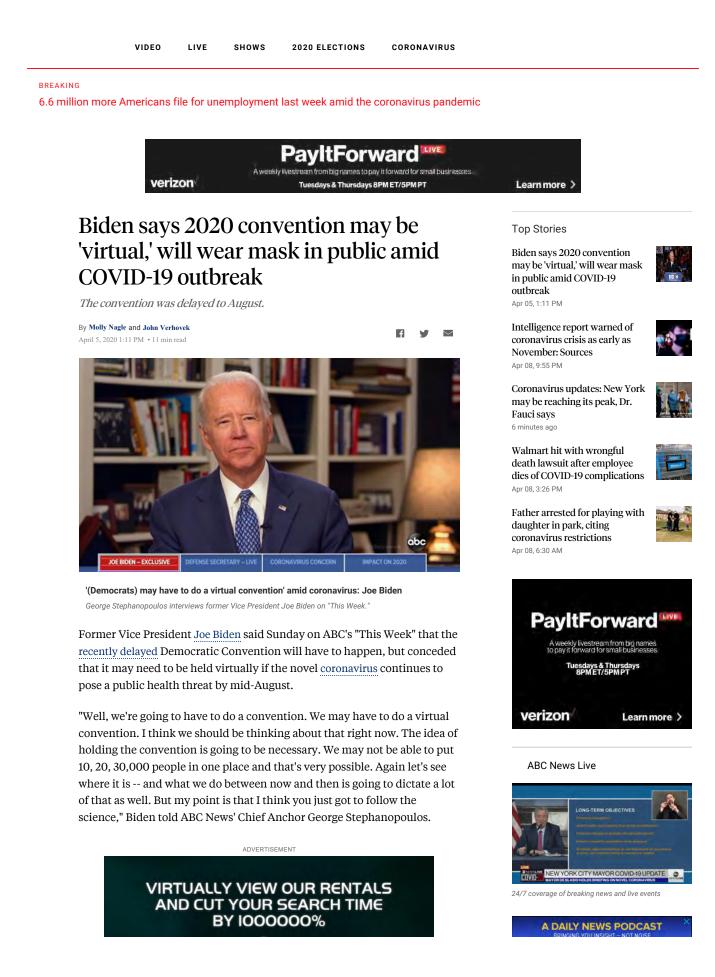
For only \$75, one person per membership can register for the Virtual International Grand Convention to access convention content and place orders for new convention products before they're released to the general public!

(IGC registrations will be converted to a Virtual International Grand Convention registration. Any funds previously paid over the Virtual International Grand Convention price of \$75 USD will be refunded.)

For more information, click here.

WHEN

Wednesday, June 17–Saturday, June 20, 2020 PLANNER Young Living Essential Oils



+ MORE: Democrats shelve national convention until mid-August over coronavirus concerns

The decision to delay the convention, originally scheduled for mid-July came after Biden publicly suggested the date be moved back to August as the <u>coronavirus</u> pandemic continues to keep the majority of the American public at home, and the likely Democratic nominee off the campaign trail.

Joe Biden tells @GStephanopoulos that holding the Democratic convention is "necessary," but Democrats "may have to do a "virtual" convention amid the COVID-19 threat.

"We may not be able to put 10, 20, 30,000 people in one place and that's very possible." https://t.co/IWEd5ppDTB pic.twitter.com/fZUTavPNZN

— This Week (@ThisWeekABC) April 5, 2020

Biden has remained at his Willmington, Delaware, home, following the guidance of a stay-at-home order put in place by the state's governor, and said Sunday morning that he would be heeding the advice of the Centers for Disease Control and Prevention by wearing a mask the next time he goes out in public as a way to mitigate his risk of contracting COVID-19.

+ MORE: Coronavirus government response updates: Trump says CDC now advising Americans wear non-medical masks

"Yes. Look, I think it's important to follow the science, listen to the experts do what they tell you," Biden said. "He may not like how he looks in a mask but the truth of the matter is that -- follow the science. That's what they're telling us. So if I go out in public, and I have not gone to commercial places of late I haven't gone to my local church ... but my generic point is that you should follow the science."

"Yes," Joe Biden says when asked if he will following the CDC recommendation by wearing a mask in public.

Biden adds that President Trump "may not like how he looks in a mask," but "you should follow the science." <u>https://t.co/IWEd5ppDTB</u> pic.twitter.com/ooBnYneDQM

— This Week (@ThisWeekABC) April 5, 2020

When pressed by Stephanopoulos if the Obama administration should have done more to heed a 2014 warning that a "devastating pandemic" was the highest homeland

security risk, Biden pushed back, shifting the blame to the Trump administration for ending policies previously put in place by Obama, such as closing the White House Pandemic office.

"We did a whole lot of things, and they got a very detailed breakdown on this by a briefing that the Trump administration (got) when we transition out of office. But the president dismantled almost all of that, drastically cut budgets for the CDC," Biden said. "He didn't follow through on any of what we suggested was a real problem."

Biden's comments come as the likely Democratic nominee has struggled to compete with what he referred to on Friday as Trump's "bully pulpit" amid the coronavirus crisis.



Democratic presidential candidate former Vice President Joe Biden celebrates with his supporters after

declaring victory at an election-night rally at the University of South Carolina...

Scott Olson/Getty Images

The former vice president also <u>slammed the decision</u> to relieve Navy Capt. Brett Crozier, commander of the aircraft carrier USS Theodore Roosevelt, after he raised concerns over an outbreak of COVID-19 on his ship. Biden had previously criticized Crozier's dismissal as sending a "chilling message" to the rest of the fleet.

"It's close to criminal the way they're dealing with this guy," Biden said Sunday. "The idea that this man stood up and said what had to be said, got it out that his troops, his Navy personnel were in danger. ... Look how many have the virus. I think ... he should have a commendation rather than be fired."

+ MORE: Sailors on aircraft carrier give their fired captain a rousing sendoff

While Biden's campaign has charged that President <u>Donald Trump</u>'s slow response to the coronavirus will cost lives, the former vice president again did not go as far when asked if Trump's inaction has led to more deaths -- saying the president was not responsible for the coronavirus, but is responsible the handling to the crisis.

Biden also said a suggested call between himself and Trump on the coronavirus response hasn't happened, but reiterated he was open to speaking with the president.

"Well, it hasn't happened. I'm happy to talk to him and I'd just tell him what we found is important to do ... and that is to move swiftly and ... we have to move more rapidly," Biden said.

+ MORE: Biden offers advice for families amid coronavirus pandemic in new virtual campaign effort

The former vice president and his campaign are adjusting to the new reality of the 2020 campaign by launching a variety of online efforts, including virtual town halls, fundraisers and even a podcast hosted by Biden.

Those events have brought varying degrees of success for a campaign that leans heavily on Biden's ability to connect one-one with voters at in-person events.

Biden also elaborated on a recent conversation he had with Sen. <u>Bernie</u> <u>Sanders</u>, I-Vt., his lone remaining rival for the Democratic presidential nomination, about his moving forward with the process of selecting a vice presidential running mate.

"I was apologizing to him by saying 'Bernie, I don't want in any way -- it's not in any way to demean your effort -- but if we don't start now we're not going to be able to get there', and he was very gracious, he said that he understood. It wasn't about asking him for recommendations of who he or I would pick," Biden said, noting that the intensive vetting process for a running mate needs to get underway now.

Joe Biden says he spoke with Bernie Sanders about his VP selection committee and was "apologizing" to Sanders for setting one up already, but he had to start because process takes "a lot of time." Sanders was "very gracious," and "understood," Biden adds. https://t.co/IWEd5ppDTB pic.twitter.com/pTQL8UE22f

— This Week (@ThisWeekABC) April 5, 2020

"If we don't start now or shortly in the month of April, it's gonna be hard to get it done. So I was basically apologizing and making it clear I wasn't trying to be presumptuous in any way...and (Sanders) said he appreciated that," Biden said.

+ MORE: As the coronavirus upends the 2020 race, Biden seeks to offer a possible presidency preview

Biden currently leads Sanders by more than 300 delegates -- a lead that is expected to grow larger as Wisconsin voters cast their ballots in the primary Tuesday, which has been clouded by legal challenges attempting to delay the vote over concerns for public safety.

Biden's interview comes ahead of his virtual town hall with his wife Dr. Jill Biden on Sunday night aimed at families.

The town hall, according to a campaign news release, seeks to provide "parents and children across the country with advice on how to stay connected, continue schoolwork, take care of each other, and spread joy and kindness during times of great uncertainty and anxiety."



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The Rhode Island Convention Center Amendment to License Agreement #990753

This Amendment is to license agreement **#990753**, between the Rhode Island Convention Center and SMG ("Licensor") which has been engaged to manage and operate the Rhode Island Convention Center (the "Center") and **Unitarian Universalist Association** ("Licensee") for a convention known as General Assembly 2024. It will be referenced as **#Amendment A-1**. Only those sections of the above License Agreement specifically addressed in this Amendment are affected; all other language of the license agreement is fully enforceable. This Amendment will expire if not executed by **April 27, 2020**. The following are changes to the numbered paragraphs:

1. Premises

- Release all previously contracted space from Monday, June 22 Monday, June 29, 2020.
- Licensee shall have no liability whatsoever arising from or relating to the previously contracted space.
- Add all previously contracted space from Monday, June 24 Monday, July 1, 2024 for the times previously set out, except for a delay on move-in to the Dunkin Donuts Center (DDC) until Tuesday, June 25, 2024 at 6:00 a.m.
- Licensee has the right of first refusal for reserving Monday, June 24, 2024 at the DDC, should the CVS hold be altered or cancelled. Licensor shall advise Licensee within seven (7) days after learning of the DDC becoming available on June 24, 2024.
- Previously contracted space includes use of the Warwick Room and Providence Room from Monday, June 24 - Monday, July 1, 2024. (Addendum A-1)

3. <u>Term</u> - The term of this License shall be from the period beginning at 6:00 a.m. on June 24, 2024 and ending at 11:59 p.m. on July 1, 2024 inclusive (the "Term").

4. Rent and Other Charges

It is understood that the Minimum Rent will now be: \$125,455.00 <u>\$ (7,859.00)</u> DDC One Day Rental Reduction \$117,596.00 *

- The Minimum Rent set forth above (with discount) applies to Section 4D of License Agreement #990753, as hereby amended.
- Licensor acknowledges and agrees that Licensee paid Licensor \$50,182 in October, 2017 pursuant to section 4(B)(a), thereby reducing the balance of total rent to \$67,414, and that the \$50,182 paid more than satisfies Licensee's obligation to make the payment under paragraph 4(B)(a).
- The \$67,414 balance shall be payable as follows: thirty (30%) percent thereof no later than sixty (60) days prior to the commencement date of the term; and the remaining ten (10) percent balance to be paid post event, upon the Licensee's receipt of the sustainability documents required by Exhibit A.

9. Television and Broadcasting Rights. Licensee shall not televise or broadcast any Event scheduled to be presented in the Premises under the terms of this Agreement without the prior written approval of the Licensor. For avoidance of ambiguity, Licensee may "stream" Events presented on the Premises.

20. Nondiscrimination

• Licensee agrees to comply with all federal, state, and local laws prohibiting discrimination by reason of gender identity.

IN WITNESS WHEREOF, we, the parties hereto, have executed this Agreement the day and year written below.

MR. CAREY McDONALD, CHIEF OPERATING OFFICER Licensee, UNITARIAN UNIVERSALIST ASSOCIATION 24 FARNSWORTH STREET BOSTON, MA 02210

Ву:_____

Title:_____

Date:

SIGNING ON BEHALF OF

Rhode Island Convention Center SMG,Licensor JOHN J. McGINN One Sabin Street Providence, Rhode Island 02903

Ву:_____

Title:

Date:_____