## **COVID 20/20**

4 May 2020

s I craft this editorial in early May, my heartfelt congratulations go out to the people of BC as their sacrifices have flattened the curve of this COVID-19 pandemic. By suffering through financial and social hardship, our province did not experience thousands of ill patients with significant mortality as did so many other places in the world.

I fear the next stage of the pandemic might be the most challenging. So many choices need to be made on how to proceed in reopening businesses, schools, gatherings, etc.

The president of the United States has just suggested ingesting disinfectants and using light therapy. He has blamed China for the pandemic and suggested SARS-CoV-2 leaked from a Wuhan laboratory. He has praised armed protestors rallying against federal safety guidelines for reopening economies while at the same time criticizing governors of other states for not minding these same rules. He has just announced Operation Warp Speed to fast-track a vaccine without any real knowledge of what that entails. He is the gift that keeps on giving.

Despite the death rate in the US ticking along at 2000 per day, many states are reopening their economies. Georgia has recently given the green light to gyms, hair salons, barbershops, and tattoo parlors. I can understand the need to exercise and deal with quarantine shagginess, but why is getting a tattoo a priority? I realize many people are impatient to get back to normal, whatever that will look like, but I would suggest a more careful

approach.

I trust that our provincial authorities will proceed with caution using the best information available at each decision point. However, this remains extremely tricky. If opening too soon results in a second wave of cases, harsh judgment will fol-

low. Dragging the process along with no adverse outcomes will likely be equally condemned.

In the months and years to come, retrospection will show if the approach taken to managing the pandemic in our province was the correct one. Was our initial approach of limiting testing to certain populations the correct path, or should we have mirrored South Korea's massive testing protocol? Were physical

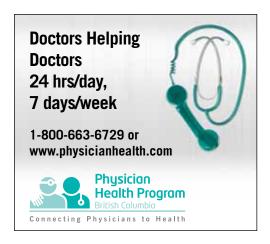
distancing and mass closures in our best interest, or should we have followed Sweden's model, which kept businesses open and isolated only the vulnerable in their population? Will areas that reopen quickly end up in a better place in a few months, or will they be mired in a sec-

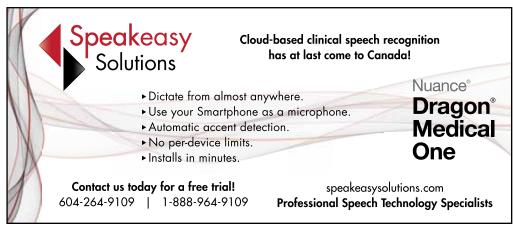
> ond wave while our steady plodding saves lives? I for one am glad that I do not have to guide the course of our recovery.

> By the time this editorial is published this summer, the path of this dangerous virus will likely be clearer. It will be easy to point our collective finger and judge those burdened

with this thankless responsibility, but I for one will not be casting any stones. Instead, I would ask for understanding of the difficult decisions made and compassion for those forced to make them along the way.

—David R. Richardson, MD





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## Finding kindness and resilience during a pandemic

n the midst of the COVID-19 pandemic, a constant stream of information and news is being shared every day. The sheer amount of information can be overwhelming; every news channel and website is filled with data on the number of cases, number of deaths, number of ICU admissions, and number of government restrictions and guidelines. What the future holds may seem grim.

However, one thing that has struck me during this pandemic is how, through hardship, the positive aspects of human nature—kindness and resilience—shine through. It shows glimpses of hope in this challenging battle with the virus.

In this trying time, it is vital to treat everyone with kindness. We may not know what someone else has experienced during the pandemic. They may have lost their job or have a loved one affected by the illness, fighting for their life in the hospital. We've each had our own experiences, but one thing we can all aim to achieve is to spread kindness. I've learned about medical students whose clerkship experiences have been affected but who have chosen to use their time to help health care workers with groceries and

child care. I've learned about restaurants providing and delivering free meals to thank health care workers. There are, of course, the health care workers who are going above and beyond

to spread kindness to their patients—nurses setting up FaceTime for their dying patients to see family one last time, or doctors providing reassurance and care to patients who are fighting this illness.

We have learned that

we are in this pandemic for the long haul. It has now been months since the first case in BC. However, the fact that we find the strength to physically and mentally cope with this crisis speaks to our resilience.

We have all made changes to our daily lives. Physical distancing and stay-at-home orders can feel isolating and, at times, even overwhelming. Fortunately, an incredible number of resources have been made available to help us stay resilient during this crisis, such as virtual counseling services, free online workouts, ideas for new hobbies to take up, or options for holding virtual gatherings. The current limitations have also given us the opportunity to cherish connections with our family and friends.

> I am also immensely proud of my colleagues and other health care workers who exemplify resilience. They go to work, day in and day out, to keep us all safe despite being presented with unknown challenges, especially dur-

ing the early days of the pandemic.

Not many of us, before now, could have said they lived through a pandemic. It has not been an easy journey, but I think we have all learned and gained a lot from this experience. We have learned things about ourselves. It has given us a chance to reflect on the present and what we often take for granted. I hope it is the acts of kindness and resilience that will be this pandemic's lasting legacy. ■

—Yvonne Sin, MD



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