

Class of 1966

Class Agent

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Dear Men of '66,

These are indeed strange times, and Jay and I hope you and your family are well. Please stay safe, stay inside and stay connected to your friends and loved ones. Jay and Marty Fisher are hunkered down on Marco Island while Marsha and I are being very careful here in Phoenix.

Jim and Babs Roeder visited us in Phoenix on 3/7-9, and we had a terrific time together. Both are doing really well, and Jim still has the grip of a vise! He still raises over one hundred head of cattle, rides his horses and is involved in the rodeo circuit. He says it is difficult to return to Wabash for a football game in the Fall as that is the time of year he does the branding of his cattle. By the way, Jim was inducted into the Seymour High School Athletic Hall of Fame last December. Here is a picture of Jim, me and "Willie Nelson" at Harold's Corral in Cave Creek, AZ on 3/8.



Charlie and Janet Bell have returned from two months in Alabama to their home in Geneva, IL. Both are active in a number of civic and church activities. They plan to attend Homecoming on 9/19.

Bill Summers stays in regular contact, and he still visits Joe O'Rourke at a retirement home in Des Moines. Joe can be contacted at Wesley Acres, 3520 Grand Avenue, Des Moines, IA 50312 and he would love to hear from his former students.

Dennis Whigham has sent a very nice email and video that I thought you would enjoy.

Still working, being elderly and working at home without the normal interruptions that occur in the office-environment. I get to enjoy the various things that you forward more fully. Love the 'Grins for the Elderly'.

My guess is that a lot of men in our class have a lot of free time these days to explore the web. I also enjoyed the latest newsletter and the emails from the college to show how they are taking care of the students. Hoping to interact again soon with John Flanagan who agreed to offer advice with one of our publishing projects.

In the context of having free time, I thought I would send you a link to a Smithsonian video that is based on research that I have been involved with in Alaska for the last decade and more. The research has a sound scientific basis (lots of publications in scientific journals) and we are now at a stage as a group of collaborators where we are communicating the knowledge that we have gained to the public and decision makers so that the people in Alaska don't make the same mistakes that have been made elsewhere in the world. The video is one of the outreach efforts.

I thought that folks might enjoy the video as it provides a bit of calm and beauty in one's life in this confusing and anxiety creating time. The research is based out of Homer, Alaska – one of my most favorite places on earth. The video was chosen for the Washington Environmental Field Festival which, unfortunately, was cancelled. I think that it will be part of a virtual Earth Optimism event that the Smithsonian is currently organizing to take the place of an in-person event in DC that also had to be cancelled.

There is another reason for sending the video around. The research has been, is and will always be based on grants and gifts that support what we are engaged in. Maybe there will be a few men of 66 who have a hankering to put their resources to a good use in support of salmon and ecosystem conservation and a future with sustainable salmon for their dining and recreational pleasure! There is NO comparison between a fresh-caught salmon and the farm-raised fish that are most abundant in supermarkets.

The link to the video on YouTube is: <https://www.youtube.com/watch?v=Ro3fojyWi9o&t=4s>

Hope you and Marsha are staying safe in Arizona. It will be interesting to see what, if anything, emerges culturally after we come out the other side.

Best wishes,
Dennis

John Lennes sent an interesting document that is thought provoking, and one that is particularly timely in view of the current pandemic.

A Good Definition of a Problem is 90% of the Answer

Albert Einstein once said "If I had an hour to solve a problem I'd spend 55 minutes thinking about the problem and 5 minutes thinking about solutions." Albert was onto something. We should try Einstein's approach when dealing with the coronavirus pandemic. Everyone seems to have answers, but we don't fully understand, or maybe agree on, exactly what we are facing. One does not always have the luxury of a lot of time in which to make important decisions, and this is such an occasion. But there are a few overriding questions that, when answered, will go a long way toward telling us whether to **"lower the river" or "raise the bridge"**.

What do we know?

We know that the corona virus is **lethal at least for some populations, but seemingly not so much for others**; and

We know that society almost certainly **cannot endure a lengthy dark night for commerce**.

We know that the virus can kill, or at least it can combine with other factors like age and pre-existing health problems to bring about death. But how frequently? And for what populations? We need to

know the answers, maybe not with surgical precision but well enough to construct an effective strategy to cope with the outbreak, a strategy that we hope would not have the unfortunate side effect of seriously damaging or destroying civilization as we know it.

So a central question is **exactly how dangerous is corona to the various populations that encounter it?**

The coronavirus can present with symptoms similar to a bad cold or the flu: aches, pains, sore throats, upset stomachs, respiratory distress and failure, runny noses and bowels, the entire unpleasant menu. But it is important to find out, with all that, **whether it has anything like a realistic chance of killing you.** The answer seems to be that if you are very old, or sick, or both, it may well kill you. But if you are not, it likely will not.

It is important to understand the huge difference between being **“at risk”** of *contracting* the virus, and being in **mortal danger**. The entire population is at risk of infection, generally speaking. But the risk of *dying* because of such an infection is much greater among certain populations than others.

At a March 23 press briefing of the White House Corona Response Team, Coordinator Dr. Deborah Birx summarized that

“the mortality rate is driven almost exclusively by people with preexisting conditions and the elderly. So ... our focus has been how do we protect those with preexisting conditions and the elderly. The death rate escalates with age or preexisting conditions. ...It may be very low if you are under 70; the **average age of persons dying in Italy is in their mid '80's.**

“99% of all the mortality coming out of Europe in general is over 50 and preexisting conditions. ...The preexisting conditions piece still holds in Italy with the majority of the mortality having three or more pre-existing conditions.

“No child under 15 succumbed to the virus in Europe; there was the one 14 year old in China.

“The [mortality] estimate for Wuhan was originally over 3 %; now it's at 0.7%; in South Korea, 0.7%, 0.8%. But still we are missing 50-60% of the data because no one was testing the asymptomatic; if anything [the mortality rate] will go down.

The Centers for Disease Control has said that 80% of U.S. corona fatalities were over 65 years old. In Spain, authorities say that 90% of their fatalities were over 70, and 74% of their fatalities had other health issues (and therefore most fatalities had both characteristics).

In the U.S. people 65 and over account for about 15% of our population. So using the CDC mortality incidence figure, we see that a group of just 15% of the population accounts for 80% of the fatalities, and the other 85% of the population accounts for only 20% of deaths (and many of those were people with pre-existing conditions). Putting this together, it means that a coronavirus fatality is over 20 times more likely for an infected elderly person than for infected younger people.

In light of this reality, it makes sense to **reconsider the decision to largely shut down commerce, putting millions of people out of work, sharply curtailing productivity and potentially doing lasting harm to the economy and perhaps society.** Why not instead **focus on providing serious temporary protection to those whose age or physical conditions, or both, suggest that they are by far the persons most at serious risk from the new malady,** while allowing the majority of people who appear to be much less mortally endangered by this fresh affliction to **go about their business,** using distancing and other social **safeguards?** As testing and “hotspot” identification become more widespread, specific actions can be undertaken in specific places, as needed. Many may get sick, some may even die (and recall that an average of over 30,000 Americans per year already die from the common flu), but the nation would survive.

Don't get me wrong. I am not saying that what is currently being attempted or imposed is necessarily mistaken, nor even that it might not be the best available way of coping with a problem that has no good solutions. What I am saying is **that less harmful options for doing the best we can in tough times may be available, and that they should be seriously examined.**

The current approach for combatting the effects of the coronavirus is to try (and probably fail) to shield the entire populace from infection, involving a major downturn in commerce and therefore income flow and product creation for months, with the prospect of catastrophic and lasting residual effects. Proponents admit that they do not necessarily think that this **"flattening of the curve"** would significantly limit the overall spread of the disease, but hope that it could drag the process out long enough to avert any sharp upsurges in very serious cases at any one time that would overwhelm the health care system. To bring this about, we are told, what some thought only a short time ago might be a **moratorium of sorts for a week to 10 days could last months, maybe many months.**

The **economic and human cost of this approach is turning out to be immense. The substantial closing down not just for weeks but for months of much of the national economy is the price, and it is a steep one.** We are sending millions and **millions of people home without paychecks**, we are closing or severely **curtailing all sorts of businesses that produce many of the things that we are being encouraged to buy here in America.** The government says it will provide **funding for all the people laid off so they can purchase things from the now-shuttered stores and the padlocked factories**; but exactly where is this government going to be getting its money? Are the idle workers and stores and factories going to generate tax revenue sufficient to lift the impacted people and society out of their woes? The sad answer likely will be that as long as the U.S. Treasury's printing presses are still in business we can "create" more money, even if that creates no more real wealth. In the long term, that means we will borrow it, largely from China. There is a growing sense of foreboding, and there should be.

The corona infestation is a **multi-dimensional problem.** As in the case of an individual patient, there may be approaches potentially effective against the disease, but possibly fatal to the patient. Absent dictatorial control over the patient's behavior and inclinations, a long-term approach that the patient simply will not undergo or at least not willingly endure for long is an ineffective treatment. A path **blending an effective healthcare response with a coherent economic one must be found.**

Why not impose or at least go with **a tight quarantine on the elderly and the ill** rather than close down the country? That would "flatten the curve" by sequestering the **vast majority of people who have proven to be in serious jeopardy**, thereby lowering their incidence of disease and their need to be treated for it. This should substantially **lessen the congestion** in the healthcare system, allowing it to deal more effectively with an on balance less brutally impacted body of younger, healthier patients.

Can this be mandated? Maybe not, but you could reward it, maybe. Carrots often work better than sticks. We just passed a 2 trillion dollar bill at the federal level to address at least for the time being some but not all of the ill effects of the shutdown. If something on the order of half that amount were devoted to sequestration, each senior and each sick person could be rewarded with say \$10,000 if they effectively and totally self-quarantined at home. And remember, most of the expenditures authorized in the \$2 trillion dollar measure would not have been necessary if the consequences of actions taken to address the pandemic had proven less crippling in and of themselves.

The societal cost of focused action would be relatively minimal (apart from any stipend that might be involved). Many of the people who would be quarantined are **already retired**; their absence from the workforce would be largely unnoticeable. They wouldn't miss paychecks, because for the most part they **already get social security and/or retirement benefits**, at least as long as there still are

companies and a government capable of standing behind those checks. They have **Medicare** (as long as the government can pay it). For a small fraction of what it would cost the nation to bring substantial commercial activity to a near-standstill for months, the groups most seriously endangered by the corona virus could be at least as well protected as they would ever be under the current approach, and the rest of the population, while subject to a number of constraints and inconveniences, could go on with something resembling their normal lives at a much lower level of peril and a greater likelihood of receiving effective medical help if it is required.

Influenza has been mentioned. The corona virus is not the flu, but maybe influenza experience has some lessons that help a little with the current situation. Every year in America the conventional flu afflicts an average of over thirty million citizens. There are inoculations for this, and many people receive them, yet the **flu nevertheless kills tens of thousands of victims each year in our country** alone.

From the year 2010 through the 2018-2019 flu season CDC figures show that an **average** of nearly **29 million Americans caught the flu each year**; almost half of these people sought medical treatment; an average of **almost half a million people per year were hospitalized**; and an average of **over 37,000 people died from it every year**. There are more **annual fatalities from the flu than from car crashes**.

The corona virus impact on the majority of the population, especially on the young and the healthy adult population, is unclear and unknown at this point. What data we do have suggest that for most people it may not be appreciably more severe than the yearly onset of conventional influenza, even after flu inoculations have been taken into account. **We don't close down the nation for the flu season.**

Many hold out hope for the rapid development of a vaccine that would end the corona problem. That would be nice. But it is well to remember that in the case of corona's cousin, influenza, vaccines do exist. Many people, especially the elderly, get these shots each year. The Centers for Disease Control (CDC) has monitored the effectiveness of these vaccines, and in recent years effectiveness overall has been rated at a little better than one third, better for some strains of flu than for others, and seemingly less effective for elderly people. Is it reasonable to suppose or hope that a corona vaccine when and if developed will be significantly more effective in its mission than the flu vaccines in use today have proven to be in theirs? Maybe. But a corona vaccine may not be quite the Holy Grail it is hoped to be. Time will tell.

We must respect the finding that **the most serious impact of the disease hits the minority of people who are already significantly ill or aged**. Focusing strongly on this real problem and addressing it comprehensively likely would be far more effective and far more affordable and constructive than what I might call the "My Lai approach" (from Viet Nam a half century ago when an army detachment destroyed a village "in order to save it.")

So, without spending a decade or two in the research labs, is it possible to get a realistic, useful notion of what is actually going on here? Or will we continue to jam findings and events into previously shaped molds to produce **predictable solutions to unpredictable problems**? Many decades ago early Chicago television featured a garrulous cartooning weatherman named P.J. Hoff, who was assisted by his "Vice President in Charge of Looking Out the Window". This cartoon aide's job was to temper the piles of predictions based on climate models and electronic estimates with an **occasional therapeutic glance at reality**. Not a bad concept; we ought to try it.

We do not have the time, in view of the drastic remedial steps that are being taken and considered, to sit around and wait for artificial precision. We are chopping off metaphorical limbs when they show signs of affliction or are even suspected of being subject to same. Should the instrument of

choice be an **axe**? Maybe something more like a metaphorical **scalpel** would be a better choice? It would be nice to have a clear agreement about that before too much more hacking takes place.

John B. Lennes Jr. is the former General Counsel of the Minnesota State Chamber of Commerce and the former Commissioner of the State of Minnesota Department of Labor and Industry.

JBL 3/21/20; Birx material added 3/23

Sadly, we have lost another classmate, Terrence Storey, and his obituary follows.

HOBART, IN - Terry Storey, age 76 of Hobart, passed away on February 8, 2020. He was a life-long resident of Hobart. Terry graduated from Wabash college and enlisted in the U.S. Army and spent two years serving his country. He was introduced to the love of his life, Joan and they raised three sons. Terry instilled in his family his love for the outdoors and sense of humor. He was a loving father and husband and always made time for his family. Terry and his sons were very active in Indian Guides growing up.

Terry was preceded in death by his parents, Ross and Bea Storey, brother, Bruce. He leaves behind his loving wife, Joan (nee Webster); sons: Rob (Karen), Tim (Heather), and Jeff; grandchildren: Bree (Rob), Erin, Bella (Ian), Dom (Shelby), and Jake; brother, Dave; numerous nieces and nephews.

A visitation will be held on Tuesday, February 11, 2020 from 1:00 p.m. until the time of service at 3:00 p.m. at BURNS FUNERAL HOME, 701 E 7th St, Hobart. Cremation to follow service. www.burnsfuneral.com

The Seventh Annual Day of Giving is scheduled for 5/12, and I hope each of you will take part in this vitally important event for Wabash. This day raises money for the Annual Fund and it is critical to fund many of the activities and functions of the College. I have a neighbor here in Phoenix who works at Arizona State University, and he is totally amazed at the generosity and loyalty of Wabash alumni. And, as always, Jay and I look forward to hearing from you and for information we may include in our class letters.

“Thy loyal sons shall ever love thee...”

Cal