The C.D.C. now recommends that everyone in the following areas, regardless of vaccination status, wear masks indoors in public places. Nearly all counties across the United States are experiencing either "substantial" or "high" transmission rates that would fall under the C.D.C. masking guidelines.

Update Oct 28, 2021

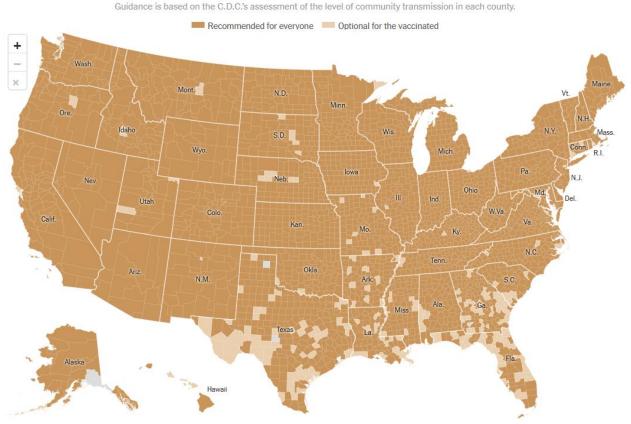
## Mask guidance by county

The federal guidance for schools dovetails with updated recommendations for people living in areas experiencing coronavirus outbreaks.

The C.D.C. also now <u>recommends</u> that everyone in those areas, regardless of vaccination status, wear masks indoors in public places.

Nearly all counties across the United States are experiencing either "substantial" or "high" transmission rates that would fall under the C.D.C. masking guidelines. These designations, which are updated regularly, are based on an area's per capita case rate or test positivity rate.

## Where the C.D.C. Recommends Wearing a Mask Indoors



Source: Centers for Disease Control and Prevention - Note: Community transmission level is based on C.D.C. case data for the week ending Oct. 28 and test positivity data for the week ending Oct. 26.

The guidance reflects the surge of coronavirus cases in many parts of the country, fueled by the highly contagious Delta variant. Though the C.D.C. has been criticized for its back-and-forth recommendations on masks, public health experts say the most recent change was necessary.

Map: <a href="https://www.nytimes.com/interactive/2021/us/cdc-mask-guidance-states.html">https://www.nytimes.com/interactive/2021/us/cdc-mask-guidance-states.html</a> (c) Map is not included in print editions

## The Post Editorial

## Mandate masks indoors in public

It's time for Gov. Jared Polis to use his emergency powers to issue a statewide mandate that people wear masks into indoor public spaces.

As of Thursday more than 1,000 people were hospitalized in Colorado fighting COVID-19 infections, and hospitals were sounding the alarm bells that they are nearing capacity. Care for those who are critically ill — either from COVID-19 or other medical emergencies — will suffer if the state doesn't find a way to ease the burden on our hospital employees.

Polis outlined a plan on Thursday to deal with surging cases, including immediately providing monoclonal antibodies to urgent care facilities and mobile clinics. The antibodies, if taken early in the course of an infection, can reduce the risk of hospitalization and death.

While Polis' plan is strong, we think it fails to deploy the simplest, lowest-cost tool for slowing the spread of airborne viruses — masks. Polis said that masks can help change the timing of when a person gets COVID-19, but are not a long-term solution.

"We're not going to wear masks forever," Polis said. He said the real solution to the pandemic is to get people vaccinated, pointing out that very few of those hospitalized are vaccinated.

That is true, however, we are not proposing a permanent indoor mask mandate. We are asking for a temporary order until the strain on our hospitals is eased. Now is the time to delay COVID-19 infections. Wearing a mask into indoor public spaces is a small sacrifice we can take as a civil society to protect those who need life-saving medical treatment. It is akin to other public health laws: indoor smoking bans, seatbelt and helmet requirements, and, of course, pages and pages of food handling regulations to protect the general public from food-borne illness.

The governor of Kansas issued an executive order in July 2020 mandating masks, however, only 15 counties adopted the mandate, making the state an excellent test case for the efficacy of such orders.

Numerous studies have determined that the mandate was effective. An article published in JAMA tracked case and hospitalization data in those 15 counties with mask mandates compared to the 68 counties with no mask mandates. Before the mask mandate went into effect, the 15 counties actually had 3 times higher cases per 100,000 people than the other counties, but two weeks after those 15 counties had implemented the mandate, the numbers reversed and no mask counties had 2.1 times more cases. Similar results were observed for hospitalizations and deaths.

We find that compelling. According to a study published in the CDC's Morbidity and Mortality Weekly Report, weekly hospitalization growth rates in every state across the nation declined by 2.9 percentage points among adults during the first 2 weeks after a statewide mask mandate was implemented. After 3 weeks, hospitalization growth rates declined by 5.6 percentage points.

The study concluded: "Mask-wearing is a component of a multipronged strategy to decrease exposure to and transmission of SARS-CoV-2 and reduce strain on the health care system, with likely direct effects on COVID-19 morbidity and associated mortality."

The good news is that there are very few if any documented harms from wearing masks in public indoor spaces, so if it turns out these studies are wrong, the state will have risked and/or lost very little.