### A Brief COVID-19 Analysis and Its Implications for the Church (Part 2)

#### An Update and Biblical Analysis of the Response to the Pandemic

### Daniel O'Roark, DO, FACC

Cardiologist, Jonesborough, TN Member, Bridwell Heights Presbyterian Church, Kingsport, TN

#### **Purpose:**

- On March 24, 2020, I wrote an essay for the following purposes:
  - (a) to briefly analyze the *relevant*, currently available data (as of 3.24.2020) regarding the COVID-19 (CV) pandemic and the administrative public health response to it *in the context* of a *CHRISTIAN* world and life view. (b) Provide recommendations as to how the body of Christ at large, and church officers in particular, should respond. (c) Questions to be examined include: Has the government properly interpreted the data? Have they, in response to the pandemic, violated biblical law? If they have, what does God's law require that they do? Does the civil magistrate have the right to control where and when God's people meet for worship?
- As of this writing (4.28.2020), medical aspects of the pandemic have been clarified but many knowledge gaps remain. The reader will be provided a brief update of the medical data and vital statistics related to the CV pandemic. Most importantly, we will review from a Christian world and life view, the civil and ecclesiastical response to the virus and provide insights regarding the following four questions.
- Is the COVID 19 pandemic a public health menace so severe and threatening so as to rise to the level of a legitimate providential hindrance to public worship?

How do we properly apply (to the civil and ecclesiastical responses to the COVID 19 pandemic) Romans 13:1-7 and the related sections (Chapters 20 and 23) of the Westminster Confession of Faith (WCF)?

How should we properly apply the "Love Thy Neighbor Principle" to the COVID 19 pandemic while at the same time not seriously infringe upon the Christian liberty of our congregants?

Why is the heavy hand of our Lord now upon the nations?

- Before proceeding, I highly recommend that the reader now review my <u>original essay</u>
   (<u>PDF Format</u>) in detail including a study of the several hyper-links. This will help properly
   frame my various arguments and will assist our efforts to seek like-mindedness and
   unity on this issue within the Body of Christ (Philippians 2:2).
- It is duly noted that a "medical analysis only" approach to the understanding of and ecclesiastical response to the pandemic is woefully inadequate (2 Corinthians 10:5).

# An Update of Medical Considerations: Is the COVID 19 Pandemic a Public Health Menace So Severe and Threatening as to Rise to the Level of a Legitimate Providential Hindrance to Public Worship?

- I will not rehash here, to any substantial degree, the data found in my earlier essay. I humbly stand by my original medical analysis as <a href="newer data">newer data</a> since publication has not only *not* persuaded me to change my views but has definitively strengthened them.
- Having been in the medical profession for forty years, I know of and have witnessed the
  gradual corruption of western medicine as it is progressively bathed in Darwinian
  reductionism (having thrown off its formerly Christian basis). In this worldview, "we are
  merely random atoms and molecules floating about as the result of a great cosmic
  accident."

Unsurprisingly then, severe ethical breaches now occur regularly in the medical field. Abortion, eugenics and infanticide are well known. Doctors are now giving pre-teens "puberty blockers" in light of "gender confusion". Surgeons physically alter genitalia for the same reason. Falsification of research and other data is commonplace (and is now in full bloom in the COVID 19 paradigm) and in many scientific papers, "lying by statistical analysis" is the norm.

Shockingly, the <u>NEJM</u> recently published an essay arguing that, despite widespread and extreme pandemic induced medical service restrictions, abortion amenities are absolutely "essential" and must not be hindered in any way.

So, on the one hand "we must" risk "destroying the world as we know it" with aggressive lockdown measures to ostensibly save relatively few lives (please consider that almost 3 million people die every year in the US), while on the other hand "we"

vigorously and simultaneously murder our future generations. To say this is madness is an understatement of epic proportion.

These ethical deficiencies are highly symptomatic of the atheistic materialism (AM) that permeates modern medicine. As I strongly emphasized in Part 1 of my essay, it is very hazardous to blindly rely on data and analysis provided by those imbibing the AM worldview. The basis of true knowledge and wisdom are found only in the Lord and in His inerrant Word (Psalm 1:1-2; Proverbs 1:1-7).

And, as noted by Rev. Joseph Morecraft in an outstanding sermon entitled <u>"The Christian Republic"</u>, when the civil magistrate departs from his sphere of authority he becomes "necessarily incompetent".

 Early in 2020 when the virus was just entering the US, Dr. Fauci and most of the public health establishment were cautiously optimistic regarding COVID 19 outcomes in the United States.

In February, Dr. Fauci recognizing that "the denominator" (total number of COVID 19 infected patients irrespective of symptoms status) was likely "high", stated in a February NEJM editorial (online edition),

"If one assumes that the number of asymptomatic or minimally symptomatic cases is several times as high as the number of reported cases, the case fatality rate may be considerably less than 1%. This suggests that the overall clinical consequences of Covid-19 may ultimately be more akin to those of a severe seasonal influenza (which has a case fatality rate of approximately 0.1%) or a pandemic influenza (similar to those in 1957 and 1968) rather than (emphasis added) a disease similar to SARS or MERS, which have had case fatality rates of 9 to 10% and 36%, respectively."

When cases began to increase (primarily attributable to greater numbers being tested), the media and public health presentations became increasingly hysterical, fearful and panic laden. Citing the now discredited IHME and Imperial College London computer modeling, "Plague! Plague!" they shouted. Many thousands of puzzled physicians, virologists, epidemiologists and intrigued lay persons around the globe looked outside and saw no plague. Except for a tiny number of "hot spots", directly attributable deaths and hospitalizations were observed to be quite low. No matter. The mantra was repeated over and over again. Alas, here we are in late April 2020 and we still see no plague.

As has been widely observed and reported in the media, *the nation's hospitals are empty most everywhere*. Having shut down ordinary, mostly elective, hospital business

(which is the economic engine that keeps our medical delivery systems alive), many beds were opened up to prepare for the "surge that never came".

Of course, whether one will ever come is in the hands of the Lord but from a human perspective any surge now occurring despite a vigorous lockdown would show that these measures were absolutely unnecessary as they did nothing to stop it. And, based on observation and meticulous analysis of the statistical data, a surge was not reasonably expected.

Many had rightly observed that a surge of such great magnitude had not been *truly* seen in other COVID afflicted nations. CDC had clearly stated *at the time* that no definitive evidence existed to suggest a viral mutation. Therefore, why were US public health authorities assuming "it would be different here"? The science provided no basis for this postulation.

As of 4.20.20, in data provided by my regional health system, *cumulative* positive COVID 19 cases (to be tested, up until 4.18.20, one had to have flu like symptoms and a negative influenza screen) in the *Appalachian Highlands* (upper East TN and SW Virginia – pop. about 500,000) is a mere 282. Correspondingly, there are very few hospitalizations and about 5 attributable <u>deaths</u>.

We have substantially closed down essential aspects of our economic and social lives (to include public Christian worship) over a virus that has caused less than 300 symptomatic cases in upper east TN and SW Virginia. *From a proper public health and epidemiological standpoint, absent massive propaganda and fear mongering, COVID 19 would not have been noticed in most areas of the country.* 

<u>Hospitals</u> all over the country are now laying off employees. Physician and mid-level provider (PAs and NPs) pay has been cut. Financial losses of my regional health care system are expected to top \$200 million through June. The <u>Mayo Clinic</u> has lost 3 billion dollars thus far and is operating at 30% capacity. Physician practices that rely largely on elective procedures are being financially devastated.

• A blogger writing under the pseudonym "Professor Hinkley" has <u>written</u> 3 fabulous essays incorporating the latest data (he writes anonymously because of the current "cancel culture" and fears losing his job were his identity known).

He excoriates the failed computer models that initially projected 2.1 million US deaths assuming "perfect" mitigation efforts (radical "social distancing" such as what we are now experiencing).

In a massive backtrack due to present realities (no COVID surge and empty hospitals), newer models are now projecting 60,000 US deaths through August which is on par with bad "flu" seasons of other microbial etiologies (influenza, RSV, etc.).

He takes on the notion that "social distancing worked way better than we expected" as an explanation for why virus morbidity and mortality was, **by order of magnitude**, much less than predicted.

Success of "flattening the curve" (N.B.: a flattening of the curve does not reduce the area under that curve!) cannot be assumed as "correlation does not necessarily prove causation".

A control group is needed and, in God's Providence, not all nations and US commonwealths imposed extreme, radical lockdown measures. A comparison of data between the two approaches shows roughly equivalent outcomes. As such, the abundantly more benign outcomes than expected have no *proper* relationship with draconian shut downs.

Lastly, he discusses an outstanding paper (published April 14<sup>th</sup>) from the Stanford University epidemiology group. A COVID 19 specific antibody assay has been developed (one of several in rapid development [by the private sector, of course]) and over 3,000 people without symptoms were tested in Santa Clara County, CA.

They found that approximately 2% of those studied had antibodies to COVID 19 thus confirming previous asymptomatic infection. This asymptomatic infected group was 50-80 times as large as those in their region with symptomatic infections and a "positive" COVID 19 PCR assay (Santa Clara is a COVID 19 "cold spot" - very few clinical cases in a region with a population approaching 2 million).

These are the trials that provide much greater insight into the "denominator" we desperately need to get a handle on true case fatality rates. These early data demonstrate case fatality rates with COVID 19 are 0.2% or less (see below) which is virtually identical to that of most influenza strains. And rapidly incoming <a href="mailto:newer data">newer data</a> have driven true case fatality rates even lower.

These figures have enormous policy implications. Even with embryonic antibody statistics, it is evident that COVID 19 carries roughly the same morbidity and mortality as "flu" from influenza and other microbes.

We can now surmise one of two things. Our current national approach is disastrously wrong or we have been massively hypocritical and heartless during past influenza pandemics during which time we closed down absolutely nothing.

I highly recommend reading these three essays in chronological order.

#### Two outstanding excerpts:

"If you've been paying close attention to this topic, you already realize how seismic the data coming out of Stanford really is. We just shut down our economy, we are incurring unknown and incalculable destruction—including death—from this catastrophic policy decision ... for a virus with a fatality rate of 0.12-0.2% and, according to the Stanford researchers, that rate is likely to "be lower." If you'd like to know where COVID-19 now fits on the scale of disease fatality rate, here's a <u>simple table</u>, but I will try to put COVID-19 in proper context:

It's a bad flu (flu is roughly 0.1% mortality rate), although its uniquely bad for people over the age of 80 with co-morbid conditions, and it's a mild flu for people under 50, and pretty much no risk for people under 30, especially children."

"As I explained in my last post, the reason so many Governors locked down their states is because they were presented with <u>data by the IHME</u> that showed extreme death levels if lockdowns didn't happen ... Here's the problem: **their data has proven to be disastrously wrong, and has overestimated death and hospitalization rates by 5-10x, which means they have been off by roughly 500-1,000%, which basically means their data has been useless (emphasis added).** The press has finally started talking about this incredible whiff by the IHME, even though it's been clear for a couple of weeks."

• It is very important to note that the heretofore fairly reliable COVID 19 vital statistics data is being rapidly bastardized. In a move that defies belief, <u>CDC</u> has recently instructed physicians that in cause of death determinations (death certificates) they are to list COVID 19 as the primary cause even **WHEN IT IS ONLY SUSPECTED**:

"COVID-19 should be reported on the death certificate for all decedents where the disease caused **or is assumed to have caused or contributed to death (emphasis in original)**. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)."

Exact cause of death determinations done in good faith have always been difficult to do with precision. Here, physicians are being explicitly instructed to forgo meticulousness in what seems to me to be a deliberate attempt to drive up the number of reported COVID fatalities. This is grossly immoral and unjust given how these data will drive incredibly important public health policy decisions.

A New York Times article confirms this to be true.

• Briefly, it is vitally important that we distinguish between dying "with" coronavirus as opposed to dying "from" coronavirus. For example, if a person is killed in a crash on the way home from a COVID testing site and the test subsequently returns positive, the fatality could ("lawfully") be listed as a COVID death.

The frail, extremely old patient with multiple serious problems including advanced heart and lung disease can die from virtually any respiratory virus. Many of these COVID infected patients do not die directly from viral pneumonia but from the underlying disease as the infectious stress was just too much for them.

Lastly, a positive COVID test presented as raw data tells us nothing about the clinical status of the patient. It is known definitively that the overwhelming majority of patients infected with the virus have no or only mild symptoms.

 In sum, the potentially disastrous situation we find ourselves in has come about, in part, by a totally inexplicable desire by our magistrates and public health officials to portray COVID 19 as a monstrous, highly contagious and virulent virus by which one places their life at risk just by being around an infected person. That this is balderdash is proven by the "eyeball test" alone.

# How Should the Church Properly Apply Romans 13:1-7 and the Related Sections of the WCF (Chapters 20 and 23) to the COVID 19 Pandemic?

God has ordained four governing domains (sphere sovereignty) on this earth: the
individual, family, church and state (civil magistrate). While distinct from one another
(and with some unavoidable overlap, e.g. the child as an individual while at the same time
being under authority of family), these spheres of jurisdiction are *always* under the
authority of the triune God and are to be governed by the principles set forth in the
inspired Word.

When these several governments act in such a way as to "get out of their lanes" so to speak, tyranny is often the result.

- There absolutely exists a biblical separation of church and state but the myth promulgated now is that the state is independent of and separated from the Law of God (Psalm 2).
- The moral Law of God, as summarized by the Ten Commandments, applies to all men everywhere in their respective spheres of jurisdiction (WCF 19.2 with scripture proofs\* / 19.5\*; Larger Catechism (LC) Q/A\* 91 / 93-98\*). Therefore, civil magistrates in their capacity as magistrates, are duty bound to pattern their obligations by special revelation alone.
- As all humans have a duty to repent and by faith receive Christ as He is offered in the Gospel (Acts 17:30), the civil magistrate likewise, is *expected* to be a Christian. (Psalm 2, most especially vss. 10-13).
- The office of civil magistrate is ordained by God. He is the Lord's minister a servant (Romans 13:1-17 [this text is prescriptive or normative as to how the *righteous magistrate* carries out his callings before God]). He is to be a terror to those who practice evil and to be in praise of those who do good. The terms "evil" and "good" can only be defined by the Word of God (2 Timothy 3:16-17). Likewise, the magistrate's authority to bear the sword against those who do evil must be within parameters as set forth by the judicial moral Law of God and its general equity (defined strictly as "universal justice" and its application of the *general principles* found in the Mosaic moral judicial law to modern situations and conditions [WCF 19.4\*]).

For example, executing a person for petty shoplifting is forbidden. Civil sanctions decreed by the magistrate must follow the "punishment must fit the crime" paradigm (["eye for an eye" principle, Lex Talionis], Leviticus 24:17-23). Restitution for theft is required not death or imprisonment (Exodus 22:1-4; Numbers 5:6-7; Leviticus 6:4; Luke 19:8).

In Romans 13, God forbids resisting the magistrate in two fundamental ways. First, we are not to be anarchists (to be in opposition to very limited, Scripturally restrained civil government [mini-archism]).

The Lord has given the civil magistrate to serve His purposes in the physical world until He returns on the Last Day. Until then, evil doers need to be retrained so they not

hinder substantially God's redemptive purposes. The civil magistrate is an example of "common" grace.

Second, we must obey his *lawful* commands (this is true even if he be a non-Christian and a tyrant).

- Crimes, scripturally defined, are those sins that are to receive punishment (sanctions) by the civil magistrate.
- With a prophetic voice, the magistrate is to praise those who do good; alternatively, by way of a strong reminder of the fury of God's judicial wrath via Law, he restrains / deters crime by making the people afraid (Deuteronomy 13:11).
- Old Covenant Israel and her Law order are to be a model or standing template for the
  nations of the world (Deuteronomy 4:5-8). No New Testament Scriptures are found that
  negate or set aside this modeling (Matthew 5:17-20). Indeed, by the ultimate success of
  the Great Commission in the New Covenant era, the implications of our Deuteronomy
  text will be increasingly fulfilled through all the earth the nations, in time and great
  measure, will come to Christ and then rule by His Law (Isaiah 42:1-4).
- The Great Commission (Matthew 28:18-20) commands the preaching of the Gospel to all the nations as the means by which the elect are saved primarily and how subsequently, the kingdom of God expands through all the earth (in the discipling of the nations via a program of extensive teaching regarding the moral Law of God and need for obedience to it [obedience to the Law is *never* to be used as a means of meriting salvation but only as a guide to Godly sanctification]).
- As we contend over the proper understanding of all this, we can be thankful that many Christians do not believe that we must have blind, unfettered obedience to the civil magistrate (but too many do).

Sections of the WCF Chapters 20 and 23, on several occasions, deploy the word "lawful". In WCF 23.2, the Confession refers to the "wholesome" laws of each commonwealth. Obviously, the *Law* being referred to here is the moral Law of God. "*Wholesome laws*" can only refer to those civil man-made laws that are in *compliance* with the principles and general equity of the moral law of God.

The enormously important question before us is: have the civil magistrates, in their COVID 19 responses and edicts, acted biblically and therefore lawfully?

Our Romans text clearly and unequivocally (and also by deduction) gives the civil
magistrate two primary duties: Defend the nation's borders and administer a judicial
system primarily in the adjudication of cases for those accused of capital crimes. Non
capital crimes may be decided as well provided they could not and were not successfully
settled and administered person to person or in a family or informal civil (neighbor to
neighbor) court.

The magistrate may *almost* never interfere with ecclesiastical courts. An exception might be where a church court is acting in a manner that causes it to trespass into the magistrate's rightful sphere of authority (which biblically is very limited).

For example, a church court begins to physically assault or torture its members or perhaps takes matters into their own hands by executing those truly guilty of biblical capital crimes but who were not executed by the state (as required by God's law). Scripturally **only** the civil magistrate may bear the sword in the punishment of crime.

The Bible also gives the magistrate, by way of general equity, a very limited authority in the province of public health, namely isolation and quarantine.

A discussion of these concepts as they apply to persons *voluntarily and legally* entering a nation from an area where a *serious* and highly *deadly* communicable disease is endemic will not be discussed here other than to say that it appears to be most reasonable and lawful.

#### As noted by <u>Dr. Phil Kayser</u>,

"Lev. 13:45-46; Num. 5:1-4; 12:14-16; 2 Kings 15:1-5 all deal with principles of quarantine. It is interesting however that it was not the state that had the power to determine a diseased or healed condition, but the priests (Lev. 13-14; Deut. 24:8). Furthermore, the priests did not have police power to investigate homes or to search for diseases that needed quarantining. Instead, citizens "brought" the infected person to the priest for examination (Lev. 13:2,9; 14:2). The need for citizen, church, and state to all be involved in the process helps to prevent abuses from occurring."

It may be reasonably deduced that in modern nations, the work of the priest has been substantially replaced by the county health officer and his designates. In other words, while the OT passages referenced here were in the context of the Levitical priesthood and the ceremonial law, there are definitely moral applications related to these considerations.

Importantly, the individual suspected of having a communicable disease has to be personally interviewed and examined. If the "patient" has no signs or symptoms to suggest infection with a serious contagious disease, then no isolation can be ordered.

No direct civil penalty was prescribed in Scripture for failure to obey the quarantine order but a citizen could bring about a suit for damages or higher penalty *provided it be proven that sinful negligence* of an isolation order resulted in illness or death to another party.

While not impossible to demonstrate (see Typhoid Mary), a successful conviction would be exceedingly difficult by God's rules of evidence (two or three witnesses which, we believe, *may* include in addition to eye-witnesses, circumstantial and forensic indicators). How does Tom prove that it was Mary's virus that infected him? And, that she infected him with deliberation and premeditation?

• Given the discussion immediately above, it should be evident that arbitrary quarantine of the multitude of a healthy and asymptomatic populace by a central authority (centralization is strongly frowned upon in God's word [Genesis 11:1-9]) without due process is absolutely unbiblical and unlawful.

Further, the <u>Constitution of the State of Tennessee</u> (my home state) does not confer this authority to the governor. No such authority was granted the Federal magistrate in the US Constitution either.

In the Providence of God, our national and state constitutions - statutes were originally formulated (albeit quite imperfectly) upon the general principles of the Word of God. While the Apostle Paul did not enjoy such an environment, he did not hesitate to use Roman law (as a Roman citizen) to his advantage as circumstances dictated (see relevant texts in Acts).

 Apart from the issue of unlawful quarantine, the law of God has been violated in many other ways (including those "wholesome" <u>Tennessee</u> [arguably the most import link in my essay and very highly commended to the reader] and Federal laws as well).

To name but a few, <u>lawful contracts</u> have been disrupted. Able bodied, healthy men and women have been deprived of their right and duty before God to work and to take dominion over the earth. As Paul has commanded, "If a man shall not work, he shall not eat." (2<sup>nd</sup> Thessalonians 3:10) As nations are comprised of men, "a nation that shall not work shall not eat" – a very sobering indictment indeed.

"Executive orders" by Presidents and Governors, as heads of the executive branches of government, have no lawful authority as they possess no legislative capability; law making is solely the prerogative of the legislative branches of government.

To arbitrarily call men's various occupations and callings "essential" and "non-essential" is to demean and diminish that work. And by forbidding the so called "non-essential" the opportunity to pursue their God ordained tasks is to violate the ever important "equal protection under the law" principle as prescribed by Scripture (Exodus 12:49).

The larger proportion of civil magistrates have unlawfully to greater or lesser degrees (biblically and constitutionally) interfered with the public worship of Christ. Even if COVID 19 were the "plague of all plagues", the civil magistrates cannot in any manner interfere with the ecclesiastical authority of the church, through her lawfully ordained officers, to decide as to what she should do in that circumstance.

Christians have no duty to obey any of the magistrates' biblically lawless edicts (an edict that would *clearly* cause a person to sin against God) as to do so would sinfully violate conscience (WCF 20.2).

• In summary, the actions of federal and state/local civil magistrates including Tennessee Governor Bill Lee are patently unlawful as they are unbiblical and in violation of the wholesome laws of the state(s).

In light of their lawlessness, these civil magistrates may legitimately be impeached and removed from office by the state legislatures. Those civil authorities who profess Christ should, unless they repent, be disciplined by their churches. The Lord holds a very dim view of those who break and violate lawful oaths and vows (WCF Chapter 22).

Romans 13:2 is often misunderstood. We see here that it is the very sinful actions of the magistrates *themselves* in this COVID-19 debacle that illustrates what biblically condemned resistance to lawful authority looks like.

I know first-hand that a number of churches did not comply with civil edicts that they suspend public worship. And by doing so, they are *guiltless* before the Lord.

The doctrine of the lesser magistrates declares "that when the superior or higher civil authority makes an unjust/immoral law or decree, the lesser or lower ranking civil authority has both the right and duty to refuse obedience to that superior authority. If necessary, the lower authority may even actively resist the superior authority." We are thankful that a number of sheriffs and state troopers (Christian and non-Christian) have

recently stated they will not enforce these unjust and unlawful edicts by their state and local superiors.

# How Should Christians Apply the "Love Thy Neighbor Principle" to the COVID 19 Pandemic While Avoiding Serious Unbiblical Infringement Upon the Christian Liberty of our Congregants?

- We have now arrived at the very crux of our discussion. If this great and vitally
  important command of our Lord is misused, serious consequences abound, not the
  least of which can be infringement of Christian liberty and the illicit binding of the
  conscience.
- This principle is very broad and encompasses the 6 commandments of the second table of the moral Law (Ten Commandments). These directives regulate how a man is to interact with his fellow men.
- The 6<sup>th</sup> commandment clearly requires of us a duty to preserve the health, well-being and life of those around us as much as feasible but not to the point where we sinfully neglect our other duties before the Lord.
  - As such, men fighting in a just, *defensive* war of their nation are not in violation of this command. Neither are Christians who drive automobiles. Neither are Christians who consent to risky surgery. Neither are Christians who, after considering the "costs", decline risky surgery. Christians are free to take or not take a vaccine(s) and make either choice without coercion. Christians are not sinning should they engage in public activity with a common cold.
- We will now consider the application of this principle to public health in general and COVID 19 in particular.

Christians should make every *reasonable* effort to avoid spreading a communicable disease. However, this concept must be considered *rationally*. As those of us who have had larger families know, some degree of contagion (especially in winter) is frequently present especially with young children in the household. To state the obvious, humans cannot prevent the spread of communicable diseases but merely mitigate against them.

With regards to COVID 19, it has been demonstrated that its severity (virulence) is generally on par with bad "flu" of other microbial causes especially influenza. The data suggests it's not highly contagious as it is spread very likely (based on its observed behavior) by droplets (person to person contact especially in a family setting) and not aerosol (like measles) and carries, for those in low risk groups, a very low, almost negligible mortality rate.

As COVID 19 is of minor consequence for most of the population, containment efforts are best directed at isolating the *KNOWN* sick and those in high risk populations. How this is to be done can *ONLY* be determined by the patient, his/her physician(s) and their families.

I know by personal medical experience, that many infirm and aged people fear social isolation much more than they fear any risk to themselves by an infectious agent.

- In my original essay I recommended that congregations assemble for worship as follows:
  - (a) High risk individuals should be encouraged to stay away (but *ONLY* if they chose to do so) (b) Congregants who voluntarily attend should feel well, be free of flu like signs and symptoms including fever and without *KNOWN* COVID 19 exposure (without use of appropriate personal protective equipment). (c) Those with tender consciences are to be lovingly and patiently excused.

In these recommendations, *ALL* requirements of the 6<sup>th</sup> commandment have been met. As most worshippers will be in a low risk group, COVID 19 is of little concern. As we have noted, exposure and infection in this population greatly enhances herd immunity (which in turn substantially and increasingly protects those in our families and communities with weakened immune systems).

Those in high risk groups who attend public worship have done so by their free choice. No one's conscience has been violated especially those who feel duty bound to publicly worship having determined by personal assessment that they, in conscience, are not providentially hindered by a virus (the opinions of the civil magistrates in this decision making are irrelevant).

• One last objection must now be dealt with:

The asymptomatic carrier of a communicable infectious disease.

This is frequently a *MAJOR* argument now heard in the COVID 19 debate; it is frequently deployed as well by overly zealous vaccine advocates as they attempt to hinder the vaccine hesitant in their right to informed consent (as all medical treatments and tests carry risk including the possibility of death and disability, competent persons have the God given right to refuse treatment).

The argument is generally framed thusly, "All persons must engage in radical social distancing measures because we may be a 'silent' virus carrier and we don't wish to infect others". While this notion is very sincerely held and well-intended by many, it too must be subject to greater scrutiny.

• It is ABSOLUTELY true that asymptomatic humans infected by a communicable disease can *potentially* spread that disease while having no symptoms. This is especially true of measles but much less so for most viral etiologies of acute respiratory illness.

<u>Studies</u> of influenza viruses have revealed that infectivity is related to the degree of viral shedding which in turn tightly corresponds to clinical severity (high fever, etc.). Sick people shed a logarithmically higher volume of virus than asymptomatic persons during coughing and/or sneezing. "The sicker you are the more virus you will shed".

COVID 19 appears to behave similarly. Asymptomatic COVID carriers (infected persons during the incubation period, many of whom will never develop symptoms), by definition are not coughing/sneezing to excess and by simply covering any cough or sneeze they have coincidentally will greatly mitigate any potential spread.

Very important questions are these:

What can be done about *asymptomatic, potentially but not definitively, infected persons?* If a person is not sick, how can he know with infallible certainty that he has a communicable virus? And at any given point in time how could *any non-sick* person anywhere in the whole world know they were contagious (or not contagious) during any given time frame? When would this situation *not* be true? Of course, the answer is ... never.

• For millennia, Christians have regularly attended public worship during ever present and yearly "flu seasons" and until now nobody gave it much thought. All aspects of civil society functioned normally as most people would avoid others while ill especially if sick with fever. If persons felt well, however, they moved about feely.

Every worship service in world history (or any public gathering for that matter) has been attended to by an asymptomatic person(s) who was *potentially* infected with a communicable disease.

Failure to consider these important questions often causes one to ultimately risk medical absurdity ("reductio ad absurdum") and arbitrariness (as to both for example, the notion that the virus is a respecter of group size and won't spread if less than 11 people have gathered together).

Even now, despite all the hysteria, many medical institutions are rationally dealing with this question (whether it was rational for them to obey the magistrates in the attempted destruction of their business model is another matter).

Every day before work, physicians and other team members are asked a series of questions regarding symptoms. Their temperature is recorded. No fever and no symptoms - one is allowed to interact with patients. This is how it's always been.

• Each man must decide the risks and benefits of his actions as measured by the yardstick of God's moral law. Love for neighbor is not an emotion or sentiment but is demonstrated by an earnest desire to obey (imperfectly in this life) the commands of Christ (John 14:15; John 14:21; John 15:10). Obedience to the moral is love.

A biblically lawful activity, such as attending public worship when not sick, can never be declared unlawful.

We must be very careful not to tell a person that he is sinning by not acting as though he were sick when he truly isn't sick. To do so is to unlawfully bind a man's conscience. A man is not responsible for what he CANNOT know.

## Why is the Heavy Hand of our Lord Now Upon the Nations?

- Historically, especially amongst Presbyterian and Reformed Christians, the idea
  of God bringing temporal, earthly judgements upon a wicked people was hardly
  controversial. Now, however, Christians of many stripes bristle at the notion.
- As God controls all things, promised blessings for obedience (Deuteronomy 27) and cursings for disobedience, it then readily follows that what we now see is a

severe judgement at the hand of almighty God (Deuteronomy 27 – 29, especially 29:24-29).

These chapters in Deuteronomy emphasize the extreme importance of obedience in our individual and corporate walk with God. While the passage contextually deals with ancient Israel as a covenant people, it necessarily follows that those in covenant with Jehovah *of any era* are subject to these same blessings and curses.

 That western civilization (formerly Christendom) was, more or less, in Covenant with God has been manifested by the multitude of church buildings that dot the landscape and was reflected in the constitutions and laws of the early American colonies.

Most importantly, very large numbers of the populace of these "informally covenanted" nations have received God's covenantal sign – water baptism.

Those who have received water baptism are expected to live as Christians and to "make their calling and election sure" ([2 Peter 1:10-11] having received Jesus in repentance and faith as he is offered in the Gospel; and it is that Holy Spirit wrought regeneration of the soul which is the thing signified or typified by baptism. [N.B.: water baptism does not save nor does it guarantee that the recipient is in possession of true saving faith. That is truly known only to God; the doctrine the "invisible church" - Matthew 13:24-30]).

Sadly, and with devastatingly enormous *societal* implications, huge numbers of professors in the *visible* church have repudiated their baptisms by apathy, indifference and apostasy; our Lord now brings severe chastisement.

 Presently, we will not catalog the multitude of unrepentant sins that currently plague the visible church except for but a few.

One noteworthy area of unfaithfulness is the failure of many ministers to preach the whole counsel of God. Dispensationalists and others have largely thrown off the Old Testament and, thereby, much of the moral Law of God. Pietists have internalized and privatized the Christian faith thus leaving civil society prey for savage wolves in the "common sphere".

Many ministers today assume that the persecuted church of the early New Testament era is the *standard* posture for the church *in perpetuity*. They deny

the promises of God for the advancement of the Kingdom of God on earth, and also the template of the law of God in the Old Testament for Christendom in all ages.

Therefore, ordained persecution and failure is the lot of God's people for every age (according to these preachers and theologians). This erroneous teaching is the result of *the* major hermeneutical error of our age; failure to apply the grammatical - historical method to Bible interpretation.

In my own Reformed and Presbyterian heritage, these pietistic and dispensationalistic themes have been adopted by many in the seminaries, pews and pulpits. They recoil at the notion that God's moral Law must be applied to *ALL* of life and have devised unbiblical paradigms to provide cover for their failure to be a prophetic voice to the world around them.

The solution to God's judgments is repentance and renewed faith in the promises of God (2 Chronicles 7:13-14).

 As we affirm that COVID 19 is a definitive judgement on the nations by the triune God, we must realize that this judgement is not by way of the virus itself directly.

As demonstrated by the medical evidence, COVID 19, while very serious for some, causes few problems for most.

The judgement then resides in our cultural responses to the virus. God chastises in many different ways but the sending of confusion and broad delusions in thought are common themes of Scripture. God, in the sending of a small microbe, has caused men to respond in ways never seen before in world history. Many have "lost their minds" (Daniel 4:28-33).

We face a high probability of economic devastation that will leave no one unscathed. Economic crises leave men without resources to fully maintain civilization and will likely result in many more deaths than those caused by coronavirus.

Finally, I believe is important to note that since the civil authorities have tasted the power of being able to "shut down the church" (and may feel emboldened to try it again and again for *any* reason), in the future they may think they have the right to shut the doors of the church because the preachers are opposing homosexual marriage or transgenderism (which God's faithful would vigorously and be expected to oppose).

 Of course, a pandemic is obviously not in the same category as homosexuality, transgenderism and the like. Overt and easily identified sinful directives by the magistrates are rightly and promptly resisted.

A biblical response to the COVID 19 pandemic is a much more daunting and challenging task but, as I have sought to demonstrate, even these circumstances can be reasonably sorted out with the careful use of the many tools our Lord has provided: Scripture (as the ultimate and final authority), the Westminster Standards, biblical law, a proper presuppositional apologetic method, an understanding of biblical church-state relations, use of biblically wholesome man-made civil laws, an optimistic eschatology and a Christian world and life view that self-consciously informs medical, scientific and statistical methodology.

Thank you, my readers, for carefully considering the material presented here. I
realize that many conflicting opinions exist, most especially regarding the
medical aspects of COVID 19. Even amongst Christian physicians differing
interpretations exist.

Nevertheless, when anyone says we need to limit biblically lawful public gatherings for any reason that may or will include the suspension of public worship of the Lord on His Sunday Lord's Day Sabbath, the burden of proof required that we must do so is very, very, very high.

May the Lord bless us as we cry out to Him to provide greater repentance and faith in these unprecedented times. Lord willing, may *all* of Christ's congregations gather very soon, in their respective places, for public corporate worship.