Motion to the Board at September 22, 2024 Meeting:

That the AGA assess the Covid related health risks associated with tournament play at the US Go Congress by seeking the services of person(s) with advanced knowledge of the field to help us design and interpret a survey for each of the three Congresses we have had in the Covid era.

Discussion

The goal is to assess the risk level at a Go Congress, and thus inform development of policy and practice at the Go Congress, and other major tournaments to mitigate known risks inherent in such competition. i.e. Close contact for extended periods, indoors, with many others.

I realize that there is significant reluctance to do this when others (i.e. US Chess and Bridge) have not taken the lead on it. (But FIDE did take proactive measures at the recent Chess Olympiad in Budapest.) It is legitimate to ask why the AGA should take this on when others do not. It is also legitimate to assess the issues for ourselves based on our own circumstances, and our actual experience, which is significantly different in some ways. In my conversations with others, I sense that most folks feel that with the pandemic defined as “over”, there is no need to continue the vigilance engendered by Covid. Few have recognized that the new label doesn’t change the nature of the illness, which is a significantly more dangerous disease than any Flu since the 1917/18 epidemic.

For clarity, I will state my opinions in italics, and facts in normal font, often with citations.

If you believe something stated as fact is not true, please cite a published article to the contrary.

Click the links to see the supporting documentation

The data, limited though it is, suggests that we should do so.

Our exposure when competing is extreme compared to other activities

The risk of illness is very high with respect to long term effects.

The cost of investigation is low.

The cost of mitigation is moderate.

Brief Assessment of our management 2022- 2024

Draft Survey

The assumption that the CDC says Covid is the same as Flu is Not true

Transmission, and recommended precautions (i.e. vaccination, distancing, reporting, etc. are similar, but the diseases are very different with respect to risk. Covid is significantly more serious both short term and particularly long term. CDC Flu Data and CDC Covid Data and CDC Covid/Flu death rates (also cited below).

The data, limited though they are now, suggests we should do so.

Incidence of Covid infection was low in 2022, (1-2%) when precautions were high, intermediate in 2023 when precautions were limited, (3/5 – 5%) and extremely high in 2024 when there were no mitigations in place. (7% minimum) {go top}

Our exposure when competing is extreme, compared to other activities.

Covid is transmitted through the air in tiny normally exhaled breaths. Transmission is dose related. The more such air you breathe, the more likely to get sick and the more serious it is likely to be. A significant exposure is classically defined as 15 minutes within a few feet of another person. We spend hours in direct face to face contact which is extreme exposure due to the extended time and closeness of contact. One study indicated that 80% of cases come from contact for an hour or more and < 10% from exposures under 30 minutes. See This Time Article, which draws from a Nature study (see here) which is a much heavier read. {go top}

The risk of illness is very high with respect to long-term effects.

The rate of serious disease and death is much higher than for Flu."? **(**CDC Flu Data and CDC Covid Data and CDC Covid/Flu death rates) Even if symptoms are initially mild, a significant number of people (ranging from 3.5 to 20% in various studies) have ongoing problems for over three months or even years after recovering from the acute infection. See a Table of long term effects in Nature study noted above or whole article which has a dramatic graphic presentation.

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The cost of investigation is low.

The cost of a survey is low. The cost of obtaining expert help in construction and interpretation is moderate. (Consulting in 2022 cost ~ $1500.) {go top}

The cost of mitigation is moderate. **{go top}**

Even if we determine that testing is essential on arrival and mid-week, the cost, though certainly significant, would be bearable. (In 2022 it was about $7 per test. {go top}

Assessment of Covid Management at Go Congresses 2022 – 2024

History

2022

Strong messaging and precautions

Reported results: 4 cases during Congress, 3 of which were in a single family. Anecdotally 2 more post Congress. The first reported case was on Tuesday evening. With 400 attending this is 1% during, and 1.5% including later reports.

2023

Moderate precautions and messaging. Strong response to reported cases during Congress. Reported results: 14 cases reported. Anecdotally 2 more post Congress. With 410 attending this is 3.4% and 3.9% including later reports.

2024

No proactive policy before or during the Congress

Results pending: an independent survey was provided on the Congress Discord system which had 200 people (out of 565 attendees at Congress) who had signed in at some point. 14 of 42 respondents reported a positive test. Since Covid is not affected by a person's Discord association, a straight extrapolation seems appropriate as a guide for further action. 200/565 = 35%, barely over a third. Applied to the whole population, the arithmetic is 14 * 565 /200 = 40 (14 is to 200 as x is to 565). That comes to 7%, a figure that is minimum, as presumably nobody reports twice or without testing positive, and some folks don't report.

Assessment

While firm conclusions cannot be drawn relating policy to results, the indication amply justifies a more active attempt to document actual results as well as we can.

It is reasonable to conclude that proactive measures did not increase the rate of infection.

R_t (The estimated reproduction rate of an infection over this short point in time) is likely high in a Go Congress environment. I believe a correctly designed survey can provide a good estimate of how high. {go top}

Draft Survey of Go Congress Attendees Regarding their Covid Experience.

Note: this is a draft covering the questions I feel appropriate, NOT a suggestion of how to ask them on an actual survey. Suggestions for improvement are solicited and will be appreciated, but I expect to get expert advice on the final version.

Preamble:

The AGA is concerned about the potential Covid infection risks at major tournaments, particularly the US Go Congress. There are two sections in this survey: health related questions, and opinions about the policies we had. This survey will be done for each of three years in the “Covid era”. So, if you attended all or two you will get a survey request for each. Policies and circumstances were different each year, so please take the time to do them all. We will be comparing results to determine future policy.

Demographics

Your age < 10, 10-19, 20-29,30-39,40-49,50-59,60,69,70,79,80+

How long were you at the Congress? N days

Estimate the number of games you played

Gender (M F X) please

Behavior

Did you routinely mask even when not required?

Were you vaccinated prior to the Congress?

Results

Did you test positive during the Congress?

Did you test positive within 5 days after the Congress?

If you answered yes above:

Did anyone in your family (but not attending the Congress) test positive within 3 to 6 days after you returned?

How long were you ill?

Were you given a diagnosis of “long Covid” because of this infection?

How do you rate each of the following preventive approaches as:

Inadequate

Poor

Adequate

Good

Excellent

Unnecessary

Excessive

Masking requirements

Preliminary testing (This would not be included in the ’23, ’24 surveys as it was not done.

Availability of testing during Congress

Availability of assistance isolating if needed

Availability of information

- Before Congress
- At Congress

Please indicate how you felt about the overall quality of the covid policies at the Congress

Poor, barely adequate, adequate, good, very good, excellent, too much, way over the top

Please share any ideas you have about how we should manage in the future.

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