

In Fast-Moving Pandemic, Health Officials Try to Change Minds at Warp Speed

Even when decades of evidence show a rule can save lives—such as wearing seat belts or not smoking indoors—the debate continues.

January 2, 2021 By Katheryn Houghton and Kaiser Health News

Nine months into the pandemic that has killed more than [320,000](#) people in the U.S., Kim Larson is still trying to convince others in her northern Montana county that COVID-19 is dangerous.

As Hill County Health Department director and county health officer, Larson continues to hear people say the coronavirus is just like a bad case of the flu. Around the time Montana's governor [mandated](#) face coverings in July, her staffers saw notices taped in several businesses' windows spurning the state's right to issue such emergency orders.

For a while, the county with a population of 16,000 along the Canadian border didn't see much evidence of the pandemic. It had only one known COVID case until July. But that changed as the nation moved into its third surge of the virus this fall. By mid-December, Hill County had recorded more than 1,500 cases — the vast majority since Oct. 1 — and 33 people there had died.

When Larson hears people say pandemic safety rules should end, she talks about how contagious the COVID virus is, how some people experience lasting effects and how hospitals are so full that care for any ailment could face delays.

“In public health, we've seen the battle before, but you typically have the time to build your evidence, research showing that this really does save lives,” Larson said. “In the middle of a pandemic, you have no time.”

Public health laws typically come long after social norms shift, affirming a widespread acceptance that a change in habits is worth the public good and that it's time for stragglers to fall in line. But even when decades of evidence show a rule can save lives — such as wearing seat belts or not smoking indoors — the debate continues in some places with the familiar argument that public restraints violate personal freedoms. This fast-moving pandemic, however, doesn't afford society the luxury of time. State mandates have put local officials in charge of changing behavior while general understanding catches up.

Earlier this month, U.S. Surgeon General Jerome Adams stood next to Montana's governor in Helena and said he hopes people wear masks because it's the right thing to do — especially as COVID hospitalizations rise.

"You don't want to be the reason that a woman in labor can't get a hospital bed," Adams said, adding a vaccine is on the way. "It's just for a little bit longer."

He spoke days after state lawmakers clashed over masks as a majority of Republican lawmakers arrived for a committee meeting barefaced and at least one [touted](#) false information on the dangers of masks. As of Dec. 15, the Republican majority hadn't required masks for the upcoming legislative session, set to begin Jan. 4.

And now a group opposed to masks from Gallatin and Flathead counties has filed [a lawsuit](#) asking a Montana judge to block the state's pandemic-related safety rules.

Public health laws typically spark political battles. Changing people's habits is hard, said [Lindsay Wiley](#), director of the health law and policy program at American University in Washington, D.C. Despite the misconception that there was universal buy-in for masks during the 1918 pandemic, Wiley said, some protesters intentionally built rap sheets of arrests for going maskless in the name of liberty.

She said health officials realize any health restrictions amid a pandemic require the public's trust and cooperation for success.

"We don't have enough police to walk around and force everyone to wear a mask," she said. "And I'm not sure we want them to do it."

Local officials have the best chance to win over that support, Wiley said. And seeing elected leaders such as President Donald Trump [rebuff](#) his own federal health guidelines makes that harder. Meanwhile, public shaming like calling unmasked people selfish or stupid can backfire, Wiley said, because if they were to give in to mask-wearing, they would essentially be accepting those labels.

In the history of public health laws, even rules that have had time to build widely accepted evidence weren't guaranteed support.

It's illegal in Montana to go without a seat belt in a moving car. But, as in [13](#) other states, authorities aren't allowed to pull people over for being unbuckled. Every few years, a Montana lawmaker, backed by a collection of public health and law enforcement organizations, proposes a law to allow seat belt traffic stops, arguing it would save lives. In 2019, that request didn't even make it out of committee, squelched by the arguments of personal choice and not giving too much power to the government.

Main opposition points against public health laws — whether it's masks, seat belts, motorcycle helmets or smoking — can sound alike.

When Missoula County became the first place in Montana to ban indoor smoking in public spaces in 1999, opponents said the change would destroy businesses, be impossible to enforce and violate people's freedom of choice.

"They are the same arguments in a lot of ways," said Ellen Leahy, director of the Missoula City-County Health Department. "Public health was right at that intersection between what's good for the whole community and the rights and responsibilities of the individual."

Montana adopted an indoor smoking ban in 2005, but many bars and taverns [were given](#) until 2009 to fall in line. And, in some places, debate and [court battles continued](#) for a decade more on how the ban could be enforced.

Amid the COVID pandemic, Missoula County was again ahead of much of the state when it passed its own mask ordinance. The county has two hospitals and a university that swells its population with students and commuters.

"If you have to see it to believe it, you're going to see the impact of a pandemic first in a city, most likely," Leahy said.

Compliance hasn't been perfect and she said the need for strict enforcement has been limited. As of early December, out of the more than 1,500 complaints the Missoula health department followed up on since July, it sent closure notices to four businesses that flouted the rules.

In Hill County, when the health department gets complaints that a business is violating pandemic mandates, two part-time health sanitarians, who perform health inspections of businesses, talk with the owners about why the rules exist and how to live by them. Often it works. Other times the complaints keep coming.

County attorney Karen Alley said the local health officials have reached out to her office with complaints of noncompliance on COVID safety measures, but she has not seen enough evidence to bring a civil case against a business. Unlike other health laws, she said, mask rules have no case studies yet to offer a framework for enforcing them through the Montana courts. (A handful of cases against businesses skirting COVID rules were still playing out as of mid-December.)

"Somebody has to be the test case, but you never want to be the test case," said Alley, who is part of a team of three. "It's a lot of resources, a lot of time."

Larson, with the Hill County Health Department, said her focus is still on winning over the community. And she's excited about some progress. The town's annual live Nativity scene, which typically draws crowds with hot cocoa, turned into a drive-by event this year.

She doesn't expect everyone to follow the rules — that's never the case in public health. But Larson hopes enough people will to slow down the virus. That could be happening. By mid-December, the county's tally of daily active cases was declining for the first time since its spike began in October.

“You just try to figure out the best way for your community and to get their input,” Larson said. “Because we need the community’s help to stop it.”

[This story](#) was published by Kaiser Health News on December 28, 2020.

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