

Food availability and the coronavirus pandemic

In recent days, news about the coronavirus (COVID-19) pandemic has captured the attention of nearly everyone. China expects the severity of the outbreak there to continue to recede while the impact on Italy is significant with the number of deaths increasing.

Epidemiologists in the US are suggesting policies that would flatten the crest of the outbreak in hopes of reducing the risk that a surge in severe infections would overwhelm the capacity of the medical system to meet the needs of the ill while, at the same time, reducing the total number of deaths.

In the midst of all of this, a trip to most, if not all, grocery stores would seem to suggest that the country is facing wartime-like shortages of fruits, vegetables, and meats, as well as toilet paper, face masks, and alcohol-based hand sanitizer. These empty shelves are not the result of shortages of these items, but rather panicked buying by consumers who fear that they will be confined to home and unable to get out and make their regular purchases.

In addition, families are needing to purchase additional groceries to feed children whose public schools will not be serving school breakfasts and lunches, young adults who have returned home for the rest of the semester as their colleges have closed switching their instruction to online classes, and adults who are being asked to telecommute from home.

Despite the specter of food shortages, the problem of empty shelves will be solved as the food supply chain responds to a short-term surge in consumer demand by increasing its capacity to get product on store shelves.

COVID-19 will not have the same impact on all food supplies. Most milk, for instance, comes from domestic sources and at the present time it is in an oversupply situation that has driven prices to levels below the full cost of production. There may be short-term hiccups in getting milk to a given location, but there is no shortage of milk. Delivering this supply to consumers could be affected if workers in a given processing plant were to be infected by COVID-19, but that will likely be a localized problem.

While chicken has figuratively flown off the shelves of grocery stores, most processors have a significant supply of frozen chicken in their lockers. We are not in a situation like the one we experienced a couple of years ago when the bird flu struck, and millions of chickens and turkeys had to be euthanized in an effort to control the spread of the disease. The US has enough feed grain and poultry facilities to assure a steady supply of meat to consumers.

The story of fruits and vegetables is a little more nuanced because during the winter about 30 percent of the US produce supply comes from outside the country. Some slowing of that supply could result if a significant number of inspectors at the border were to be infected by COVID-19. This potential supply glitch will be offset by the increase in domestic production as spring and summer result in increased US production of these products.

With pork exports to China on the decline, in part as the result of the US-China trade dispute, US consumers are assured of a fully adequate supply of pork products for the foreseeable future. Again, the only caveat to this optimistic view is the potential shutdown of a plant where workers have been infected by COVID-19.

Because most agricultural production takes place in sparsely populated areas of the country, the limits on gatherings of people to 10 will have a more limited impact on rural than urban areas. Unless the dynamics of the disease changes significantly, the production of food that

feeds the US population will likely not experience any significant disruption, despite the temporary food supply chain delays.

With the spread of this disease, we can expect significant disruptions to the supply chain of pharmaceutical products and the production of intermediate components that are a part of cars, trucks, cellphones, and other more durable products we use in our everyday life.

In the end, the more we pay attention to the recommendations of epidemiologists and our personal physicians, the more likely it is that we can hold the number of deaths from this pandemic to a minimum.

Once we get to that point, we need to look at investing in the kind of biomedical research that will allow the world to respond more effectively to the next potential pandemic. As with COVID-19 and the diseases before it—AIDS, SARS, MERS, Zika, and Ebola—the evolution of the next zoonotic disease is always just around the corner and we need to be prepared.

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