Tanya Domi:
Hi, this is Tanya Domi. Welcome to The Thought Project recorded at The Graduate Center of the City University of New York, fostering groundbreaking research and scholarship in the arts, social sciences, and sciences. In this space, we talk with faculty and doctoral students about the big thinking and big ideas generating cutting edge research, informing New Yorkers and the world.

John Torpey is a Presidential Professor of Sociology and History and Director of the Ralph Bunche Institute for International Studies at The Graduate Center of the City University of New York. He is the author or editor of 10 books on topics ranging from East German dissidents and intellectuals, the invention of the passport and state practices and its use, reparations for historical injustices, transatlantic relations and technological change throughout history.

His books have been translated into German, French, Chinese, Japanese, Spanish, Portuguese, and Swedish. He has served in leadership positions for the Eastern Sociological Society on the editorial boards of Theory and Society, The Journal of Human Rights and a book series on politics, history, and social change as well as review committees for grant awards and book prizes. He writes a regular column for Forbes.com and has commented for the Hill, Open Democracy, Huffington Post, the BBC, NPR's On the Media among many others. Welcome to the thought project, John Torpey.

John Torpey:
Thanks. Nice to be here, Tanya.

Tanya Domi:
As we begin our discussion today with professor Torpey about the COVID-19 pandemic in America and in the world and how perhaps it compares with the 1918 Spanish flu epidemic. America has sustained 26.5 million COVID cases, approximately 447,000 deaths, with approximately 3,400 Americans dying daily according to the latest CDC data.

Worldwide, 103,377,424 million cases of COVID resulting in over 2,236,454 million deaths. As many public health officials are saying with several different vaccines available in the US and around the world, this appears to be a race against time to save lives. So, professor Torpey, you've written a comparative essay on the 1918 Spanish flu and you pointed out one major contrast that I thought was really interesting for our listeners, is that the 1918 epidemic took younger lives. Keeping in mind, as you point out, that America was a much younger nation then while COVID-19 and its current variants are devastating to the elderly and maybe with those who have underlying conditions, including those who are most vulnerable in essential jobs in America, what are your thoughts?

John Torpey:
Well, it was a strikingly different disease in the sense that, as you say, I mean, it killed a lot of people in the prime of their lives. So, the mortality curve was a kind of W shape. Whereas ours is more like a nice Nike swoosh, it goes from fairly low and then rises very steeply to the right. And as you get to the age of 65 basically, and something like 80% of all deaths are people 65 and older.

So ,one of the things that was different about it, I think in 1918, was that they produced a lot of orphans, people who were parents were the ones often who were dying, because one of the peaks was in the 20 to 40 age bracket.

Tanya Domi:
inaudible 00:04:09.
John Torpey:
So, of course that made it all much more horrific. What we're facing is something that has reduced the lifespan primarily of older people, many of whom are quite old. So, it's like my mother who's 92 and getting vaccinated today as it happens. But, I mean, that's maybe one other thing to say about now as opposed to then, which is that we have vaccines that are, I think, simply miraculous. I mean, it's been less than a year since this virus was identified and the genome was sequenced that we have multiple effective vaccines.

Tanya Domi:
It's remarkable. Yes.

John Torpey:
Various people have said, it's not vaccines that save people, it's vaccinations. So of course now it's the real logistical challenge of getting this vaccine or these vaccines into people's arms. And it was perhaps inevitable that that was going to be somewhat complicated and difficult, but I feel like the Biden administration is at least focusing intently on this problem, because as various people have said, the virus is the economy at this point, without getting control of the virus, we don't have control of the economy.

Tanya Domi:
The economy. So, as a matter of fact, president Biden and other public health officials have advised that we could hit the 600,000 mark in March of those who have died related to COVID. There is a considerable amount of concern now about this UK variant, which is highly contagious. Public health officials have warned that this could really escalate casualties in the spring if people do not wear a mask and socially distance. And not all the current vaccines are highly effective in repelling the UK or the South African variant.

And there are warnings now that if Americans do not take proper precautions and get vaccinated, that we could actually generate an American variant of COVID-19. This is a significant public health threat. And I think this really confronts the Biden administration. What are your thoughts about this? I mean, we really don't have a parallel to this historically. I mean, we did have the Spanish flu, but now we have vaccines, as you said, and you need vaccinations, but this could really change up if the level of infection remains as high as it is right now in America.

John Torpey:
Yes. I mean, people have to continue to observe the various strictures that have been in place for basically a year. And that indeed were implemented in 1918 as well. People keeping their distance from each other, not coughing or sneezing wantonly into the neighborhood and washing their hands and things like that. There's nothing new about any of those kinds of concerns.

Tanya Domi:
That's true.

John Torpey:
But I guess I would slightly take issue with your characterization of the situation when you said these vaccines are not highly effective against these new mutations. I mean, I think that's not really the case.
They're still very effective in the 70%-80% range, even if they're no longer in the 90%-95% range that had been originally discerned from the first rounds of the stage three clinical trials that led to the approval, even if only for emergency use of the Pfizer and Moderna vaccines.

Tanya Domi:
I was talking about the variants. I'm talking about the variants.

John Torpey:
The variants?

Tanya Domi:
Yeah, the UK and the South African variants.

John Torpey:
Yes. Well, I mean, viruses mutate, I mean, it's one of the things they do and various people have pointed out. They mutate if they're allowed to replicate. And so what we need to do is stop their replication, which is again, a plea for people social distancing, wearing masks, et cetera. And so, I think, relative to the situation that we were in, whatever, two months ago, before these vaccines were approved, we're still at a much better situation than we could possibly have imagined being.

And we have to remember that, flu vaccines are approved at the level of 50% efficaciousness. And it was originally expected that if anything, that new vaccines would be approved if they were 50% effective. And what I've seen as far as the numbers on the effectiveness, efficaciousness in the face of these new variants is still quite high, it's in the 70% to 80% range.

So, there are many reasons obviously to be concerned about this virus, but we're doing, in certain ways, really, really well in the face of a real catastrophe. And here's where, again, I guess I would compare our situation with that of the people in 1918. When it's generally estimated that around the world, something like 50 million to 100 million people died. And you have to remember that that was at a time when the world population was about a quarter of what it is today.

So to be in a comparable situation to the one they faced, we're talking about 200 million to 400 million deaths. And as I think you said, today we're at the figure of around two and a quarter million deaths. So this is bad. And part of what I'm trying to puzzle out really is how we have responded to this catastrophe in ways that are so different from what was done 100 years ago, even though it was so much worse then.

And I think part of this, to make a libertarian point, part of this has to do with the role of the federal government. In 1918, as far as I can tell, very few people expected much in the way of response from the federal government, which was still relative to GDP, a fairly small affair. And you also mentioned World War I. I mean, in many ways, there was a similar kind of denialism that went on in World War I, because Woodrow Wilson and his lieutenants were very reluctant to call attention to the epidemic, because they had a war to fight.

And there was a way in which it was thought that this would be bad for morale to call attention to it. Even though many of the people who died were in fact soldiers and they were the kind of super spreaders. They would congregate at these military bases before being shipped out mainly to Europe.
Right, to Europe.

John Torpey:
And spreading the disease there. I mean, there's still confusion and controversy over where exactly it started.

Tanya Domi:
About how many died. Yeah.

John Torpey:
But a lot of people died, because they were in the military. So, I have sometimes wondered about whether one might think about a parallel between World War I and what you might call Donald Trump's war on American society.

Tanya Domi:
That's an interesting analogy.

John Torpey:
The way in which he sort of weakened our resolve and our ability to respond to this disease by undermining trust above all, I think, undermining trust in government and of course-

Tanya Domi:
In public health as well.

John Torpey:
... his denial about what was going on and his crazy recommendations that we inject ourselves with things like Lysol and that would clean things up. He was a kind of menace and he, let's say, did not help us really respond to the situation, except in the sense, perhaps of having promoted Operation Warp Speed, which has been a very important outcome of things that he put in place. The problem, in that sense, was as so often, he couldn't get out of his own way when it came to claiming success for things that he did, things that were good things.

Tanya Domi:
Yeah. He always stepped on his own message.

John Torpey:
Yeah, he just couldn't get out of his own way I would say.

Tanya Domi:
Exactly. Well, there's apparently about 20 million doses missing, that's an interesting thing, see if anything comes of that. But you really do point out something quite interesting in terms of the fact that president Wilson, as you said, didn't really want to discuss it and they didn't discuss it. And Trump did the exact opposite in a way. He asserted in an interview with Bob Woodward that he actually downplayed it on purpose. And so, that's an interesting parallel in a way.
John Torpey:
Well, there’s interesting irony here also about the fact that it's known as the Spanish flu, the 1918 flu, which was a product of the fact that the Spanish were not involved in the war and therefore did not have the kind of military censorship that was imposed in so many other places. And so, the press there talked about this flu, whereas other governments were trying to get their press not to talk about it. And so, it got talked about more in Spain and people therefore thought it was from Spain.

Tanya Domi:
But wasn't it from Kansas?

John Torpey:
Well, there’s one-

Tanya Domi:
There's a possibility, one theory of it, right?

John Torpey:
... [crosstalk 00:13:11] story is that it came from Kansas, another is China. I think another story has it came from France. It's one of these mysterious things, we're dealing with germs and viruses that are very elusive and hard to pin down where did this first happen. I mean, I think we know fairly definitively that the coronavirus that we're dealing with came from this Wuhan in China.

Tanya Domi:
Wet market allegedly.

John Torpey:
Yeah, in a wet market. I mean, there's still some debate about whether it might have been produced in a government lab, but that's mostly seen as gossip essentially.

Tanya Domi:
Yes, and then Trump sort of branded it, the China-

John Torpey:
Yes. Of course.

Tanya Domi:
... yeah, he branded it as the China pandemic.

John Torpey:
Right. It's a reminder that these things are always political in certain ways.
That's another analogy. That's an interesting one. And also it has smeared the World Health Organization's handling of it as well. That'll be interesting to see, given that the United States has rejoined the World Health Organization, but there's been a lot of criticism of the WHO and how it's handled.

John Torpey:
Yeah. I mean, I think there were certain missteps early on. I think there was a lot of confusion. I mean, to some degree, I think there's, again, a sort of analogy to war and the so-called fog of war, that when you first enter into battle, everything goes sort of dark and cloudy.

Tanya Domi:
You're not really clear where you're at.

John Torpey:
And this was a new virus. And at one point Trump was talking, "Well, there's one person who has this virus in the United States. It's fine." And I mean, it's hard to know that one virus, one person who's sick is going to turn into this kind of problem.

Tanya Domi:
Pandemic.

John Torpey:
But the thing that really got me interested, I guess, in working on this is the fact that I was listening to a podcast or webinar or something with a guy named Harold Varmus, who is a Nobel prize winning virologist, who, if I recall correctly, used to run the NIH, the National Institutes of Health. And he was ruminating about where this all might go. Let's say this was six to eight months ago probably. And he said, "Well, I worry about the collapse of society." Now, as a sociologist that got my attention.

Tanya Domi:
Of course.

John Torpey:
Not the sort of thing that you'd necessarily expect a biologist to say, but I was quite stunned in a way by that comment. And so, I began to really wonder what did that mean exactly and what would it mean and how different was it from the experience that the people had 100 years ago when they faced something really much worse. And people did, then, talk also about the possibility of the collapse of civilization. But there's a way in which it also appears that there was obviously a lot of mourning of people who died, but there was also a way in which they seemed more used to this kind of thing.

And I think they were more used to this kind of thing. I mean, epidemic diseases were still much more common. And we, in the 20th century, I mean, in the 21st century, but as a result of developments in the 20th century, you'd read in-

Tanya Domi:
[inaudible 00:16:34].
John Torpey:
... distinguished scholars books about these pandemics that we don't have to worry about those kinds of things anymore. And to some degree that was true. A vaccine was developed for polio and people rushed to get their kids polio vaccines so that-

Tanya Domi:
Yeah. That was part of my youth. Yes.

John Torpey:
Yeah, exactly.

Tanya Domi:
Yeah. Those of us [inaudible 00:16:53] 60s.

John Torpey:
We developed a number of vaccines, smallpox basically doesn't exist anymore. Tuberculosis is largely under control.

Tanya Domi:
You can now get measles and mumps, and [crosstalk 00:17:03].

John Torpey:
Yes, you can get other things, but that's because people have refused to have their kids vaccinated.

Tanya Domi:
Well, that's true too.

John Torpey:
And these things are now [crosstalk 00:17:10] rampant again.

Tanya Domi:
No, I was saying we have a vaccine for it. Yeah. That's actually an interesting point. And you also point out in one of your articles about the increase in crime, and you're seeing spikes in crime in New York City. And also there's been some discussion about it in Chicago. Of course, Chicago allegedly has a lot of crime anyway. But this spike in New York is probably effected not only maybe by, or shaped by the pandemic, but also there's been a bit outcome of all the marches and all the confrontations with police, where police are in relationship with the mayor. So there are a lot of other mitigating factors. Would you agree?

John Torpey:
Yeah. I mean, what's leading to the increase in crime and more specifically in homicides, which is the really worrisome thing is, as far as I can tell so far, unclear. But it's hard to imagine that it doesn't have something to do with people being isolated, people being locked up in their homes for extended periods of time. It turns out, we learned from this experience that we really are social creatures.
And the other thing is that it affects different people different ways. And so, I think, a certain number of people who've been deprived of a livelihood, these caused mental health kind of problems. And probably people are a little edgy and anxious and maybe sometimes they get overexcited, shall we say, and bad things happen. So I haven't seen anything yet, to be honest, about the causes of this. But it's very worrisome.

Tanya Domi:
Sure. Of course it is. And so, the pandemic struck New York City first in the United States in terms of a real public health crisis, which was in March last year. And it's exacted great suffering and all of us who work at CUNY have been working from home since March 13th. New York City looks like a ghost town, in particular, in the Midtown area where The Graduate Center is located. I've been down there a couple of times, and really it's like out of a film.

And this pandemic economy's been a wrecking ball. And our colleague, Paul Krugman, has acknowledged the need, as you've pointed out in your articles, about shutting down the economy, because it's just simply too dangerous to go to work, which is why he, among many other economists, are saying the suffering Americans have to be mitigated, this concern about the world and my neighborhood and my city is falling apart.

And to get the country on a healthier footing, it seems like under Trump and the Republicans who were elected to really foot the bill in a way that would be effective long-term without coming back several times. And it now seems that Biden's got to package at $1.9 trillion that could actually, with the previous bill, put $2,000 in people's bank accounts every month. Also, just pointing out, Mimi Abramovitz, another colleague of ours, who does social work, she's described this current human needs situation as great as anything that's ever confronted the United States going back to the great depression. And she says, "But it's worse in this situation, because we're much bigger, we have more people, the homelessness issues, people are being evicted, this sort of thing is all part of trying to get the disease under control so that the economy can kick back in." What are your thoughts about how these things are connected? And is there a light at the end of the tunnel?

John Torpey:
Well, I think the vaccines are the light at the end of the tunnel. And we have to be on our guard and not get infected until we get vaccinated. And of course, vaccinating this many people is going to take a while. But I mean, on the economic side, I mean, one of the things that struck me is, I mean, one person has called this an affluence recession. So, what happened was, largely because of government, many businesses were forced to close and they tend to be in the so-called touch economy, where people have to interact face to face in order for the activity to take place. So, it's entertainment, it's bars-

Tanya Domi:
Restaurants.

John Torpey:
... it's restaurants, it's travel-

Tanya Domi:
Travel.
John Torpey:
... leisure, hotels, entertainment, all these kinds of activities that were deemed essentially, either non-
essential or simply too likely to lead to some kind of spreader or super spreader event. So, I think Paul
Krugman used a nice metaphor to talk about this, which was that the economy had to be put in a kind of
medical coma. And the response to the medical coma is, I mean, the term that's used to talk about, let's
say, Biden's current bill is that it's a stimulus bill. And I think that's misguided. It's really more about
keeping people tided over with an income who are in jobs that they lost for no reason, the inadequacy
of the business, the business may have been perfectly fine, it was just told to shut down because it was
a restaurant or a bar or something, was deemed not a good thing to have happening for COVID reasons,
not for a business reason. So, that's what this money is really all about.

Tanya Domi:
Yeah. And it's going to go right back out, because people don't have money and they're going to spend
it, because they need to buy food and they need to pay their rent and to live. And so, that will circulate
back very quickly.

John Torpey:
Well, again, I mean, one of the things that's been said from the beginning is that we're all in this
together. And in a certain sense, of course, that's true. The virus doesn't care whether you're rich or
poor. But when it comes to the social consequences of how we've responded to it, it is very different.
And one of the things that's been different is precisely that middle and upper middle-class people who
have held onto their jobs, because they can work remotely, are making the same money they used to
make. And they don't have restaurants and bars and concerts and sporting events and all these things to
spend their money on. So, the savings rate has gone much higher for those groups.

Tanya Domi:
This is very true.

John Torpey:
... and not for poor people who, as you say, would indeed spend the money if they got it.

Tanya Domi:
If they get it. Yes, absolutely. And when you see pictures of all the people who've died in New York City
that worked for the MTA, these are essential workers. And so, there's been a disproportionate impact
on those who are the most vulnerable. That's one of the tragedies of this pandemic.

John Torpey:
Yes, of course.

Tanya Domi:
It's also a revelation. And I think that maybe there's an opportunity for the Biden administration to seem
to be able to correct some of these disproportionate effects among the most vulnerable. For all practical
purposes, professor Abramovitz has said, the war on government started under Reagan. And so, you've
shredded the social welfare policy of the country, now in its greatest need, there just isn't a lot there to
pull from for those who are the most vulnerable.
John Torpey:
Right. I also think that you have to appreciate that there really are certain jobs out there that the rest of us would not survive were they not carried out. And I mean, a lot of stuff, it turns out you can put online and everybody can buy everything from Amazon.

Tanya Domi:
Except the people who have to package it out.

John Torpey:
Yeah. People have to package that stuff up. And there are people who have to work in grocery stores and all these kinds of things that you suddenly realize how important these people are to the economy and to us, I mean, not to some abstraction called the economy, but to us.

Tanya Domi:
Right, so we can live. Absolutely.

John Torpey:
Yeah, exactly.

Tanya Domi:
Absolutely, day-to-day life.

John Torpey:
And my sense of a certain amount of the cheerleading for heroes and that sort of thing. It seems to me, it's received with mixed enthusiasm by the people that it's meant to praise. But it's also a question of whether these people are really paid as well as they should be. And that's one of the things I think really should be addressed as a result of this crisis, it's the minimum, I mean-

Tanya Domi:
The minimum wage.

John Torpey:
... the $15 minimum wage in this $1.9 trillion bill that Biden is pushing is seen by Republicans as part of a-

Tanya Domi:
Yeah. They think-

John Torpey:
... as not part of COVID relief, but I think that's wrong in various ways.

Tanya Domi:
I agree with you as well. I mean, for those of us who are able to work from home, and here we are, and I basically work for two universities and you as well, you work at The Graduate Center. And we've been experiencing, in terms of teaching online is a stop-gap measure for the pandemic that doesn't feel the same being in the classroom with students. And of course you're probably mentoring graduate students. And that definitely affects, I think, relationships, especially when you're going for an advanced degree like a PhD.

So, it's really affected higher education. And I mean, the labs need to stay open. Those people who are doing research, scientists. And being in a classroom is very, very different than being online in a number of ways, although it is a good temporary fix. There's a lot of speculation that this could actually reshape higher education. What do you think about that?

John Torpey:
Well, I think, first of all, I'm very grateful to Zoom and secondarily to Microsoft for Microsoft Teams. And yeah, this is another thing I've thought about in comparison to 1918 when the telephone was new, relatively new and by no means everybody had one. So, the level of isolation that they experienced when there were also a lot of business closings and you see pictures of empty streets in New York and that sort of thing. They went through much the same. And we have these communications technologies so that you and I can actually look at each other and have a conversation. It's not the real thing, for sure, but it's a hell of a lot closer than being stuck in our respective dwellings without any contact whatsoever. So, I think that has to be mentioned.

Tanya Domi:
Fair enough. And you are a sociologist. The other thing that I wanted to bring up is about work, working from home, because a lot of jobs didn't want people, a lot of employers didn't want people to work from home. And a lot of us have proven. I mean, I'm not a full-time faculty member, but in my other life, which I'm talking to you in my role with this podcast, is that we've been able to do everything from home. And a lot of people though, there's been conversations, I've seen some articles in The Atlantic magazine by a journalist by the name of Amanda Mull. The idea is, is like, "No, I don't want to go back to the office. Hell no." So it's a really interesting development too and I pointed out to you before we started, that British Petroleum closed their brick and mortar office, famous office in London. And I think that the fact that many businesses seem that they're going to downsize brick and mortar operations. And that's a different thing too, and as a sociologist, I would think that's interesting as well.

John Torpey:
Well, I mean, two things. I mean, first is, I wanted to finish saying something about the higher ed. It's not about the PhD level, but about the undergraduate level. And that is where people are looking for the residential college experience that we had had traditionally in the United States for a long time. That is under, obviously, severe stress. And higher ed institutions, four year colleges that rely entirely on the tuition of the students who pay them to go to school there are, many of them, facing serious trouble.

I mean, how many of them will end up closing, obviously, remains to be seen, but some are just simply not going to have the financial deep pockets to weather this. And on the other hand, as far as the question of work, I don't especially like working at home all the time, but I certainly like doing it when I mostly had to go in. So, now it’s, I think we're looking at a situation where people realize that they could maybe split the difference. And I think a lot of businesses are seeing similar possibilities, cutting down on the amount of rent they have to pay for buildings.
Tanya Domi:
Overhead.

John Torpey:
As you were, I think, saying before it's been discovered by people who've looked into this, that productivity has not declined. In fact, in some ways it seems to have improved as people have worked from home.

Tanya Domi:
Yeah, because we don't have to go to as many meetings.

John Torpey:
Well, I mean, the famous management guru, Peter Drucker once said, "You can meet, or you can work."

Tanya Domi:
[inaudible 00:31:11].

John Torpey:
So the question meetings is still up for grabs, but what they're worried about, I think, and with good reason is that the so-called water cooler conversations they'll have, when they're physically in the same place, won't happen if we're isolated.

Tanya Domi:
That's true. [crosstalk 00:31:31] you see somebody in the dining facility, like I would see you and say, "Oh, what are you doing right now? What do you working on?"

John Torpey:
It's hugely important.

Tanya Domi:
I miss those conversations, I miss those conversations a great deal.

John Torpey:
Yeah. They're very important. I think there's no doubt about it. But I do think, if only for cost reasons, a lot of companies are going to cut back and just say, "We can use half the space and people can come to the office on a staggered schedule," and there's no reason they can't do that. So I think something like that will happen in the future.

Tanya Domi:
So, just leave us with your thoughts on, and we now have this new administration that they seem to have a plan. Their messaging is really very strong. You have the scientists that are out two times or three times a week with no staff, no president or vice president up there with them. And they're racing to get shots into arms and purchasing more vaccine as well. We're almost one year into this. And what are your thoughts as we go forward from this point, from the anniversary, which is quickly approaching?
John Torpey:

Yeah. Well, the little piece that I sent you called Comparing Pandemics was in a way an effort to cheer people up and to show that we're really much better off than people were 100 years ago. The fact that these vaccines have been found so quickly, and there are now five or six that have been approved, if not everywhere, but including this vaccine in Russia. Those are all incredibly positive things.

I mean, the thing that I worry about and which apparently Michael Lewis, the Powerball guy, has also been worrying about is whether we're ready for the next one. Because part of the way this happened was we let down our guard, we really weren't prepared, even though the Obama administration had done some-

Tanya Domi:

Had done planning.

John Torpey:

... gaming of these situations and had a playbook, it was set aside and we were left incredibly vulnerable. And the fact is since 1918, it's often seen as the so-called forgotten pandemic as Alfred Crosby put it. And it was remembered by virologists and people who work with, epidemiologists. And they've been worried about it for a long time. And I think, in some sense, the greater concern about a pandemic before this one was really with a return of a flu that was airborne and deadly.

So, I think we have to pull ourselves together and get the scientific expertise back, focused on the question of how to keep this kind of thing from happening again. I mean, it's one of these things where when nothing seems to happen, it's hard to get the funding in Congress, what are we worried about? This isn't going to happen? Or it seems very remote. The problem is, it may be remote, but the consequences are extremely grave.

I remember in 2008, coming home from The Graduate Center, getting off the train and walking into my house, having heard that Lehman Brothers had collapsed and there was speculation about whether the world economy was going to crash-

Tanya Domi:

Would crash.

John Torpey:

... and what did that mean? I mean, and that was a catastrophe for many, many people, who lost their homes. But I don't think it really is anything quite like this, which has its own public health consequences and the economic consequences. So this is bad.

Tanya Domi:

Thanks for tuning into The Thought Project and thanks to our guest, Presidential Professor John Torpey of The Graduate Center, CUNY. The Thought Project is brought to you with production, engineering and technical assistance by Kevin Wolfe of CUNY TV. I'm Tanya Domi, tune in next week.