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Hang in There, Help Is on the Way

Times are tough now, but the end is in sight. If we hunker down, keep our families safe during the holidays and monitor our health at home, life will get better in the spring. Here's how to get through it.



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A guide to the last months (we hope) of the pandemic

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Everyone is tired of living like this. We miss our families and our friends. We miss having fun. We miss kissing our partners goodbye in the morning and packing school lunches. We miss travel and bars and office gossip and movie theaters and sporting events.

We miss *normal* life.

It has been a long, difficult year, and there are many tough weeks still ahead. The coronavirus is raging, and the United States is facing a grim winter, on track for 450,000 deaths from Covid-19 by February, maybe more.

But if we can safely soldier through these next few months, then normal life — or at least a new version of normal — will be within reach. New vaccines that are highly protective against coronavirus are being rolled out right now, first to health care workers and the most vulnerable groups, and then to the general population this spring.

“Help is on the way,” says Dr. Anthony S. Fauci, the nation’s top infectious disease expert. “A vaccine is literally on the threshold of being implemented. To me that is more of an incentive to not give up, but to double down and say, ‘We’re going to get through this.’”

The vaccine won’t change life overnight. It will take months to get enough people vaccinated so that the virus has nowhere to go. But the more everyone does their part to slow down the virus now — by wearing a mask and restricting social contacts — the better and faster the vaccine will work to slow the pandemic once we can all start getting vaccinated this spring.

“Why would you want to be one of the people who is the last person to get infected?” says Dr. Fauci. “It’s almost like being the last person to get killed in a war. You want to hang in there and protect yourself, because the end is in sight.”

(1)

Hunker Down for a Little Bit Longer

The pandemic is surging, but as bad as things are, the end is in sight. By doubling down on precautions, we can slow the virus and save lives.



A crucial number to watch this winter is the test positivity rate for your state and community. The number represents the percentage of coronavirus tests that are positive compared to the overall number of tests being given, and it’s an important indicator of your risk of coming down with Covid-19. When positive test rates in a community stay at 5 percent or lower for two weeks, you’re less likely to cross paths with an infected person. Since the fall, the national test positivity rate has crept above 10 percent, and it’s been 30 percent or higher in several states.

Rising case counts and rising test positivity rates mean there is more virus out there — and you need to double down on precautions, especially if you have a high-risk person in your orbit. Cut back on trips to the store or start having groceries delivered. Scale back your holiday plans. Don’t invite friends indoors, even for a few minutes. Always keep six feet of

distance from people who don't live in your home. Skip haircuts and manicures until the numbers come down again. Wear a mask.

Close your leaky bubble.

Here's the harsh reality of virus transmission: If someone in your family gets sick, the infection probably came from you, another family member or someone they know. The main way coronavirus is transmitted is through close contact with an infected person in an enclosed space.

"One of the challenges we have is that familiarity is seen as being a virus protector," said Michael Osterholm, a member of President-elect Joseph R. Biden Jr.'s coronavirus advisory group and director of the Center for Infectious Disease Research and Policy at the University of Minnesota. "More likely than not, knowing someone is the risk factor for getting infected."

This summer, 47 percent of Americans said they had formed a "pod" or social "bubble" that includes two or more households committed to strict precautions so the group can safely socialize indoors. But sometimes your bubble is leakier than you realize. Farhad Manjoo, an opinion columnist for The Times, had initially assumed his bubble was pretty small, but it turned out that he was having direct or indirect contact with more than 100 people.

Whether your bubble is just your immediate household — or you've formed a bubble with others — take some time to check in with everyone and seal the leaks. This requires everyone to be honest about the precautions they're taking (or not taking). Dr. Osterholm said that convincing people that their friends might infect them has been one of the biggest challenges of the pandemic. He told the story of a man and a woman who both contracted Covid-19 after attending a wedding.

"He told me, 'We didn't fly. I knew everybody there,'" said Dr. Osterholm. "He somehow had the mistaken belief that by knowing the person, you won't get infected from them. We've got to break through that concept."

Mask up. You're going to need it for a while.

A study by the Institute for Health Metrics and Evaluation at the University of Washington estimated that 130,000 lives could be saved by February if mask use became universal in the United States immediately.

Various studies have used machines puffing fine mists to show that high-quality masks can significantly reduce the spread of pathogens between people in conversation. And the common-sense evidence that masks work has become overwhelming. One well-known C.D.C. study showed that, even in a Springfield, Mo., hair salon where two stylists were infected, not one of the 139 customers whose hair they cut over the course of 10 days caught the disease. A city health order had required that both the stylists and the customers be masked.

Choose a mask with two or three layers that fits well and covers your face from the bridge of your nose to under your chin. "Something is better than nothing," said Linsey Marr, professor of civil and environmental engineering at Virginia Tech and one of the world's leading aerosol scientists. "Even the simplest cloth mask of one layer of material blocks half or more of aerosols we think are important to transmission."

Watch the clock, and take the fun outside.

When making decisions about how you're spending your time this winter, watch the clock. If you're spending time indoors with people who don't live with you, wear a mask and keep the visit as short as possible. (Better yet, don't do it at all.) Layer up, get hand warmers, some blankets, an outdoor heater — and move social events outdoors.

In an enclosed space, like an office, at a birthday party, in a restaurant or in a church, you can still become infected from a person across the room if you share the same air for an extended period of time. There's no proven time limit that is safest, but based on contact tracing guidelines and the average rate at which we expel viral particles — through breathing, speaking, singing and coughing — it's best to wear a mask and keep indoor activities, like shopping or haircuts, to about 30 minutes.

Take care of yourself, save a medical worker.

The country's doctors, nurses and other health care workers are at a breaking point. Long gone are the raucous nightly cheers, loud applause and clanging that bounced off buildings and hospital windows in the United States and abroad — the sounds of public appreciation each night at 7 for those on the pandemic's front line.

"Nobody's clapping anymore," said Dr. Jessica Gold, a psychiatrist at Washington University in St. Louis. "They're over it."

In interviews, more than two dozen frontline medical workers described the unrelenting stress that has become an endemic part of the health care crisis nationwide. Jina Saltzman, a physician assistant in Chicago, said she was growing increasingly disillusioned with the nation's lax approach to penning in the virus. In mid-November, she was astounded to see crowds of unmasked people in a restaurant as she picked up a pizza. "It's so disheartening. We're coming here to work every day to keep the public safe," she said. "But the public isn't trying to keep the public safe."

(2)

Scale Back Your Holiday Plans

How and when the pandemic ends will depend on the choices we make this winter, particularly around Christmas and New Year's Eve.

Nobody wants to open presents by Zoom, light holiday candles at home alone or clink virtual champagne glasses to ring in the New Year.

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But here we are, in the midst of a surging pandemic, on course to losing nearly a half million souls in less than a year. Despite the promise of a vaccine on the horizon, only a tiny fraction of Americans will be vaccinated by the end of December. Vaccines won't enter large-scale distribution until spring 2021.

The only way to drive down infection rates for now will be to avoid large indoor gatherings, wear masks, cancel travel and limit your holiday celebrations to just those who live in your home.

Dr. Fauci said he, his wife and three daughters, who live in different parts of the country, all made a family decision not to travel for the holidays. It will be the first Christmas in 30 years that the entire family won't be together.

"I'm a person in an age group that's at high risk of serious consequences," said Dr. Fauci. "That's the first Thanksgiving since any of my three daughters were born that we have not spent it as a family. That was painful, but it was something that needed to be done. We are going to do the same thing over Christmas for the simple reason that I don't see anything changing between Thanksgiving and Christmas and Hanukkah. In fact, I see it getting worse."

If you do travel, get tested.

People who choose to travel over the holiday season despite the warnings should consider taking precautions. First, try to quarantine for at least a week (two weeks if possible) before your trip or visit with another household. The C.D.C. now recommends that domestic air travelers get tested before and after their trip.

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Remember, a lot can go wrong between the time you take a test and the moment you hug Grandma. Not only are false negatives possible, you need to consider the risk of catching the virus after taking the test — in an airport, in a plane or from a taxi driver or rental car agent.

For a laboratory test, check the turnaround time in your area and try to schedule it as close as possible to your visit. If you're using rapid testing, try to take more than one test over the days leading up to your visit, and if possible, get a rapid test on the same day you plan to visit family, friends or a vulnerable person. Test again after you arrive if you can.

Plan a safer holiday gathering.

If you're determined to have people to your home for the holidays, keep the guest list small and consider these precautions.

Get tested: If testing is available in your area, consider asking all guests to be tested a few days before the holiday, timing it so they get the results before coming to your home. If rapid testing is available, get tested a few times during the week and on the day of the social event.

Move the event outside: Even if it's cold outside, try hosting all or part of your holiday celebration outdoors. Look into space heaters and fire pits to warm a porch or patio. Even a partially open space, like a screened-in porch or a garage with the door open, is better than socializing indoors. If you decide to stay indoors, open the windows and turn on exhaust fans to help ventilate your home.

Wear masks: All guests should wear a mask when not eating. If you're the host, set the example and put your mask on after the meal is over and everyone is enjoying the conversation. Limit the amount of time you spend together indoors.

Socialize outdoors the Scandinavian way.

In the pandemic, rather than feeling depressed that the arrival of cold weather will mean that you'll be isolated indoors, apart from friends and family, we can take lessons from Scandinavians about how to continue getting together outdoors.

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Take Care of Yourself at Home

Covid-19 can be scary, but we've learned a lot about how to monitor the illness at home — and when to seek hospital care.

Since the start of the pandemic, we've learned a lot about how to care for people infected with Covid-19. Death rates from the disease are dropping as doctors have gotten better at treating it and advising patients when to seek medical care.

Steroids like dexamethasone have lowered the number of deaths among hospitalized patients by about one-third. And although limited in supply, monoclonal antibodies, a treatment given to President Trump when he was ill with coronavirus, can possibly shorten hospital stays when given early in the course of infection.

But the vast majority of patients with Covid-19 will manage the illness at home. Check in with your doctor early in the course of your illness, and make a plan for monitoring your health and checking in again if you start to feel worse.

Get tested if you have symptoms.

Ideally, you should be able to get a coronavirus test whenever you want it. But in the United States, test availability varies around the country, depending on whether supplies are low or labs are overwhelmed. Check with your doctor, an urgent care clinic or your local health department about where to get tested in your area.

If you feel sick, you should be tested for Covid-19. A dry cough, fatigue, headache, fever or loss of sense of smell are some of the common symptoms of Covid-19. After you take your test, stay isolated from others and alert the people you've spent time with over the last few days, so they can take precautions while you're waiting for your result. Many tests will work best if you are in the first week of your symptoms.

Track your symptoms.

Marking your calendar at the first sign of illness, and tracking your symptoms and oxygen levels, are important steps in monitoring a coronavirus infection. Covid-19 has been unpredictable in the range of symptoms it can cause. But when it turns serious, it often follows a consistent pattern.

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Words to Know About Testing

Confused by the terms about coronavirus testing? Let us help:

- **Antibody:** A protein produced by the immune system that can recognize and attach precisely to specific kinds of viruses, bacteria, or other invaders.
- **Antibody test/serology test:** A test that detects antibodies specific to the coronavirus. Antibodies begin to appear in the blood about a week after the coronavirus has infected the body. Because antibodies take so long to develop, an antibody test can't reliably

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While every patient is different, doctors say that days five through 10 of the illness are often the most worrisome time for respiratory complications of Covid-19. Covid-19 is a miserable illness, and it's not always easy to know when to go to the emergency room. It's important during this time to stay in touch with your doctor. Telemedicine makes it possible to consult with your doctor without exposing others to your illness.

Get a fingertip pulse oximeter.

The best way to monitor your health during Covid-19 is to use a pulse oximeter, a small device that clips onto your finger and measures your blood oxygen levels. If it drops to 93 or lower, it could be a sign that your oxygen levels are dropping. Call your doctor or go to the emergency room.

Pro tip: One of the things to remember about reading a pulse oximeter is that many of them are designed to be read by someone facing you, not the person wearing it. If you're looking at it upside down, a healthy reading of 98 could look like an alarming 86.

Caring for someone with Covid-19

Caring for someone with mild to moderate symptoms of the coronavirus is similar to caring for someone with the flu. Give them supportive care, fluids, soups and Tylenol, and have them take their temperature and monitor oxygen levels with a pulse oximeter regularly. Always wear a mask in the sick person's room even if they are not there or have recovered. Coronavirus particles can last as long as three days on various surfaces, and can be shaken loose when you pick up clothes, change bedding or pick up soiled tissues.

The plight of "Covid long-haulers"

It's unclear how many people develop lingering and sometimes debilitating symptoms after a bout of Covid-19. Such symptoms — ranging from breathing trouble to heart issues to cognitive and psychological problems — are already plaguing an untold number of people worldwide. Even for people who were never sick enough to be hospitalized, the aftermath can be long and grueling, with a complex and lasting mix of symptoms.

There is an urgent need to address long-term symptoms of the coronavirus, leading public health officials say, warning that hundreds of thousands of Americans and millions of people worldwide might experience lingering problems that could impede their ability to work and function normally.

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Look for Better Days This Spring

With the rollout of the vaccine, an end to the pandemic is in sight. Life will start to feel more normal in mid- to late 2021, depending on how many people get vaccinated.

Earlier this month, *The Times* spoke with Dr. Fauci about his predictions for the spring. Here's what he had to say.

The end game for viral disease outbreaks, particularly respiratory diseases, is a vaccine. We can do public health measures that are tempering things, waiting for the ultimate showstopper, which is a vaccine. That's why I'm saying we need to double down even more on public health measures to get us through to the period when enough people in this country will be vaccinated that the virus will have no place to go. It will be a blanket or an umbrella of herd immunity.

We have crushed similar outbreaks historically. We did it with smallpox. We did it with polio. We did it with measles. We can do it with this coronavirus. It requires a highly efficacious vaccine. Thank goodness we have that. We have multiple vaccines, two of which clearly are very efficacious, and I feel confident that the others that are coming along will be comparably efficacious.

Then the second part of that is getting the overwhelming majority of the population vaccinated. I think that likely will have to be about 70 to 75 percent of people in this country. If we do that, that will be the indicator of when things will get back to normal, when you won't have to worry about going in a restaurant, when you won't have to worry about having a dinner party, when the children won't have to worry about going to school, when factories can open and not worry about their employees getting sick and going to the hospital. That will happen, I guarantee you. If people appreciate the importance of getting vaccinated, and we have a high uptake of vaccines, that will happen. That's what the future will look like.

The future doesn't need to be bleak. It's within our hands to really shape the future, both by public health measures and by taking up the vaccine. — *Dr. Fauci*

What you need to know about the new vaccines

There aren't enough doses right now for everyone, so initially the vaccine will be rationed for those who need it most. It will take time to produce and distribute the vaccine, and then schedule two vaccinations per person, three to four weeks apart. As more vaccines get approved, things will speed up. At least 40 million doses (enough for 20 million people) should be available from Pfizer and Moderna by the end of the year, and much more will come in 2021.

The challenges ahead for widespread vaccination

The success of the new vaccines will depend on more than how well they performed in a clinical trial. While there's much reason for optimism, a lot can still go wrong.

First there's the challenge of manufacturing and distributing the doses. Pharmaceutical manufacturers have struggled to ramp up vaccine production. They have run short on materials like the bags that line the containers in which the vaccines are made. Both of the leading vaccines must be stored in freezing conditions. And state and local governments have to figure out how to get the vaccines from production facilities into people's arms.

The dark cloud hanging over vaccine distribution

The vaccines will be much less effective at preventing death and illness in 2021 if they are introduced into a population where the coronavirus is raging — as is now the case in the United States.

An analogy may be helpful here, says David Leonhardt, who writes *The Morning* newsletter for *The Times*. He explains that a vaccine that's 95 percent effective, as Moderna's and Pfizer's versions appear to be, is a powerful fire hose. But the size of a fire is still a bigger determinant of how much destruction occurs.

Even if the vaccine is distributed at the expected pace, at the current infection level, experts predict that the country would still face a terrible toll during the six months after the vaccine was introduced. Almost 10 million or so Americans would contract the virus, and more than 160,000 would die.

There is one positive way to look at this: Measures that reduce the virus's spread — like mask-wearing, social distancing and rapid-result testing — can still have profound consequences. They can save more than 100,000 lives in coming months.

Hoping vaccine skepticism will fade

Despite images of relieved health care workers getting a shot in the arm flashing across TV screens and news sites, a new survey finds that more than one-quarter of Americans say they probably or definitely will not get a coronavirus vaccination. The survey, by the Kaiser Family Foundation, found that Republican, rural and Black Americans were among the most hesitant to be vaccinated.

Nevertheless, confidence in the vaccine appears to be rising. Over all, 71 percent of respondents said they definitely would get a vaccination, an 8 percent increase from what Kaiser found in a September survey. Roughly a third (34 percent) now want the vaccine as soon as possible. A recent study from Pew Research showed that about 60 percent of Americans would definitely or probably get a vaccine, up from 51 percent of people asked in September.

Looking ahead to spring

While the majority of Americans won't get their shots until spring, the vaccine rollout is a hopeful sign of better days ahead. We asked Dr. Anthony S. Fauci, as well as several epidemiologists and health and science writers for *The Times*, for their predictions about the months ahead. Here's some of what they had to say.

When can we go to the movies or the theater?

"It depends on the uptake of the vaccine and the level of infection in the community. If you go to April, May, June and you really put on a full-court press and try to vaccinate everybody within a period of a few months, as you go from second to third quarter of the year, then you could likely go to movies, go to theaters, do what you want. However, it's unlikely, given what we're hearing about people's desire to get vaccinated, that we're going to have that degree of uptake. If it turns out that only 50 percent get vaccinated, then it's going to take much, much longer to get back to the kind of normality that we'd like to see." — *Dr. Fauci*

What did you learn from pandemic life?

“Staying home with my children has taught me that life with fewer errands to run and activities to partake in is kind of nice. I think in the future we will cut down on our family obligations.” — *Jennifer Nuzzo, associate professor, Johns Hopkins*

What’s one thing you’ll never take for granted again?

“I won’t take traveling to my extended family for granted.” — *Alicia Allen, assistant professor, University of Arizona*

Will we ever go to a big, crowded, indoor party without a mask again?

“If the level of infection in the community seems substantial, you’re not going to have the parties with friends in congregant settings. If the level of infection is so low that risk is minuscule, you’re going to see back to the normal congregating together, having parties, doing that. If we want to get back to normal it gets back to my message: When the vaccine becomes available, get vaccinated.” — *Dr. Fauci*

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