



Cambridge
Public Health
Department

Agenda
Cambridge COVID-19 Expert Advisory Panel
2 pm, Wednesday, May 12, 2021

Join with Google Meet



Join by phone



Welcome and Attendance

- 1) Clinical, case, vaccination and wastewater data update
- 2) Update on MA vaccine strategy, Cambridge clinics
- 3) Variant updates:
B.1.617.2 (India sub-variant)
- 4) Summer priorities: vaccinating 12-18 y.o. cohort, planning booster clinics?
Question: Should City support specific long-term policies to reduce transmission risk?
[Please see two articles attached]
- 5) Biobot rep at May 26th EAP: Planning Questions and Topics

Attachments:

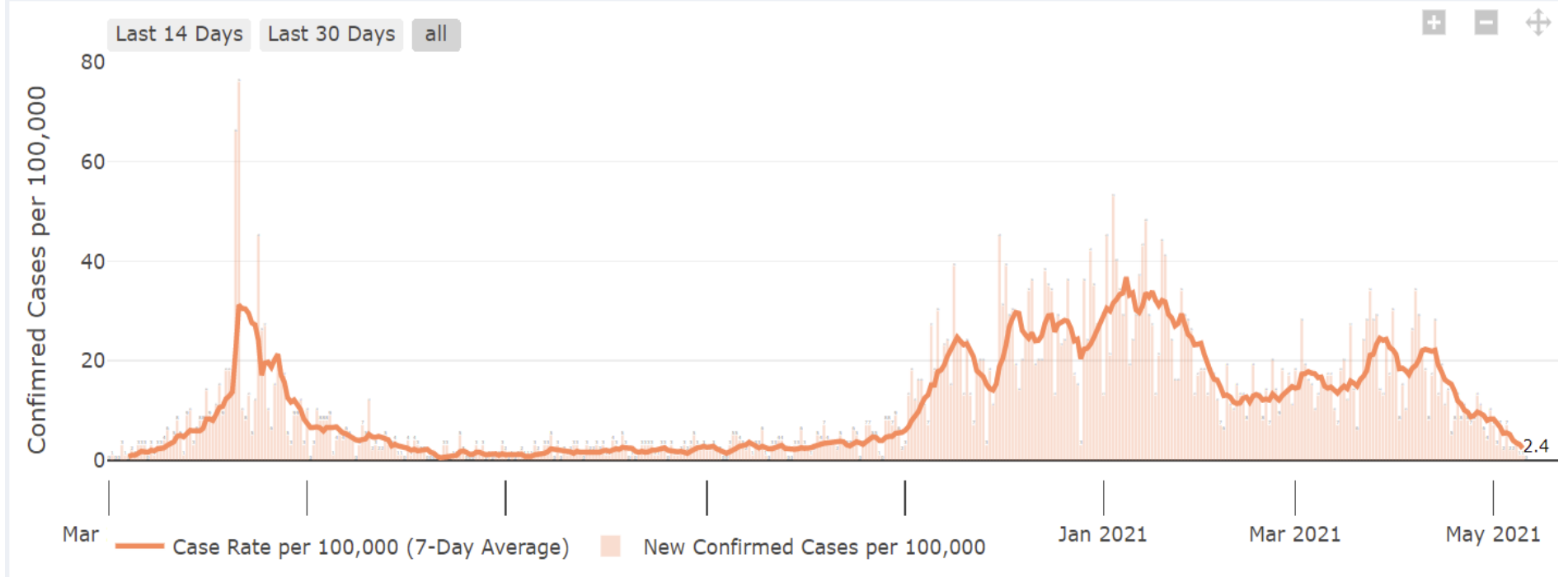
- 1) Cambridge New Case Data (5/11/21)
- 2) MA Daily New Cases (5/11/21)
- 3) Cambridge Wastewater data (5/5/21)
- 4) *Four Ways the Pandemic Might End*–
Buzzfeed (4/21/21)
- 5) *Will We Have Learned Anything When the
Pandemic Is Over?* TIME (3/16/21)



Cambridge New Daily Cases as of 5/11/2021

New Confirmed Cases

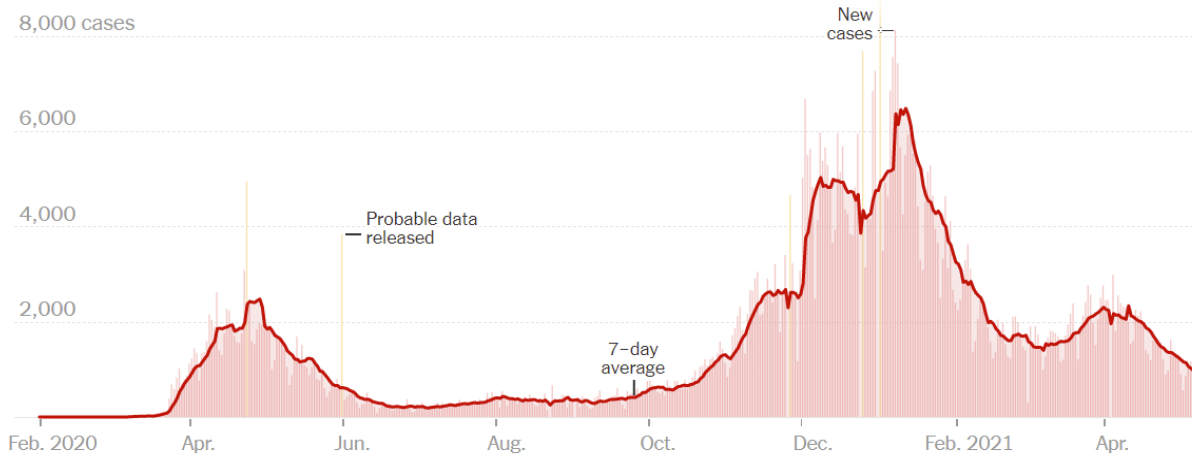
Case Rate <> Case Count*



MA New Daily COVID Cases 5/11/2021

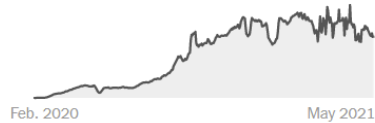
Updated May 11, 2021

New reported cases

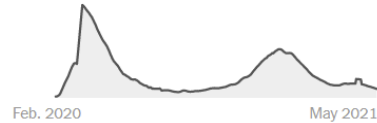


■ These are days with a reporting anomaly. Read more [here](#).

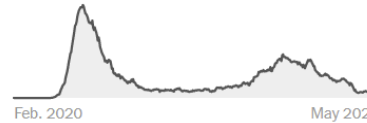
Tests



Hospitalized



Deaths



AVG. ON MAY 10

14-DAY CHANGE

TOTAL REPORTED

Vaccinations

[See more details >](#)

Fully vaccinated

43%

At least one dose

61%

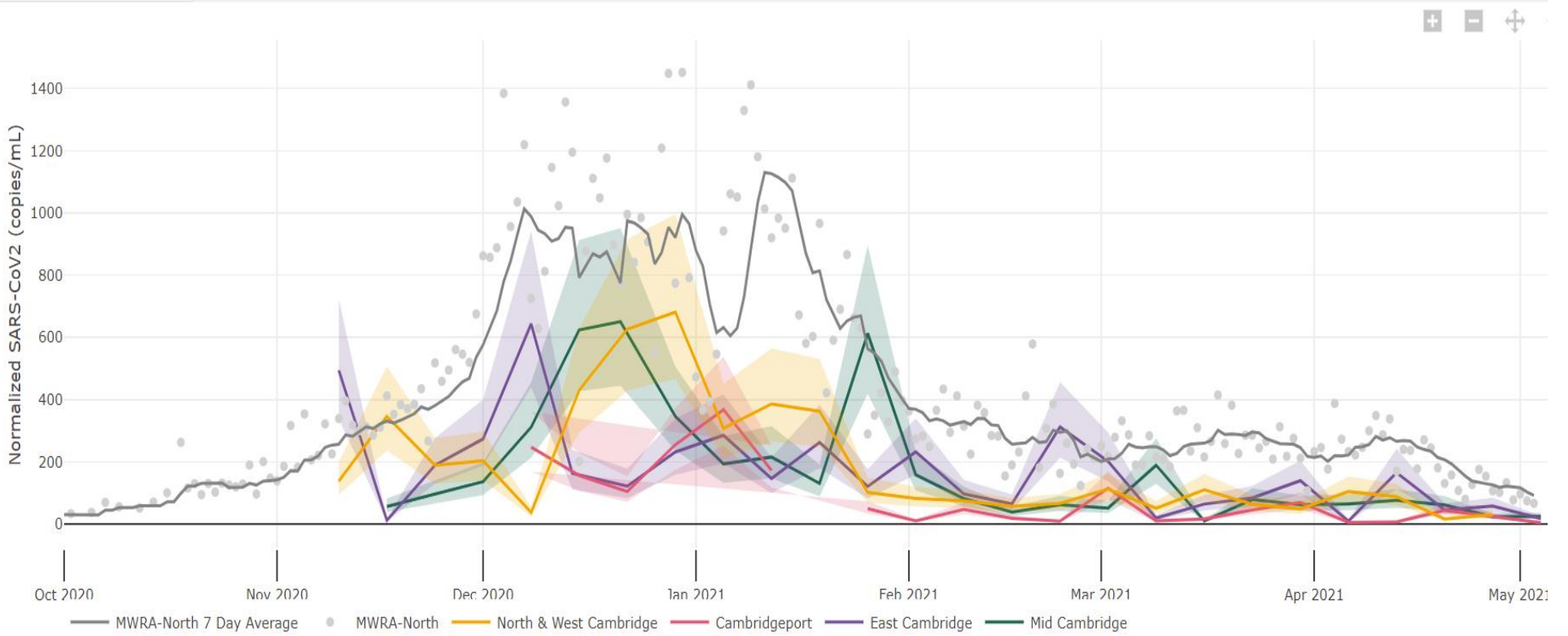
[About this data](#)

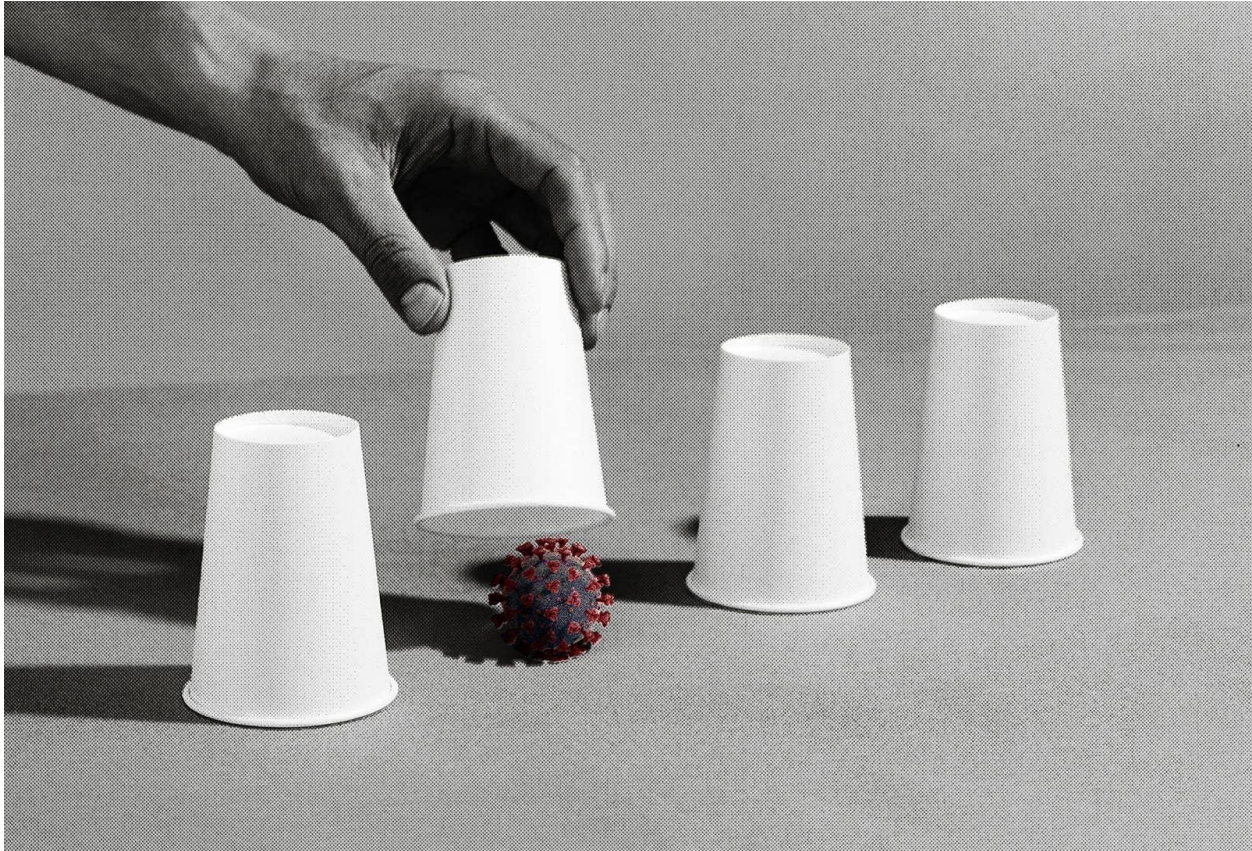
Restrictions >

Reopening Aug. 1 If coronavirus metrics remain stable and vaccination progress continues.

Masks mandatory indoors

Cambridge Wastewater COVID Counts 5/5/21





John J. Custer for BuzzFeed News

The Pandemic Will Likely End In One Of These Four Ways

Vaccinations promise an end to the coronavirus pandemic in the US. What kind of ending, though, is up to us.



Dan Vergano BuzzFeed News Reporter

Posted on April 21, 2021, at 5:50 p.m. ET

If the White House's vision goes according to plan, vaccinations will end the pandemic in the US in time for 4th of July fireworks.

Or the pandemic won't end, and these shots will be the first of many we'll get for years.

Or they'll offer a brief summer respite — before a more severe version of the coronavirus catches fire.

A return to a life resembling normalcy looks closer than ever now that, as of Monday, vaccines are available to every adult in America. Around 80 million people are already fully vaccinated, and President Joe Biden said on Wednesday that the US has already reached his goal of 200 million shots in the first 100 days of his administration, eight days early.

But with half of the population still unvaccinated and COVID-19 cases once more rising, just how close are we to the pandemic ending, both in the US and across the world?

Whether the pandemic ends in the US by Independence Day — or much further in the future — will depend on the vaccines, the virus, and decisions people make, experts say. The big questions include how long the vaccines' protection lasts, how well they fight off new coronavirus variants, and whether the entire globe can hold off these emerging threats. Then there's the X factor of how many people will be willing to get shots.

The benchmark for a successful vaccination campaign has long been considered to be “herd immunity” — having enough people vaccinated to keep sick ones from sparking outbreaks. That might require 80% of US adults getting vaccinated, according to infectious disease researcher William Schaffner of the Vanderbilt University School of Medicine.

Other experts have urged Americans to not obsess over herd immunity. “I can't say it's going to be ‘this’ percent,” Anthony Fauci, head of the National Institute of Allergy and Infectious Diseases, said this month, although he has previously floated percentages ranging from 70% to 85%. “We'll know it when we see it. It'll be obvious.”

Getting to that turning point could take very different routes, experts told BuzzFeed News. Although the summer everyone hopes for is within reach, worse outcomes are also possible. At this pivotal moment in the crisis, a lot depends on how willing people are to help themselves by continuing to wear masks and isolating until they are fully vaccinated — and to help people around the world get vaccinated too.

“It depends on decisions we make,” Lauren Ancel Meyers, a University of Texas epidemiologist, said this month at a Stanford University symposium about herd immunity.

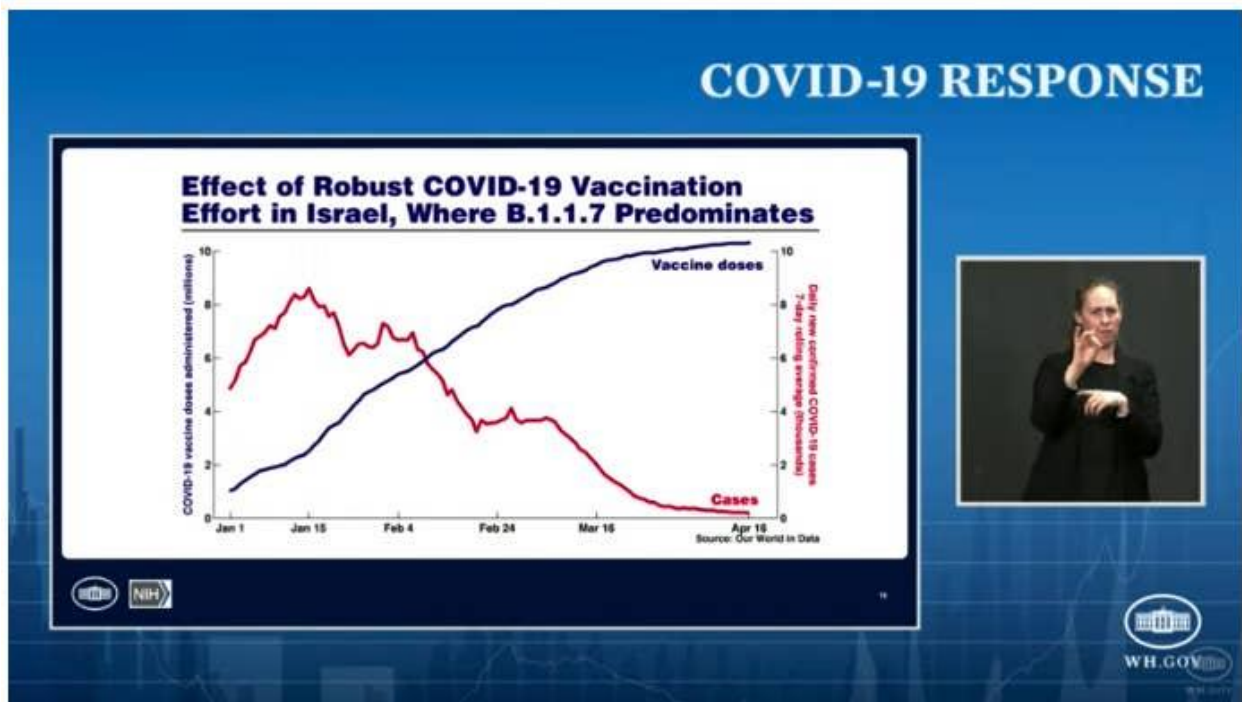
Here are four ways that the pandemic could end in the US:

1. The Better Ending: Vaccination Returns Life Close to “Normal”

By June, most US adults get vaccinated. The shots halt the spread of SARS-CoV-2, even the more transmissible variants. And people feel safe shopping, traveling, and visiting each other, almost like they did before the pandemic.

This is the best outcome — and it isn’t completely far-fetched. Half of US adults have received at least one shot. Even with Johnson & Johnson’s vaccine paused, more than 3 million shots are being administered a day; at that rate, every adult American could receive one by late June.

Israel offers a glimpse of this future. There, a fast-paced campaign had immunized more than half of the population by mid-April. The results have been striking in the country of 9 million, with new cases falling to around 200 a day, 2% of the January peak. Starting this weekend, an outdoor mask mandate will be lifted.



White House / Via [whitehouse.gov](https://www.whitehouse.gov)

White House COVID-19 briefing slide, showing case drop with 62% vaccination

Similarly, in the US, new cases among nursing home residents dropped by 96% and deaths by 91% between December, when vaccinations started, and March. After a slow start, more than 4.8 million people in nursing facilities have received at least one shot.

Although case numbers have increased in recent weeks, Deepta Bhattacharya, an immunologist at the University of Arizona College of Medicine, predicts “a smaller bump over the next couple months that should by the summer settle down to a pretty low level of cases.”

That doesn't mean that masking would stop. It's worth noting that the declines in both Israel and nursing homes happened while restrictions were maintained. Under current US plans, young teens won't start getting shots until the fall and elementary school-age children in the winter of 2022, meaning that their schools will likely keep face coverings, some virtual classes, and other restrictions for the foreseeable future.

But most partial or full closures of shops, restaurants, universities, and bars could end this summer if US cases fall like they did in Israel.

The bottom line is that the Pfizer and Moderna vaccines, which make up the great majority of US shots, have proven 90% effective in real-world studies against COVID-19. Although some people have gotten infected despite vaccination, their numbers are small: about 6,000 cases out of 84 million fully vaccinated people, or .007%, according to CDC data.

“It is not unexpected — the vaccine is not 100% protective,” Scott Lindquist, a Washington state health department official, said in a recent press briefing about “breakthrough” infections there. “But what we saw were mostly very mild symptoms, if any at all.”



Alex Wong / Getty Images

President Joe Biden announces that the United States has distributed 200 million shots of COVID-19 vaccines.

And existing vaccines appear to protect against new coronavirus variants, such as the B.1.1.7 strain, according to CDC data. “If you lose a little bit of protection to a variant, but the vaccine still keeps you safe, that’s still a good result,” Bhattacharya said. Vaccines aside, he noted that a sizable chunk of the population — more than 1 in 5 Americans by one recent estimate — also has some natural immunity from past infections, though studies suggest that this protection likely isn't as long-lasting or robust as vaccination.

“I do think we’ll be OK by the summer,” said the immunologist, who is personally planning to travel to see his family in cities across the country. “Tickets booked for early July!”

In this future, the coronavirus cools down enough to be managed like the measles: a virus tamed by a vaccine that is added to childhood shot regimens, with occasional outbreaks in unvaccinated communities.

2. A Mixed Ending: Defanging, Not Defeating, the Virus

Mass vaccination delivers yet another future: the death rate from COVID-19 drops drastically, because the shots prevent severe and fatal illness, but outbreaks continue, largely among pockets of unvaccinated people, including younger people who are less targeted for vaccines or less worried about getting sick in the first place.

“A more realistic scenario is that older, more vulnerable individuals will receive a disproportionate number of doses,” said infectious disease modeler Jack Buckner of the University of California, Davis, by email. “Under these conditions additional outbreaks are more likely but the case fatality rate would be lower.”

Last month, CDC Director Rochelle Walensky was asked whether a sharp decline in death rates, with case numbers remaining high over the summer, might lessen the public’s urgency to get vaccinated. She called it a concern, but noted that children are dying of COVID-19, albeit very rarely, and that long-term complications from infections, also known as “long COVID,” plague even people with mild cases. A recent study from Sweden, for example, found 1 in 10 healthcare workers who had mild cases have felt effects, like loss of smell and taste, fatigue, and breathing problems, for months after.

“We’re going to defang the virus rather than defeat it.”

In this mixed scenario, we dodge a summer surge of deaths, but outbreaks occur in some counties or states. Herd immunity is also never quite reached in this future, because variants circle the globe every year like variations of the seasonal flu. Post-mass vaccination, the coronavirus would then enter a “mild endemic state,” where SARS-CoV-2 is reduced to a childhood cold, said Harvard epidemiologist Marc Lipsitch at the recent Stanford symposium about herd immunity. “We’re going to defang the virus rather than defeat it,” he said. “We’ll make it a nuisance that makes people a bit ill, rather than something that kills people in large numbers and causes the hospital system to groan under the weight.”

A related possibility is that vaccination only delivers immunity for a year or two and requires regular booster shots for older and younger people alike, which the heads of Pfizer and Moderna have told investors might be the case. (On Sunday, Fauci said on NBC’s *Meet the Press* that the FDA and CDC — not vaccine makers — will decide by fall about boosters.)

“Even if we reach the herd immunity threshold in the US or in rich countries, this virus is going to continue to circulate,” said Lipsitch.

Right now, doses are only promised on the order of hundreds of millions, and the planet is home to 7.8 billion people. The World Health Organization has warned that global undervaccination would be a catastrophic moral failure, prolonging coronavirus transmission around the world.

3. A Worse Ending: A Fourth Surge for the Summer



Matthew Hatcher / Getty Images

A staff member administers COVID-19 a vaccine in Detroit

The better outcomes are far from inevitable. White House officials regularly say that the US is in a race between vaccination and more contagious coronavirus variants. In this scenario, we lose the race. The result: a fourth surge.

The reasons for worry are plain in case numbers that have stopped declining and are instead trending upward again, now averaging around 67,000 newly-reported infections a day. The more transmissible and dangerous B.1.1.7 coronavirus strain is quickly becoming the predominant one nationwide, now accounting for 26% of all new cases.

“We remain in a complicated stage,” the CDC’s Walensky said Monday. “On the one hand, more people in the United States are being vaccinated every single day and at an accelerated pace. On the other hand, cases and hospitalizations are increasing in

some areas of the country, and cases among younger people who have not yet been vaccinated are also increasing.”

If the US falls behind on vaccinations, then a second lockdown period might result. Rising hospital admissions could lead governors and mayors to shutter bars, restaurants, and stores once again.

“We are in real risk of throwing away all the gains we have made, and losing another summer,” Debra Furr-Holden, a Michigan State University epidemiologist, told BuzzFeed News.

Her state, as well as the rest of the Upper Midwest and the Northeast, is in the thick of massive outbreaks right now. Some counties reopened bars, gyms, and restaurants too early, Furr-Holden believes, which in her view should serve as a warning to the rest of the country.

Although 74% of US adults say they want a shot, up from half in September, that’s still not enough to achieve herd immunity, some suggest. “We have to get about 80% of adults vaccinated,” said Schaffner, the infectious disease specialist at Vanderbilt. “We’ve never done that with any vaccine in the United States.”

Some areas of the country are also much more resistant to vaccination than others. In states like Tennessee, Kentucky, Alabama, and Mississippi, as many as 37% of people tell pollsters they don’t want a shot. Politics clearly plays a role. Older, rural conservatives express the most hesitation, and their fears are reinforced by misinformation and fearmongering on right-wing cable channels.

“We are running into people who have expressed some hesitancy, so we have to listen to them and address their concerns,” said Schaffner, who is based in Nashville. Walensky acknowledged this week that “the administration of vaccines across the country is not uniform.”

But Andy Slavitt, the senior White House COVID-19 adviser, said he was unwilling to entertain the idea of the federal vaccination campaign shifting doses to parts of the country clamoring for shots and sending less to ones in areas where they go unused. “We are not going to quote-unquote ‘punish’ less-ready areas,” Slavitt told BuzzFeed News during a briefing this week. The key, he said, is to convey to people that while vaccines were hard to get during the initial rollout, there are now more than 60,000 vaccination sites nationwide, and at least one of them is within 5 miles of where 95% of the population lives.

Whether enough Americans will take that message to heart remains to be seen. If not, we may only reach herd immunity after another painful surge.

4. The Bad Ending: After the Summer, Global Variants Revive the Pandemic



Amarjeet Kumar Singh / Anadolu Agency / Getty Images

Relatives of a COVID-19 victim outside a hospital in New Delhi, which is seeing a surge in cases.

Then there's the worst-case scenario. In a mostly unvaccinated world, a new and more deadly coronavirus variant — or variants — overpowers vaccines and restarts the global pandemic all over again. The US, along with everyone else, has to begin again with new vaccines.

“Coronavirus mutates a lot — they can do it in humans, they can do it in animals — and the question is how important are these mutants going to be,” Stanford University infectious disease expert Julie Parsonnet said at the herd immunity symposium held at her university. “We don't live just in Palo Alto, or just in California, or just in the United States. We live in a world where there are a lot of unvaccinated people, and as long as we don't focus on the world more globally, we're going to have problems.”

For now, the available vaccines are effective against the variants circulating in the US. But experts are surprised at the speed at which more transmissible ones have arisen, said Bhattacharya of the University of Arizona. Their arrival reflects just how widely the coronavirus has spread from host to host, each acting as a lab for new mutations to emerge.

“The places where the variants are growing, they’re not growing because they are evading the immune system, they are going nuts because there aren’t enough people that are immune,” Bhattacharya said. “Obviously this isn’t the best situation, because the longer you let this go, the better the odds that you will get some weird thing that will eventually start to grow out because it can evade the immune system.”

Last week, the White House announced a \$1.7 billion effort to detect such new strains. Pfizer, Moderna, and other vaccine makers are already testing prototype booster shots that are designed explicitly against variants, such as the B.1.1.7 strain.

In the face of this threat, a recent risk analysis led by George Ioannou, an expert on veteran care at the University of Washington, offers a framework for who should get prioritized for vaccines. To prevent deaths as much as possible, people with the most severe risk factors, such as diabetes, heart failure, or kidney failure, should be given shots first, this work suggests. At the same time, if there is enough supply, vaccines should be administered as quickly and widely as possible to combat the new variants.

“You really don’t want that threat just hanging around,” Bhattacharya said.

But even in this worst case, the silver lining is that the coronavirus has nevertheless proven amenable to vaccination, he and other experts noted, unlike HIV, which for decades has thwarted vaccines. A coronavirus strain that evades the current vaccines will almost certainly be susceptible to shots that have yet to be designed.

That means vaccines will at some point deliver an end to the pandemic, no matter how many changes in work, school, and daily life it leaves behind, said Yale sociologist Nicholas Christakis, author of *Apollo’s Arrow: The Profound and Enduring Impact of Coronavirus on the Way We Live*.

“Eventually it will return to normal,” Christakis told BuzzFeed News. “Plagues end — they just do.”

•

The Pandemic Made Us Strangers to Ourselves. Will We Have Learned Anything When It's Over?



Sherry Turkle in her roadster at Radcliffe College graduation, June 1970

Courtesy of Sherry Turkle

IDEAS

BY **SHERRY TURKLE**

MARCH 16, 2021 3:42 PM EDT

*Turkle is the Abby Rockefeller Professor of the Social Studies of Science at MIT. Her most recent book is [*The Empathy Diaries*](#), published by Penguin Press.*

A

ll my career, I've studied what happens when the virtual encroaches on the most private moments of our lives. Having screens always on and always-on-us may be convenient, but it's also an assault on our ability to truly take in another person. It is an assault on our empathy.

Before quarantines and lock downs, I knew—we all knew—that our phones offered so many ways to connect but inhibited deep bonds of love and friendship. We were always distracted and thinking about our *next* text or call. When we hid behind screens during conversations, we felt less vulnerable. That could feel like a plus, but it had its price: vulnerability is the first step towards intimacy.

Then, the pandemic. Suddenly, the screens that had closed us down to the most meaningful connections were the only way we could open up to each other. I had once said we were “alone together.” Now we were truly “together alone.”

My research on families and workplaces suggested that we do best when we look up from our screens and reclaim conversation. For a year now, I've been in a position where I couldn't follow my own advice. I couldn't make eye contact with my colleagues or students. The closest I could come was staring into the green light on the top of my laptop screen, which gives the other person the illusion that you are looking into their eyes. But to sustain that illusion, you end up looking at nothing at all.

COVID-19 meant that suddenly, many were denied the comfort of friends and family. What had been most sustaining, a visit to your child, grandchild, or elderly parent, was overnight, declared too dangerous. I learned the discipline of unaccustomed solitude. I came to understand how much I had

relied on the easy conviviality of cafés, markets, and neighborhood restaurants, what sociologists call “third places.”

In March 2020, we all became as though voyagers in another country.

COVID’s tragedy became an opportunity to see our country anew. Some of what we could see was positive: the importance of family ties, the generosity of neighbors, the grace of small kindness. But much was searing: Systemic racism and police violence. Our broken health care system. COVID’s dislocations made all of these visible.

I know from experience, from lessons that I learned as a young woman, that such dislocation can be a gift.

When I was nineteen, a Radcliffe junior, my mother’s death led to a family crisis. I had to drop out of college. My grandfather wanted me as far away from my stepfather as he could manage. He bought me an Icelandic Airways ticket to Paris (the cheapest one— from New York, to Reykjavik, to Luxembourg, and then on by bus to the Gare d’Orsay).

In Paris, I cleaned the apartment of a bourgeois couple in the 7th arrondissement in exchange for a room. They called me their “Portuguese” because most of the women who had done my job were Portuguese. I floated, out of names and country. I could see new things. The French anthropologist Claude Lévi-Strauss had a name for this kind of displacement: *dépaysement*, decountrifying. Ethnographers leave everything familiar to gain a fresh perspective on what they have left

behind. You understand that what you have always seen as normal blinds you to what it suppresses.

I went to France at an auspicious time to be making this private discovery. It was the year after May 1968 with its political and social upheaval. Many French people declared that the standard rules for how things worked would no longer apply. The May days began with a revolt against the atrophied French university but went on to a more general challenge of how French hierarchical norms operated in every aspect of life. French polite society used elaborate rules to take the spontaneity out of social encounters. “This is not your father’s revolution,” was a slogan of the May barricades. Then, France exploded with speech that defied boundaries of class and convention. The French became strangers to their country. But closer to each other.

When I later studied at the University of Chicago, the anthropologist Victor Turner taught me about living in such betwixt-and-between times, which [he called threshold or liminal moments](#). Old boundaries break down and new ones have not yet emerged. People are capable of different, stronger bonds. They see each other not in their social roles, but as human beings. These relationships he called *communitas*. New ideas are born in the crucible of this constructive disorder.

In that May environment, I was an outsider, searching for what was most authentic to me. In 1968, the most important things in my life were far removed from my academic striving at Harvard. The market. Flowers. A friend showed me how to cook a full meal, from appetizers to salad and dessert courses in my room with camping gas. Another let me take a bath in her apartment once a week.

As I mourned my mother, I began to learn the pleasure of my own company. I learned too, that only if you are able to do that can you really listen to others rather than turning what they are saying into what you need to hear. It's in solitude that the capacity for empathy is born. Working as a maid in exchange for rent, I made only one call home, a desperate communication with my grandmother to ask how to clean windows if there was no Windex. My grandmother knew: You clean windows with ammonia and newspapers. I remember the fear of not knowing this, the fear that I would lose my room. I never had that kind of fear again but having had it helped me understand those for whom such anxiety is a regular part of life. *Dépaysement* was the [first chapter in my empathy diaries](#).

I used the strategy of stepping back to make sense of Harvard in the 1960s, where women could attend classes but were not on the tenured faculty, could not use the undergraduate library, or qualify for Harvard scholarship programs for study and travel after graduation.

I used it in my career at MIT when the university tried to deny me tenure, an inconvenient woman who critiqued technology. MIT fired me before they rehired me. No one really wants an in-house critic, no matter how clever. Distance helped me keep my cool.

I used *dépaysement* when, as a humanist in a land of engineers, I asked unpopular questions about the emotional effects of digital technology. And then, my work came full circle: The French experience of liminality accompanied by intimate connection helped me interpret the rise of social media with its new forms of distancing and intimacy.

Decountrifying has lit my personal and professional path. Now I think it offers a strategy for American renewal.

Coming out of the pandemic, we can ask: Will this end as it began? A close approximation of the old normal with greater awareness of how to behave under strict public health guidelines. Or can we embrace our dislocation and think in larger terms, internalizing the insights and inspirations of last year?

We are called to *dépaysement* as an act of citizenship and healing. This will take work. We must hear, really hear, people who fear for their lives in our country. We can go beyond hopes and prayers and well wishes for those cast aside to seeing ourselves in their place and feeling at one with them. Our collective failure to conduct our nation's affairs in a reflective, deliberate way helped get us to this point of crisis. And now we must find our way out.

Empathy is a first step. It doesn't begin with "I know how you feel." But with the humility to say that you *don't* know how another feels. So, it begins with an offer to listen: "Tell me how you feel." Empathy is an offer of accompaniment and commitment. It offers hope to the person who is being heard and it enlarges the person who offers it. When you realize how much you have to learn about someone else, you understand how much you don't know about yourself.

To be empathic is to embrace and own your own complexity and limitations. The gift of our quarantine was time to feel othered—to America and to ourselves. Because once you are a stranger to what is most familiar to you, you can take in the complexity of the world. The weight of seeing things as binary choices falls away. The striking thing about living through dramatic change is you are right there when something that once seemed odd begins

to seem natural. The trick is to remember why it once seemed odd because that might be a reason worth remembering.

We've seen the limits of lives on the screen. We had time to observe ourselves because we were as though experimental subjects. We can both admire the efficiencies of remote work, sometimes, and crave the full embrace of the human. We both used technology with greater invention, and we missed each other more. We are in a position to be wary of pundits who try to sell us on "the end of the office" or the "solution" of online education. To figure out what really works, you need to get into the fine details. We're in position to choose the mix of virtual and face-to-face encounters for different jobs. And to demand that when we do a job, our technology is not spying on us or our children.

During the year of COVID, we lived echoes of the [pandemic of 1918](#), and for me, the rise of fascism in 1938, and the protests of 1968. I came to a new state of mind because I could see my country anew. And although our country was at war with itself, I felt a deeper connection with other people who were also seeing anew. On the Zoom screens of the pandemic, I found the exhilaration of new connections. I saw the irony of Zoom communitas, but there it was. Communication was stilted but the agenda was urgent.

Not all Americans prayed that they would be spared eviction or find a food bank; not all Americans feared for their jobs. But even the most privileged were blocked by frail bodies: they could not visit parents and grandparents and children and grandchildren; they could not be with loved ones when they were sick or died. We were riven by [political divides](#), but over time, these may come to seem less important as we move to the other side of our collective traumas. Our time out of time may be a passage to something new.

We are in a better position to see our country as from the outside. It's hard, of course, because we are wrapped in an American myth. It involves words like "melting pot" and images of new citizens pledging allegiance for the first time and being welcomed into an American family. It doesn't include images of segregated army units, or of men and women shot for walking, jogging, driving, or waiting for fast food. It doesn't include images of riots at the Capitol. You have to step out of the Fourth of July Parade to see that.

Dépaysement was my life's opportunity. And perhaps it is now for our country – a path of citizenship and healing. America's challenge is to build a congregation of the committed to "force the Spring," as Maya Angelou [said in her Inaugural poem](#), so we don't squander but capitalize on the moment before us – liminal, terrifying, unsafe, trembling with possibility.