Speaker 1: Most of my family's like vaccinated. So it was like, everyone wants to come together.

Now,

Speaker 2: I think we've learned to live with it. I think that's where we are now, but the different,

Speaker 3: This would be not having to fear, uh, seeing family this holiday,

Speaker 4: Really looking forward to you, getting together with family and being able to travel.

Speaker 5: You don't really know. So you'll have to use the best judgment.

Speaker 6: Good afternoon. And thank you for joining us. This is Mary Marquetta. O'Dowd from

Rutgers university. And today we are talking about [00:00:30] what the holidays will look like this winter season, given all of the changes that we have experienced in the

pandemic since last new year's Eve, I'm joined today by the Dean of the school of public

health, Harry hel Kiedis Perry. Thank you for joining me.

Speaker 7: Thank you for having me married.

Speaker 6: So Perry, you are our first repeat guest on this podcast. And the last time we spoke, we

were talking about what to expect over the summer so much has changed, but yet I find we are talking about so many [00:01:00] of the same issues, but for this particular holiday season, a lot has been happening in memories about last year have been coming

back. How do you think this holiday season will look and feel different than last year?

Speaker 7: Yeah. So first of all, let me thank you for having me back. I'm I want to be like one of

those Saturday night live host who like has a record like Alec Baldwin, whoever has that record now. So I can I'll keep coming back as long as you do this. So let me, let me, let me first step back and say, we've all [00:01:30] been living with this pandemic for two years now. And I think that absolutely, we all have been challenged by the physical realities of what this virus has done to our lives and to our society and to many of our loved ones, but psychologically we've also paid a great price and we're seeing it in the substance use and mental health issues that have just skyrocketed over the course of the last year in our community. That's all to say. The following we are in a much better

place [00:02:00] right now in Thanksgiving, Hanukkah, Kwanzaa, Christmas 2021.

Speaker 7: Then we were in 2020, that's go back a year. Vaccines were just beginning to emerge as

a possibility. There were no two treatments from Pfizer and mark. The disease was spreading wildly. Where are we today in 2021? We're in a place where a substantial portion of the population is vaccinated. Not all of it, but a big part of it where we [00:02:30] have two medications that can treat infection where cases are down, where hospitalizations are down, right? And so where we are is with this lingering virus, like the flu virus, which is going to be in our population, but which we have to learn how to live with. So I just finished a Marriott interview right now a little while ago with opposite Dan and I said to him, what we need to do is now trust that people are going to do the right things. They're going to get vaccinated. They're going to not drink and drive going to not smoke. [00:03:00] They're going to wear a seatbelt. Well, you know, when they're

driving and they're going to get a COVID-19 vaccine so that we can have some sense of normality this holiday season, much more than we did in the past.

Speaker 6:

So I can tell you for me last year, um, you know, my family didn't convene around the table together to have Thanksgiving dinner. We did go on a hike outside, which actually is something I hope we do again this year, which was a nice thing that we did together. Outdoors. Most of us are vaccinated. [00:03:30] We still have some children who are not eligible. Um, and so it's sort of a much more safe feeling environment. And we plan to sit down at the table together for Thanksgiving. Um, but for those people, I only have to drive a few miles to see most of my family. But for those people who are traveling, what do you say to them? What are some of the safe rules other than vaccine being the single most effective thing you can do to protect yourself and your family? What are some of the other strategies you can still use?

Speaker 7:

Right. And let me reinforce [00:04:00] something that Mary's saying here, which I think we have to not conflate these two things of low-risk and no risk, right? So there's still risk. It's just a much lower than it was a year ago. So for people who are traveling and I've gotten on a plane since last year, actually a month ago. Um, so here's my, my recommendations to people use your common sense. And what do I mean by that? The planes, for the most part, because of the air circulation are relatively safe. Keep your mask on when you're navigating, when you're, when you're navigating the airports, [00:04:30] keep your mask on. When you are around people who you don't know, right? Who are you unsure to? You keep your mask on, wash your hands, right? Keep several masks in your pocket, get vaccinated, of course, but also continue to do those other behavioral strategies that are really, really key.

Speaker 7:

Like I, for example, Mary will tell you that if I'm going to a store right now that let's say I go to a big box store or a Macy's or something like that, I will wear a mask. When I go to my gym, I do not, because I [00:05:00] know everybody's vaccinated at my gym, right? So we have to just not assume that one size fits all and what you do with your family and unmasked and the people you trust is going to be very different than what you do at, you know, an airport or at a big dance party or a concert where you don't know, everybody use your common sense. Like you would in anything else in your life.

Speaker 6:

That's really helpful and straightforward, but yet still confusing because there's so many different situations.

Speaker 7:

I remember getting married because I think as human beings we want, [00:05:30] you know, we all want to be like some ways that children, again, tell me what to do. Yes or no. Right. But this is not a yes or no situation. Right? So the, the, the, uh, the example I gets to Alex, cause I grew up in Queens, New York and there was a, there's a big street in Queens called Queens Boulevard. And it was known as the avenue of death. Cause like people would speed on that end. Like, like they would get run over all the time. Right. So what might I cross a red light in a small town and a small private street in Princeton or something I might, [00:06:00] would I do it in Queens Boulevard? I would not. Right. So use your common sense. Not every situation is the same and just use your logic and you will know, go with your gut. Your gut will tell you what's right.

Speaker 6:

Let's talk a little bit about vaccines. You know, you said in the beginning, we didn't even have them yet. Last year we were just talking about the fact that they were coming soon. We hoped, um, now we have them. And in fact, just this month, kids from age five to 11 became eligible. Um, in fact, the last Friday I brought [00:06:30] my two older kids, 10 and six, they got their first shot. I still have a three-year-old. So we're waiting for him. But, um, you know, what do you expect to see? Uh, we still haven't seen a lot of data on how many kids are taking it. We had seen, um, some surveys that about a third of parents were going to be like me and go out very early and get the vaccine a third would wait and see how that first group did. And then a third was saying not at all. So what do you expect to see? How will this change the day?

Speaker 7:

[00:07:00] Yeah. So first of all, I just want to say that whenever I go on Instagram or some other social media, and I see parents like yourself with their kids being vaccinated, I always, uh, you know, reboot that or share that. And I write the tagline. This is what great parenting looks like, because I think it's exactly right. And I think that has to be reinforced. Look, I think that there's, you know, there's every reason to believe that in the United States, the majority like 60% to 70% of the population will be vaccinated. I don't expect that to be different from kid for kids. Right. Why would it be any different for kids? [00:07:30] So, um, what this says to me is the following there's that parent that we are probably going to be teetering around 30 to 45% of kids were vaccinated in that age range. Like we see it with the 12 to 17 year olds that, um, we could probably overtime get it a little higher, but if we really, really, really want children to be vaccinated, to protect them in the long run, it may be, have to be one of those vaccines that it becomes a requirement in schools.

Speaker 7:

I know there's a lot of hesitation about this, but you know, in 1979 [00:08:00] we saw the last polio case in the United States. Why? Because polio, vaccinations were mandatory. It would not surprise me if we sell that for COVID 19, this was after, after emergency authorization was passed and it was at full authorization. So, you know what we're going to see, what we're going to see is what we see with every other vaccine. There's going to be a handful of people. There's going to be 30% of the population, maybe 40%. That's never going to be vaccinated. There are doing [00:08:30] a disliked, um, uh, acknowledged risk, right? That they're going to, that they're going to just live with it. And, you know, yes, for the foreseeable future, people are going to get sick and die, but you know what the good news is for the rest of us, the good news for the rest of us is that we are not right and we're going to protect the people around us. So at some point you have to say to yourself, married people are adults. You give them the information they have to decide. What's good for them. And if they, if the, if the cases are not rising, they way they were rising a year ago, then so be it let, let [00:09:00] people make their choice.

Speaker 6:

So Perry we've seen cases start to tick up a little bit recently. Um, and some people had predicted that we would see increases in cases around the holidays. Lots of people have lots of theories about what we're seeing, if it has to do with going indoors, if it has to do with the season, if it has to do with the waning effectiveness of the vaccines. And in fact there is some evidence, um, which is why boosters were approved for so many people in some, some areas or approving them before the FDA is [00:09:30] suggesting it for

everyone. I think New York did that just recently. So what do you think about this? Should everyone be going and getting a booster now?

Speaker 7:

I think if you're an elderly person, or if you're living with an immune compromised system immunocompromised system, you must be boosted now, like now, and what do I mean now? It means like, no, no, no sooner than, but around six to eight months after you got your initial vaccination, that's my one recommendation. Here's my second recommendation. And I said this to my brother who has a mess. He got Jansen, [00:10:00] you got Johnson and Johnson. My response to him was like, you need to top off with a little MRMA, right? So, I mean, that's how I'm framing

Speaker 6:

The mix and

Speaker 7:

Match. I do. I do. I do, because I also come out of the HIV world where we know we treat HIV with medications that act in different ways and it works really effectively in suppressing the virus. So I know how that works. I also know as an athlete, that when you, when you use different exercises on different muscles, they make the muscles better. So it's just like, it makes common sense to me. Um, look, [00:10:30] here's what I think. I think that New York, yes, New York jumped into it. Everybody can get boosted. Um, I think that what will likely happen is like Alex asked me, when is it a booster? And when is it an annual vaccination? I think for him, I think we'll, we're probably are going to see is because the virus is continuing to mutate and, and because, or mutate. And because we know there's a variant of the Delta area now out there that is potentially problematic because of the spike proteins. We're probably going to see an annual vaccine like we do for [00:11:00] flu. And what are we going to see the same people like us who are getting the flu vaccine are going to get the COVID vaccine. And there's going to be a part of the population that doesn't. And we live with flu deaths every year. We're going to live with COVID deaths every year until this has completely eradicated

Speaker 6:

I'll, I'll say that I was also one of the people that got the Johnson and Johnson vaccine in the spring when I first became eligible. And so I just did get a booster. I too went for an MRI, but I do recognize that there's such limited information and data on this [00:11:30] right now. And so my recommendation to people is probably if you're eligible for booster, you should go get one. Um, and it probably doesn't matter too much, which one you get, um, because we don't really have the data yet. And we'll probably keep learning about this as we go forward and have better advice in our S series next year. Um,

Speaker 7:

Let's see. I, you know, I let's see where we are. Look, I, let me go back to your original point, which is we're seeing a slight uptick. Yeah. We're seeing a slight up fix schools [00:12:00] are back, you know, teachers aren't vaccinated, we're indoors, cold, dry weather. I mean, these are all factors that are at play here are cases really up. No, and that's the point, the point is that they're not like shooting through the roof that, and that was worried, that was going to happen and it didn't happen. And I think that is completely the result of the vaccination program and completely, yes. Did we get to herd immunity? No, but are we at zero immunity? No, we're at some in-between [00:12:30] ground and that confers protection to the population.

Speaker 6:

Let's talk a little bit about the mental health and resiliency issues that you brought up. Um, it used to be in the pre pandemic era, um, that we would talk about the holidays, triggering stress and anxiety for a lot of people coming together with family and just some of just the holidays, um, the traditions being both good and triggering memories of sadness. Sometimes if you had lost someone. So, you know, what do you think people should be thinking about relative [00:13:00] to the holiday season and how to steal themselves if they're having some challenges with either the pandemic itself or the holiday season?

Speaker 7:

Well, so first of all, I would say, I'm going to say this. Like, I can't wait to see my brother on Christmas. Like I just haven't seen, I mean, I've seen him from afar on zoom and I would just go on and be in a physical space with them. I just did my first interview, like in person just now. And it just felt like completely different to me than interview on zoom. So look, I think for people there's, we [00:13:30] all have certain levels of anxiety, right? So must have a lot more than others. I think that if you are preparing to see your family and like, you are confident that everyone who can be vaccinated is vaccinated, go and enjoy your family, but let's remember the things that bothered you about your family will become very evident within five minutes of being with them. Right.

Speaker 7:

Nobody's really changed that much over the course of the last couple of years. So look, I think there is something to be said about [00:14:00] there's a lot to be said about social support. Like people have rituals for a reason. We have wakes for a reason. We have Shivah for a reason, we have holidays for a reason, and it's because human beings are social animals. And so I think we're all in desperate need for that communal feeling again. And I think that's going to outweigh any anxiety we have about seeing our potentially psychopathological family and, or our fears for COVID 19. So folks, if you're vaccinated, it's no [00:14:30] 100% guarantee, but you're pretty safe. Go and enjoy the people that you love as much as possible while at the same time wearing the mask. And when you're unsure, washing your hands, right. Not necessarily sharing communal meals, like with run big bowls, right. There are things doing things outside, like you are gonna do with your family, Mary. Right. But let's try because I think what the next stage married, we've got to learn how to live with this thing. Right. And to go on with our lives. And Alex asked me, do you think people are going [00:15:00] to continue to wear a mask? Like there's going to be a part of the population is going to wear rests forever from now on. Right. And that's just our new normal and that's okay.

Speaker 6:

Yeah. It'll take some time. Tell me a little bit, um, you know, because we're coming to the end of the year and the holiday season. Tell me a little bit about how you feel this moment in the world of public health fields, relative to the history of public health. You've brought up a few different things that are historical moments in public health, like the eradication of polio in our country. Um, I don't think [00:15:30] we feel like it's quite that yet. And you talked about the HIV aids epidemic. What does this moment feel like to you? Um, you know, when you look back on the history of public health, how can it, um, the history inform us about what we might see coming forward?

Speaker 7:

Yeah. I mean, I think one of the big lessons from the last two years is that we need to invest more in this area. Very, very clearly, right. That, you know, clinical care is fine and

doctors are fine and hospitals are fine, but ultimately public health is what's going to keep the health and safety [00:16:00] of the population together. I think that is a big lesson that we take out of the last two years, which is like our infrastructure. Um, our public health infrastructure is as broken in some ways as our roads and bridges are in this country. And so we have to invest in it. Um, I think number two, um, I think the other big lesson over the last few, I think one of the big telling moments for me over the last few years around public health is the disparities that were evidenced once again, which say to me, which indicate to me, right, it doesn't matter if we're talking about COVID or TB or HIV [00:16:30] or whatever.

- Speaker 7:
- It's all about disparities that exist in our society. And we have to stop documenting these disparities and start working towards health equity. So I think this is a really good moment for public health to be at the table with medical providers and nurses and social workers and psychologists in advancing the collective health of the population. We're seeing it across the country. Students are increasingly interested in our field, right? They want to do this work, but they want to do it in a slightly different way than before, which [00:17:00] is theories are good at the genealogy is good. Social justice and activism is what really has to be at the core of public health. And that's the inflection right now. We saw it in 1990 with HIV. I think we're seeing it again, the activist approach to public health.
- Speaker 6:
- And what you're really talking about is prevention, right? Source we support and are so grateful to our healthcare workers on the front lines, um, fighting for those people who have gotten ill from this virus. And of course we're grateful [00:17:30] for them, but it would be so much better if we could prevent more of that. And that's the work of public health. Um, and that is the activism and efforts of our public health, um, officers and PR practitioners in the community, working door to door to try to encourage people to access the available prevention like testing, like, um, vaccination. And those are the things that really will get us out of this, um, out of this cycle of, of the disease.
- Speaker 7:
- Well, Priya and I love the way you [00:18:00] said that Mary, because it is about prevention. It's like, yes, if somebody smokes cigarettes and they develop cancer, do we have treatments for cancer? Yes. I would like to prevent them from smoking cigarettes. If somebody acquires HIV, do we have treatments to keep them suppressed for Bartol yes, we do. I would like to prevent them from getting HIV. Right. So it's like, this is the exact same thing. Yes. Do we have treatments from COVID? It would be better if you didn't get COVID so let's prevent it with vaccine
- Speaker 6:
- And yeah, to me, that's one of the big moments too, is we're now at a point where this is a preventable illness and the beginning [00:18:30] of the pandemic this time, last year, it wasn't, you know, we didn't have those prevention tools like we do now, like the vaccine. So it's, in some ways that's a very hopeful moment.
- Speaker 7:
- It is a helpful, and it's a really helpful moan for the HIV world too, because the MRJ vaccines are the great hope for a vaccine for HIV, you know, in the future, the past two trials that failed, right? Maybe this is it,

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Speaker 6: This isn't well, Perry, thank you so much for joining us here today. And I wish you

[00:19:00] a very happy holiday season.

Speaker 7: Thank you, Mary, to you and your family and to all of your podcast listeners, you know,

it's always a lovely and wonderful and interesting and exciting to speak with you. So

thank you very much.

Speaker 6: Thank you for joining us for this episode of on the pandemic. We wish you a happy, safe,

and healthy holiday season to listen to other episodes of this podcast. Please visit

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