

COVID-19: we will not be returning to the old normal

Recently there has been a gradual shift in the COVID-19 discourse based on an acknowledgement that clearer communication is needed to manage public expectations. Although not directly factored into this shift of tone, the so-called fatalism effect can teach us something. This concept essentially warns that if a problem is characterised as nearly insurmountable then many people will just give up. These people surmise that the cost of the intervention is not worth it, given they perceive that the cost yields little benefit. Conversely, it is also important to guard against overly optimistic assessments, such as those from certain governments relating to a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine. Many governments have confidently asserted, without due consideration of the consequences, that a vaccine will abruptly end the pandemic.

Given the potential for misunderstanding at this point, let us be clear: an approved vaccine will be beneficial and its uptake should be strongly encouraged, but it can only be a part of the solution. The reason a vaccine cannot be the complete solution is illustrated with the three vaccine scenarios recently put forth by Zain Chagla, Isaac Bogoch, and Sumon Chakrabarti: a vaccine that prevents nearly all person-to-person spread (presumably also halting illness; scenario 1), one that prevents some spread and reduces severe illness and death (scenario 2), and one that does not prevent spread but reduces severe illness and death (scenario 3). At this stage of clinical assessment it is difficult to be certain whether the real vaccines will fit into scenario 2 or 3. They are unlikely to fit into scenario 1, although even this scenario would not be an instantaneous solution given the mind-boggling logistics of delivering a vaccine to over 7 billion people.

All the vaccine scenarios will require that the mitigation measures employed worldwide continue for a few years at least. Of course, the scenario 1 vaccine would, in time, allow us to reach a point where other measures to prevent transmission of SARS-CoV-2 become unnecessary. Ideally, in a show of global solidarity, the measures would be retained until the world had largely brought COVID-19 under control. However, it would be naive to assume that individual nations would not lift restrictions as soon as possible. The other scenarios are more tricky propositions and

illustrate that political optimism can be genuinely dangerous. If we use the scenario 3 vaccine as our example, this might eliminate severe and potentially deadly disease in those able to receive the vaccine, but the virus would still be able to spread through the population unhindered. So those unable to receive the vaccine, a group which overlaps with many groups current measures are protecting, would be unprotected.

For months many governments have proclaimed that a vaccine is the complete solution, without any mention that not all potential vaccines will fill this role. Nonetheless, some quarters will push to roll out a vaccine, irrespective of its properties, and abandon other measures. It is not unreasonable for the public to expect this drive, given the failure to manage expectations to date. In this setting most people would experience little disease but those who currently are at greatest risk would find themselves completely exposed. This would be an inversion of the underlying principles guiding current interventions. Some might see this characterisation as absurd, but we have seen the world over how easily physical distancing seems to have been abandoned when people are led to believe, deliberately or otherwise, that new measures replace rather than complement earlier interventions.

Often it is difficult to offer solutions, but it is straightforward in this case: interventions that have been in use since early in the pandemic, most crucially physical distancing and hand hygiene, must continue indefinitely. The benefits of these simple measures will have far-reaching implications as shown in a news story in this issue by Paul Adepoju, which describes how work to control neglected tropical diseases has benefitted from the drive for improved hygiene in response to the pandemic. It might be that the vaccines that ultimately become available are more like those described under scenario 2: slowing transmission in addition to limiting illness and death. This scenario will be more welcome than scenario 3 but will not change the need to maintain earlier interventions in place. It is time to forcefully impress on people that basic measures to limit the transmission of SARS-CoV-2 are here to stay. This is the new normal.

■ *The Lancet Microbe*

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(Mick Baker/rooster)

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For more on the **three vaccine scenarios** see <https://www.theglobeandmail.com/opinion/article-a-vaccine-may-not-be-the-simple-solution-we-are-hoping-for/>