

THE CORONAVIRUS PANDEMIC

Postcards from a nervous world

BY BRIAN MURPHY

The global story of the pandemic is both staggering and subtle. The immensity of it all — the cases, the countries, the spread — can also be seen through another lens: a vast catalogue of personal moments, experiences and observations.

The Washington Post has asked contributors around the world to share some of theirs.

Yvonne Gordon, Dublin

I never noticed all the sounds of Dublin until they fell silent. It's an afternoon, but the streets are empty. There are no voices filling the air. There's no hum of traffic, no footsteps, no rustling of shopping bags. There are no haunting strains from the songs of buskers on Grafton Street. No crowds have gathered, mid-shopping, to listen.

The streets are sunny and bright, but eerily quiet. Even the screeching seagulls seem to have gone. The only noise on Nassau Street, echoing everywhere, is of shop signs squeaking in the wind while mostly empty buses pass by.

The people have deserted the city and moved out to the parks, the mountains and the sea. Cycle lanes are busy. Beaches and promenades are lined with walkers and joggers, everyone sticking to their small family units. Some people are even swimming in the sea, all getting exercise, most maintaining the respectful "social" distance.



Dublin

COURTESY OF YVONNE GORDON

And as we're Irish, the chat and music has simply gone indoors for now. We're all on the phone, and we're having virtual happy hours and online fitness classes, watching Instagram chef demonstrations and music performances. People are sharing photos of art projects, bak-

ing and uplifting writing.

We Irish have been through a lot. We're resilient. It's in our genes. We might be physically distant, but we're becoming closer than ever, ready to support each other whatever this crisis brings.

Robyn Dixon, Moscow

Okay, here's my confession. I am not the fittest person. When I walk, it's more likely to be a gentle stroll across Moscow to check out some foodie haven of burrata, olive oil, pasta and delicacies rather than striding to a gym.

But something clicked recently. A smartwatch with an activity app and a Moscow gym membership helped. I got satisfaction from the rows and rows of little circles tracking my activity and virtual "medals" for my longest exercise streak — ever. Now it was me churning on the ellipticals and lifting weights.

It is painful to admit this. I had never exercised — hard — every day for one entire month. (Why waste weekend time when I could be rolling out ravioli, grinding up spices, kneading bread, watching souffles rise, churning ice cream, inviting friends over and eating?)

Then came the coronavirus. I was put under a 14-day self-isolation regime after returning to Russia on a flight from Europe.



WILL ENGLUND/THE WASHINGTON POST

That meant no more gym, and no more of the little crosses I was marking off daily in a notebook chronicling my gym attendance.

I am now getting acquainted with an army of YouTube fitness coaches. There's Gin. There's Tiffany. There's Daniel. There's

Body this, Body that, Burn this and Blast that.

My pasta-making machine lies idle. There are no dinner parties, no menus to plan, no wandering in markets. And no pouncing on some prized ingredient found while shopping.

Per Liljas, Uppsala, Sweden

Finding bicycle parking in central Uppsala is usually a challenge. In this town of students and cobblestones, nearly everyone is on two wheels.

As the coronavirus epidemic has grown, I've been waiting for this to change. For people to stay at home. But unlike our neighboring countries, Sweden's schools and workplaces haven't shut. People still gather by the river to soak up the early spring sun. And I find myself continuing to search for a free spot for my bike as I arrive for work in the mornings.

The normalcy is naturally an illusion. More people ride bikes because they don't feel safe on the bus. They soak up sun outdoors but stay away from restaurants and public pools. I drop off my kids at day care, but their classes are half-empty, at best, and all the carefully planned teaching has been abandoned. Thousands have lost their jobs.

Our government may have refused to take draconian steps against the virus. But, in a highly unusual address to the nation, the prime minister declared that we should all be



COURTESY OF PER LILJAS

prepared for further measures.

Perhaps the milder restrictions we live under now are a curse because it leaves us with all these decisions. Would it be safe for family members from out of town to celebrate our son's fifth birthday? For how long should my now-unemployed brother self-isolate before spending time with our parents?

No one is used to a situation like this, but us Swedes may be

particularly badly prepared.

We don't have any collective memory of hardships. Many of us feel entitled to freedoms, yet still count on the government to fix problems for us. Our society was polarizing before. Solidarity seems to be on the rise. But there is also unease as to whether authorities are taking the appropriate steps. If nothing else, it is shaking people out of their comfort zones.

Carrie Donovan, Gelsenkirchen, Germany

I got a coronavirus test on March 20. Yay? I actually went to a hospital seeking treatment for my weeks-long case of pneumonia and had been told over the phone to expect a blood test and chest X-ray. Over the phone, they said worries about covid-19 are no reason to come. But I had some symptoms.

Hurriedly, I showered and piled a stack of belongings for my husband to deliver to the hospital if I had to stay overnight like last time. I made my way past the empty hand sanitizer dispenser at the entrance and introduced myself at the ER desk, as instructed, expecting to be examined and given treatment.

Instead, the nurse handed me a face mask and gloves. After a short wait, I was directed to an outbuilding strictly for covid-19 cases/testing. A man whose mother and brother live in Baltimore (#smalltimore) stuck a long cotton swab into my throat and both nostrils



COURTESY OF CARRIE DONOVAN

and told me to call back Monday afternoon, three days after the test.

Monday afternoon? No kidding? No kidding. And no pneumonia treatment or prescription.

I wasn't even sure what I want the result to be. A posi-

tive means quarantine, but a negative means I'll probably be knocked down even harder if I do get infected.

The test result came back Thursday: negative.

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Japan and South Korea offer lessons on testing, as the U.S. faces a choice

BY SIMON DENYER AND CAROLYN Y. JOHNSON

TOKYO — In East Asia, two rivals are grappling with the coronavirus pandemic in very different ways: mass testing versus targeted testing.

It's a debate over tactics that has profound implications in the United States and elsewhere, as health officials struggle to find the best methods to track and contain the virus.

South Korea has won global praise for swiftly making coronavirus tests widely available and has already tested more than 394,000 people. It has found 9,583 infected people.

Japan, a country whose population of about 127 million is more than twice that of South Korea, has conducted more than 48,000 tests on approximately 28,000 people and found 1,724 cases.

For weeks, Japan has been gripped with a debate. Is the country seeing fewer infections than South Korea simply because it is testing fewer people? Is the Japanese government marshaling its resources wisely, or burying its head in the sand?

As in the United States, Japan's government was criticized in the early weeks of the outbreak for failing to expand its testing capacity.

Japan has since expanded testing capacity, but the Japanese Medical Association said it has identified 290 examples in which doctors requested tests for sick

people but were unable to obtain them.

Under government guidelines in Japan, patients who are not elderly are advised not to even visit a doctor unless their fever persists for four days, and they cannot get tested without a doctor's recommendation.

As a result, Japan's official tally is likely to significantly understate the number of infected people.

But proponents of the methodology say it has allowed Japan's health-care system to focus finite resources on the truly sick and keep the death toll relatively low. So far, just 55 deaths in Japan have been attributed to the coronavirus.

"People should not go to the health-care facility if they are not very sick," said Hitoshi Oshitani, a virology professor at Tohoku University and a member of a government advisory panel.

Oshitani said it was impossible to spot everyone with the virus, since young people often have no symptoms, so the idea was to focus attention on people in the most grave conditions — and tell people with mild symptoms to stay home.

A crowded waiting room — possibly with people jostling to demand tests — is potentially a "dangerous" situation for those without the virus, he said.

Japan says inaccurate tests can do more harm than good. Last week, Spain stopped using test kits imported from China after finding they had an accu-



EUGENE HOSHIKO/ASSOCIATED PRESS

Prime Minister Shinzo Abe speaks Saturday about the coronavirus situation in Japan, where cases have accelerated in recent days.

cy rate of only 30 percent.

In the United States, testing capacity has steadily increased; 894,000 tests were completed by Saturday, according to the White House's coronavirus task force.

At the same time, officials have shifted their messaging. The appeal now: If you have manageable symptoms, you don't need to be tested and should stay home.

Shortages — not just of test kits and components but also of protective gear for workers to safely take samples — have meant that it is essential to channel those supplies to where they are needed.

Physicians put the trade-offs in increasingly stark terms. Any test on a person with mild symp-

tom uses up a mask and gown, and it risks infecting a health-care worker who might be more needed in an intensive-care unit.

Vice President Pence, who at the beginning of the month told the public that "any American can be tested" with a doctor's note, pivoted to a new playbook this past week.

"On the subject of testing, it's important to remember, as the Old Book says, it is not the healthy who need a doctor, but the sick," Pence said. "And so, if you don't have symptoms, you don't need to get a coronavirus test. We encourage every American to adhere to that so that the testing resources are available for people that are symptomatic."

Japan is a key proving ground for such an approach. By some measures, Japan has been successful. The country has so far avoided the acceleration in infections that hit South Korea, much of Europe and the United States. The health-care system in Japan has not been overwhelmed with cases.

Nevertheless, Masahiro Kami, executive director of the Medical Governance Research Institute, says the lack of testing has left the government in the dark on the extent of the coronavirus infections — and may have lulled people into a false sense of security.

"There is no way of understanding the situation accurately," he said. "As a consequence, there is no way to design appropriate measures" to prevent the virus from spreading, such as social distancing, much less to implement them forcefully.

The Japanese helped prove his point. This month, residents of Tokyo gathered in parks to view cherry blossoms and packed into bars and restaurants. With the government taking a soft approach, social distancing broke down at the first sight of spring.

In Seoul, meanwhile, the government swiftly licensed private-sector tests and established hundreds of makeshift testing kiosks, situated outside hospitals or even at special drive-through sites.

"A proper diagnosis communicates the risks to the patients, helping them take precautions accordingly," said Hwang Seung-

sik, a public health professor at Seoul National University.

To isolate patients with mild symptoms and stop them from infecting other people at home, the government established 400 "Life Treatment Centers," where patients have their health monitored to allow for a quick transfer to intensive care if needed.

"The track, trace and treat approach could put a burden on the health-care system. But leaving patients in the dark is ethically problematic and medically ineffective," Hwang said.

Ultimately, the coronavirus may decide which approach is more effective.

South Korea saw an early surge in cases but has managed to slow the pace of new infections significantly in recent weeks.

On Sunday, the number of new infections slowed to just 105, with more than twice as many people discharged from hospitals. Japan has kept the virus under better control so far, but the past few days have seen a dramatic acceleration, with a record rise of 200 new cases.

On Thursday, the Japanese government's expert panel said it was highly likely that the disease was "rampant," and the streets of Tokyo finally began to empty.

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