

# CONGRATULATIONS!

# BIDEN HARRIS WIN 2020 US PRESIDENTIAL ELECTION

## 恭賀: 拜登 賀錦麗 當選 美國總統暨副總統



歷經數日計票程序，民主黨候選人拜登最終拿下賓州 20 張選舉人票，並於當地時間 7 日以 284 票比 214 票擊敗現任總統川普，當選第 46 屆總統。美南傳媒集團董事長李蔚華發出賀電恭喜拜登賀錦麗入主白宮。



休士頓 AAPI 社區民主黨各族裔參選者及支持者 10 月 25 日，在美南新聞前廣場集會，為拜登競選總統及副總統候選人卡馬拉·哈里斯拉票。



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# Biden narrowly beats Trump for presidency in deeply divided United States

WILMINGTON, Del./WASHINGTON (Reuters) - Democrat Joe Biden won the U.S. presidential election on Saturday after a bitter campaign, sparking street celebrations among his supporters in major cities even as President Donald Trump refused to accept defeat.

Biden's win of the battleground state of Pennsylvania's 20 Electoral votes gave him more than the 270 he needed, ending four days of nail-biting suspense in a deeply divided country as angry pro-Trump demonstrators gathered outside some state capitol buildings.

"With the campaign over, it's time to put the anger and the harsh rhetoric behind us and come together as a nation. It's time for America to unite. And to heal," Biden said on Twitter.

Congratulations poured in from around the world, including from conservative British Prime Minister Boris Johnson, Canadian Prime Minister Justin Trudeau and German Chancellor Angela Merkel, making it hard for Trump to push his repeated claims, without evidence, that the election was rigged against him.

Trump, who was golfing when the major television networks projected his rival had won, immediately accused Biden of "rushing to falsely pose as the winner."

"This election is far from over," he said in a statement.

Trump has filed a raft of lawsuits to challenge the results but elections officials in states across the country say there has been no evidence of significant fraud, and legal experts say Trump's efforts are unlikely to succeed.

As the news broke, loud cheers erupted in the halls of the hotel where aides to the former vice president were staying.

Biden's running mate, U.S. Senator Kamala Harris, tweeted a video of her calling Biden to congratulate him: "We did it Joe!" Harris will be the first woman, the first Black American and the first American of Asian descent to serve as vice president, the country's No. 2 office.



Cheers and applause were heard in neighborhoods around Washington, D.C., with people emerging onto balconies, yelling, honking car horns and banging pots. The wave of noise built as more people learned of the news. Some were in tears. Music began to play, "We are the Champions" blared.

In the Brooklyn neighborhood of Bedford-Stuyvesant, people clapped, and erupted in screams of joy as the news spread. Some residents danced on a building's fire

escape, cheering while others screamed "yes!" as they passed by.

In a reminder of the divided state of the country, however, angry pro-Trump "Stop the Steal" demonstrators gathered at state capitol buildings in Michigan, Pennsylvania, and Arizona.

The protesters in Phoenix chanted "Trump won!" and "We want audits!" One speaker told the crowd: "We will win in court!" Congratulations for Biden from Ameri-

ca's politicians and celebrities  
Global leaders react to Joe Biden's election win  
Former and present political leaders also weighed in, including congratulations from former Democratic President Barack Obama and Republican U.S. Senator Mitt Romney. Trump ally Senator Lindsey Graham called on the Justice Department to investigate claims of voting irregularities.

Stay Home!

## BUSINESS

Wear Mask!

### COVID-19 News Updates 11/09/20

#### Former FDA Head: White House Strategy Of Waiting For A Vaccine Is "Problematic"



Former FDA Commissioner Scott Gottlieb said on CBS' "Face the Nation" last Sunday that the White House strategy to combat the spread of coronavirus appears to be "to endure the spread until we get to that vaccine."

Compiled And Edited By John T. Robbins, Southern Daily Editor

**Why it matters:** That strategy, which leaves much of the mitigation efforts up to the states and excludes a national mask mandate, is "problematic" because the "first tranche of people to get vaccinated really won't be protected ... probably until February and maybe March," even if companies apply in November with the FDA to administer the vaccine, Gottlieb said.

"We're going to have to endure this wave of spread right now — and it's probably likely to be the biggest wave that we endure — without the benefit of a vaccinated population, so we're going to have to rely on those mitigation steps."

Gottlieb is on the board of Pfizer, one of the companies developing a vaccine. The company's CEO has said it hopes to know the efficacy of its product by the end of October.

**What he's saying:** "If you look at the White House strategy, they've come out against universal masking, they've come out against testing asymptomatic and moderately symptomatic people, they say testing should be reserved just to the vulnerable," Gottlieb said.



"They want businesses and schools reopened, as we all do, and they're against targeted mitigation like closing restaurants. ... So it begs the question: What is the strategy? And I think the strategy is just to endure the spread until we get to that vaccine."

#### U.S. Shattered Records For New Coronavirus Cases This Past Week As Hospitalizations Climbed

New coronavirus cases in the U.S. reached staggering highs this week, the second week in a row of record-breaking growth. Hospitalizations rose quickly, too, approaching levels that will soon eclipse the spring and summer peaks. On Wednesday, the country record-

ed more than 100,000 cases in a single day, a threshold Dr. Anthony Fauci warned lawmakers the U.S. could reach if the virus was not driven down before winter. By Thursday, cases had jumped even higher to more than 121,000 in one day. New U.S. cases are now up 55% over two weeks ago on average.

"Cases are going up exponentially in many different parts of the country," says Dr. Albert Ko, professor and department chair of Epidemiology of Microbial Diseases at the Yale School of Public Health. The U.S. is now averaging more than 94,000 cases a day, double where it was a month ago. Ko says it's not unreasonable to think the daily case count could double again, given the current trajectory of the U.S. outbreak. The increases cannot be explained by more testing, says Anne Rimoin, professor of epidemiology at the UCLA Fielding School of Public Health and Infectious Disease Division of the Geffen School of Medicine.

"There's no indication that the number of cases will go down," she says. "These are true increases; it's not just due to more testing."



Testing has increased modestly in the past month but has not surged anywhere near fast enough to explain the case growth. And positivity rates are high in many states, a measure that indicates when there are more infections in the community than are captured by testing.

#### Vaccine Timeline Needed "To Ensure Public Trust"

Pfizer says people might start getting COVID-19 vaccines before the end of the year, according to a timeline it laid out Friday. By the end of October, the company said it hopes to know whether the vaccine is effective, the Wall Street Journal reports. By the 3rd week of November, it hopes to know whether it's safe for distribution. By late November, the company could request an emergency use authorization. The big picture: This reduces the odds of a vaccine being approved before the election, but also works to reduce concerns about vaccines being approved for political reasons.

"To ensure public trust and clear up a great deal

of confusion, I believe it is essential for the public to understand our estimated timelines," CEO Mr. Albert Bourla said today.

The bottom line: "The vaccine candidate from Pfizer and BioNTech is among the most advanced in development, along with candidates from AstraZeneca PLC, Moderna Inc. and Johnson & Johnson," the Journal notes.



"Yet trials for AstraZeneca and J&J's vaccines are on hold, at least in the U.S., as safety issues are probed."

The studies' pauses, combined with the timeline laid out by Pfizer, suggest the company's shot could be one of the first, if not the first, to be sent to the U.S. Food and Drug Administration for review."

#### Hospitalizations rise toward summer's levels

When infections spike, it often takes several weeks before that is reflected in the reports. As of Thursday, hospitalizations had climbed 14% over the past seven days, according to the COVID Tracking Project. More than 53,000 COVID-19 patients are in the hospital — approaching the spring and summer peaks when about 60,000 people were hospitalized.

"We already have a lot of hospitalizations at this point and I'm worried in the next two or three weeks those could double — it would be devastating for public health," says Ko.



Illustration: Sarah Grillo/Axios

The Midwest remains in the most precarious situation. It now has more cases per capita than any other region during the pandemic. Cases are rising the fastest in those states, up more than 80% from two weeks ago.

Illinois has added about 50,000 cases over the past week, according to a CDC analysis, outpacing even Texas and California, which have much bigger populations. And hospitalizations

are climbing steeply too. "The rise in cases and hospitalizations is unsustainable," said Illinois Gov. J.B. Pritzker this week. In parts of Wisconsin, state health officials say hospitals are nearing or already at capacity. Many have relied on moving patients to different parts of the state, but that is becoming increasingly difficult. While the increase in hospitalizations is most dire in the Midwest, at least 20 states have more than 1,000 people currently hospitalized with COVID-19. Texas leads the country. Some Western states including Colorado and New Mexico have seen record numbers of hospitalized patients. The situation is projected only to worsen as the weather turns colder and people spend more time indoors and travel for the holidays.



#### As deaths slowly rise, will lockdowns follow?

Since mid-October U.S. deaths from COVID-19 have also crept up from a daily average of about 700 to more than 850. On Thursday, the U.S. had more than 1,200 deaths.

Improvements in treating COVID-19 patients have helped bring down the death rate so that people who are hospitalized with the illness now have a lower chance of dying compared to earlier in the pandemic. But a person's chance of dying from the disease is "still pretty high," says Rimoin. "It's higher than most infectious diseases, including influenza," she says. "Plus, it's not just about deaths, it's also about severe disease and disability."

As hospitals fill up with COVID-19 and influenza patients, state leaders will be forced to confront unpopular decisions about how much to shut down the economy and limit gatherings, says Graham. "A broad lockdown is effective in certain types of situations," says Graham, who points to New York City's success in containing the virus. "It basically enforces compliance, and some places are going to be a lot more willing to and able to take another large lockdown." The Northeast is now contending with a huge rebound. Cases have shot up 65% on average over the past 14 days." (Courtesy Axios and / www.npr.org)

# BIDEN WINS



Joe Biden poses for a selfie after addressing the International Association of Fire Fighters in Washington, March 12, 2019. REUTERS/Kevin Lamarque



Democratic presidential nominee Joe Biden makes a statement on the U.S. presidential election results during a brief appearance before reporters in Wilmington, Delaware, November 5, 2020. REUTERS/Kevin Lamarque



Joe Biden sits with kids from the Union Baptist Crusaders drill team during an event at the Brown Derby Ballroom in Waterloo, Iowa, December 5, 2019. REUTERS/Shannon Stapleton



Joe Biden greets supporters at an event at Iowa Wesleyan University in Mount Pleasant, Iowa, June 11, 2019. REUTERS/Jordan Gale



Joe Biden and Bernie Sanders bump elbows before the start of the 11th Democratic candidates debate of the 2020 campaign, held in CNN's Washington studios without an audience because of the global coronavirus pandemic, in Washington, March 15, 2020



Joe Biden talks with Kamala Harris after the conclusion of the Democratic presidential debate in Houston, Texas, September 12, 2019. REUTERS/Mike Blake



Joe Biden quips that it's awkward to talk about foreign policy to reporters with an ice cream cone in his hand, at the Cone Shoppe during a two-day campaign kickoff in Monticello, Iowa, April 30, 2019. REUTERS/Jonathan Ernst



Joe Biden argues with a worker about his gun control policies during a Biden campaign stop at the FCA (Fiat Chrysler Automobiles) Mack Assembly plant in Detroit, Michigan, March 10, 2020. REUTERS/Brendan McDermid

***We Need To Help Older Adults Thrive***

**COVID-19 Has Worsened Ageism\***

(\*Ageism is prejudice or discrimination based on a person's age.)



**KEY POINTS**

**COVID-19 has disproportionately affected older people's lives and livelihoods**  
**Ageism has worsened those effects and prevents necessary solutions**  
**How can we overcome biases and help support the aging population?**

Compiled And Edited By John T. Robbins, Southern Daily Editor

The COVID-19 pandemic has disproportionately affected older people around the world, causing devastating blows to their physical health, their mental health and their livelihoods. The insidious effects of ageism are making these challenges even more difficult to overcome. Stereotypes, prejudice and discrimination based on age enhance existing inequalities and prevent effective countermeasures. The assumption that all older people are frail or dependent is not only inaccurate but also harmful.

For the world to fully recover from the far-reaching effects of the pandemic, we must first address the biases that are underlining COVID-19's damage to older adults. A new report from the World Economic Forum's Global Future Council on Longevity, "COVID and Longer Lives: Combating ageism and creating solutions," outlines the importance of ensuring that responses to the pandemic

are informed, inclusive and targeted to protect the rights and dignity of older adults.

**How COVID-19 affected older adults** Older adults, especially those with pre-existing co-morbidities, have been the most vulnerable to the health effects of the virus. Long-term care facilities, in particular, have seen heightened cases of mortality.

In many low- and middle-income countries, older adults face additional issues including access to care, weak health

systems, poor infrastructure and the spectre of severe longer-term socio-economic effects of the crisis. In addition, even before the pandemic, reports showed that many older adults were already more socially isolated and experienced more loneliness than the rest of the population. Coronavirus containment measures, including confinement measures, physical distancing and restrictions on movement and social gatherings, increased the risk for social isolation and loneliness.

Remaining at home makes it challenging to engage in healthy lifestyles such as physical activity and eating well. There's also a mental toll: Social isolation has been linked to an increased risk for premature death, similar to cigarette smoking, physical inactivity or obesity.

**What ageism gets wrong** Ageism tends to paint all older adults as the same. The reality is that older persons are diverse and have several different identities. They are more than their age. Undervaluing the economic contributions of older adults and considering them a burden on economies is another form of ageism. In truth, many older people are essential to society and contribute to the economy in terms of both paid work and more importantly, less visible unpaid work such as caregiving and volunteer work.



The paid and unpaid contributions of older people equal or surpass the costs of caring for older adults. For example, older people are responsible for more than half of consumer dollars spent in the US, and people over the age of 50 years contribute more than \$745 billion to the US economy in the form of volunteering, caregiving and childcare. More difficult to measure but just as important, older persons who provide care for

their grandchildren often contribute to the knowledge, skills and socialization of these children and allow their parents to work and contribute to the economy.

**How we can help older adults thrive?** Older adults want to maintain their independence, have easy access to transportation, integrated age-related services, recreation and connection to nature. The right care at the right time in the right place is therefore crucial. Virtual solutions can help older adults get the help they need, in terms of health care, social connections and access to services. But first, we must overcome the "digital divide." Older adults disproportionately have difficulty accessing technology and their digital literacy tends to be low. We must address the accessibility gap to deliver the support required for older adults to continue to thrive in their homes and communities.

In addition, we must remember how much older adults still have to contribute to society, instead of only seeing the dynamics of support and dependency. The best solutions encourage social participation and connectedness and foster a sense of belonging.

Social connections between generations are vital. There is so much we can learn from each other, if only we reach out and make an effort.



We should also explore creating an instrument to address structural barriers older adults face and protect the rights. For example, could we create a UN Convention on the Rights of Older People? There's more work to be done, but ridding our biases and acknowledging the importance of older adults in our economies and societies is an important start. (Courtesy /www.weforum.org)

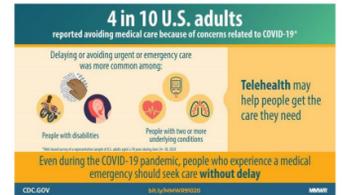
**CDC Facts: COVID-19 Guidance for Older Adults**



The more closely you interact with others and the longer that interaction lasts, the higher the risk of COVID-19 spreading.

**Older adults** and people of any age who have serious underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing more serious complications from COVID-19 illness.

**Older Adults Die More Frequently from COVID-19** An analysis of more than 114,000 COVID-19 associated deaths during May – August 2020, found that 78% of the people who died were aged 65 and older, and 53% were male; 51% were White, 24% were Hispanic, and nearly 19% were Black. COVID-19 remains a major public health concern regardless of age or race and ethnicity.



**Adults Delay Medical Care Due to COVID-19 Concerns** An estimated 41% of U.S. adults reported avoiding medical care because of concerns about COVID-19, including 12% who avoided urgent or emergency care, and 32% who avoided routine care. Even during the COVID-19 pandemic, people who experience a medical emergency should seek medical care without delay. (Courtesy www.cdc.gov) For additional information, go here: <https://www.cdc.gov/aging/covid19-guidance.html>.

**SC 美国生活 Daily News**

**美国的中产阶级,你了解吗?**

(来源:尔湾华人网)近来看见很多文章探讨国内中产阶级的标准和生活,比如有以家庭年收入达8万以上的划分标准,也有以有房有车为要求,也有进一步指出应该以有房有车无贷款为前提,甚至还有人提出具体的生活标准,比如某所谓成功男士觉得中产的标准是吃饭上哪家餐厅、饮料得是咖啡、衣服手表得是什么牌子。

这个标准笔者认为有点荒唐,穿衣吃饭个人有个人的喜好,有千万富翁喜爱粗茶淡饭的,也有工薪阶层节俭缩食买名牌包的,这样的标准同时反映我们社会现在过度追求物质、急于用名牌来证明自己成功或幸福浮躁心情。

中产阶级的提法来自西方,在美国,最早对中产阶级做出学术界定并分类是在1951年,但是不同的学者对中产阶级的界定有不同的标准,根据这些标准,美国有25%—66%的人口可以划分为中产阶级。后来的学者还对中产阶级群体进行了细分,比如上层中产阶级和下层中产阶级。虽然各个学者对中产阶级划分有不同的标准,但是相同的是他们都是根据家庭年收入、从事的职业、教育程度来划分的。受过大学教育是中产阶级的最基本的一个条件。

这只是对中产阶级划分的一个学术标准,可以说到现在美国也没有一个确定的唯一的标准,比如去年的减税大战中,民主党人认为20万美金以下的为中产,共和党人则认为低于\$131,450的才为中产。也有将25万以下划分为中产阶级(其中15万以上为上层中产),25万以上为富人(约占人口的5%),40万以上为超级富人的(占人口的1%)。

美国的中层阶级占到一半或者65%(根据不同的划分标准),因此是推动社会发展的主力军,也是消费的最大群体,进而他们生活是否稳定对社会是否稳定起到很关键的作用——美国的中低收入者例如工人阶层、穷人群体在税收、福利方面都得到政府的救济和帮助。

至于中产阶级的生活似乎也有一定的标准,一栋房子,一到两部车,甚至一两宠物是美国中产阶级生活最生动的描述。不过车在美国并不是有、有钱人士的专属,而且是必备的生活工具,因为在美国除了大城市外,并没有我们国内品种齐全的交通工具,而且美国人都喜欢郊区,因此拥有车辆是生活必需品。

美国房价远比国内便宜(房价和当地居民收入比)。美国中等大小房屋(独立式房屋)全国平均价位18万的样子,居民年家庭收入去年为5.9万,因此置房的压力没有国内大。但是美国绝大多数人都只有一套房子,我想原因一是因为美国炒房成本太高:地产业每年交,一般为房屋价格的1.5%—5%,各个州各个郡规定不同;其二是美国再好的单位,包括政府机构都不会为员工分配住房,像国内好的国有垄断单位及政府机关工作人员可以享受福利分房或者低于市场价购房然后出售获得巨额盈利自己再购房的现象不存在。

除了超级富豪,美国人买房都会贷款,包括

美国现在的总统和副总统,除了他们习惯今天花明天的钱以外,还因为贷款的利息可以减税,而且一旦国家大的经济环境不好,政府会出台一些救助屋主的政策。

和国内那些富裕中产家庭个个拥有几套住房,热烈购买奢侈品不同的是,美国的富裕中产更在意的是享受每一天的生活,比如海外度假,在花园里建游泳池,购买船舶等。

在美国中产阶级都有还款的压力,而且他们最担心的就是失业,在国内的只有单位、机关上班一般无重大道德或职业上的大差错,可以在一个单位混到退休,而美国除政府外几乎都是私人公司,工作不努力可以让你走入,银行上班的,出过几次差错的,考核老在后面的也得走入,还有很多理由可以解雇员工。失业后没有找到工作,有没有储蓄缴纳贷款的,几个月后银行就会拍卖房子。

和国内比,美国中产阶级比较无忧的是医疗,当然前提是得有一份工作,美国的绝大部分公司都提供医疗保险,包括那些个人的小公司,店铺等,很多公司为兼职人员提供全面的保险——我以前兼职时,也是医疗、牙科、眼科、人寿险等保险全部都有。

一般的小病,得先去看自己的家庭医生,每次的费用大概在20美金左右,包括一些检查,笔者这段时间背疼,先后做了血液检查,超声波,背部扫描,甚至CT等,每次检查的费用也就是10—20块,有时还不付。进医院也是绝大部分费用由保险公司承担,很多公司还规定了自付的最大比例,比如我们银行有两种,一种保险是自己年最大自付额度为1500美金,一种是3000美金(都是指进医院的手术治疗等)。

在教育费用上,美国中产阶级也要轻松很多,从小学到高中都是免费,家庭贫困或者低收入群体孩子还能在学校享受免费早餐、午餐,甚至有些学校还允许他们带些回家给家人享用。不过美国幼儿园和托儿所很贵,因此很多女性都选择在家里把孩子带到6、7岁再回到职场,移民则通常把孩子送回自己的国家或者接父母来帮著带孩子。美国大学学费也很昂贵,在自己所在的州读大学比较便宜(学校对自己州的学生学费有很大的优惠),但是夸州又是名校就很贵了,不过美国学校一般为学生设有一些顾问,为他们设计合适的融资途径,比如学生贷款,兼职工



作,奖学金等。

日常生活:我接触到的家庭(常来往的)家庭年收入大都在25—40万美金,在美国他们也属于富裕家庭或者最上层的中产家庭了,但是感觉他们的生活远远没有我看到国内的那些好单位的普通员工过的阔绰。房子大都是一套,夏天的衣服、鞋子上一百美金她们觉得很贵,周一到五也都自己在家做饭,也少有每周都去美容院,或者下班后去桑拿按摩的(不过这个在美国并不流行,大部分人都下班就回家)。

我想很重要的原因是美国的税收和其它政策都是典型的劫富济贫,这些收入听上去很高,除掉税金、保险(根据美国的新保险法案,从今年起高收入者每月的保险金有很大程度的上涨,而中低收入者会有很大程度的减免,一般都没有了,而且重要的是美国的公司是不会为员工“合理”避税的,上税的收入包括工资、奖金、分的股票,甚至加班,可以说是你得到的每一分钱都得纳入税收的范围,他们也没有任何隐性的收入)。

他姐夫(一家保险公司在新州的CFO)拿到10万美金的年终奖,可是扣除了税金、保险就只有五万了。我家先生的年终奖也是扣了税和保险也就只有一半了。我记得以前在中行上班时发的节日奖、季度奖、年终奖,从来就没有交过税,不知现在是否有所改变?

所以综合来讲,美国的中产阶级在医疗、教育费用上,不太有后顾之忧,他们不用为还没有将来的疾病和未来孩子的教育拼命攒钱,没有那种因为没有一定存款而心里恐慌的感觉。他们也没有抚养老人的负担,虽然美国的养老体系和西欧比还有一定的差距,但是绝大多数老人都有自己的社会保险,老人医疗保险等,而且美国的老人很多70多岁还照样工作,子女在父母遇到困难还是会给与经济上的帮之,但是整体讲,美国大多数人并没有赡养老人的负担。

但是在另外一方面,他们又没有我们想象的那么富有和阔绰,在日常生活中,他们还挺节约的(仅指大多数数人而言)——他们用折扣券,服饰包类不追求名牌,也不会天天去餐厅吃饭,去餐厅吃饭点菜也没有点上一大桌的豪爽和大气,更不去高档场所按摩桑拿。他们最典型的生活是下班回家和家人呆在一起,分担家务,陪伴孩子,发展自己工作外的爱好,周末出去吃饭、去教堂、也去看电影,打球,夏天在自己的花园里BBQ,休假时带上全家去沙滩度假,条件好的出国旅游。除了孩子小时而那时双方都上班要雇请保姆外,其它时候美国中产阶级都很少会请保姆。