


MAURITIUS TIMES

"I would never have thought a mutant flu virus could crash the global stock markets." -- Steven Magee



Hard realities about the Covid-19 pandemic

"How long will this pandemic last? Months, according to an interview in TIME magazine of Dr Bruce Aylward, senior adviser to the Director-General of the World Health Organisation who led a joint WHO mission to China in February to study the effectiveness of the coronavirus response in the country. He bases his view on the exponential growth that is still happening in Europe, North America, the Middle East, which he thinks will be replicated in other parts of the world, like Africa and parts of the Indian subcontinent where the pandemic is just beginning..."

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The Long Haul

Are we in for the long haul? This is the question that is uppermost in the worried minds of all leaders the world over. And here too we are confronted with the same interrogation: How long will it take for Mauritius to gain control over the pandemic that has come to strike at us in our comfort zone? If we go by the informed opinion of public health specialists and others in diverse fields of scientific research, AI, Data Analysis and Scenario Planning as well as historians, it will take many more months, probably one year for us and most other countries to come back to the situation of normalcy existing before the onset of the pandemic - but not exactly as close to what we had lived earlier: it will be a 'new normal', for the way that things are evolving make it almost certain that the world will never be the same again.

Ian Goldin, a professor of globalisation and development at the University of Oxford and Robert Muggah, lecturer at Pontifical Catholic University of Rio de Janeiro refer to Harvard University researchers who believe that 20% to 60% of the global population could be infected, and conservatively estimate that 14 to 42 million people might lose their lives. The extent to which direct and excess mortality is prevented depends on how quickly societies can reduce new infections, isolate the sick and mobilise health services, and on how long relapses can be prevented and contained. Without a vaccine, COVID-19 will be a hugely disruptive force for years.'

They add that the pandemic will be especially damaging to poorer and more vulnerable communities within many countries, highlighting the risks associated with rising inequality. The challenges are even more dramatic in Latin America, Africa and South Asia, where health systems are considerably weaker and governments less able to respond.

Their grim forecast is that 'the economic fallout from COVID-19 will be dramatic everywhere. The severity of the impacts depends on how long the pandemic lasts, and the national and international response of governments. But even in the best case it will far exceed that of the 2008 economic crisis in its scale and global impact, leading to losses which could exceed \$9 trillion, or well over 10% of global GDP.

In poor communities where many

individuals share a single room and depend on going out to work to put food on the table, the call for social isolation will be very difficult if not impossible to adhere to. Around the world, as individuals lose their incomes, we should expect rapidly rising homelessness and hunger.'

If that's going to be the new normal until such time that a vaccine is developed and tested and a massive vaccination campaign started by governments around the world, then we should get ready to face the many challenges that the next weeks and months of disruption portend. Countries that are able to respond quickly to new and emerging challenges, and change strategies in response to rapidly unfolding scenarios, will be able to deal with highly disruptive events and pressing issues that will come to affect their peoples in the coming months. Rising unemployment (in the US a record 3.3 million people have already filed for unemployment benefit) is looming large. Already across Europe unemployment similarly is reaching record levels, according to the University of Oxford academics quoted above, who add that 'governments should focus on providing all in need with a basic income, to ensure that no-one starves as a result of the crisis. While the concept of basic income guarantees seemed utopian only a month ago, it now needs to be at the centre of every government's agenda.'

Solidarity funds, launched in many countries as well as locally, may represent a beginning to cope with the immediate shortfalls and requirements of the most vulnerable segments of society, but it is the long term that needs to be addressed. This will require State-driven strategic thinking and planning with the involvement of all stakeholders in both the public and private sectors. Only the State can do that. Such a move must begin immediately even as simultaneously all support must be given to the frontliners in all the essential services, the health sector personnel in particular, who are battling Covid-19 with resources that will need to be constantly upgraded. There are very hard times ahead, and only by all its brains working together with clear focus will the country be able to face the many social and economic problems that are inevitably going to surge, and only too soon.

Other Voices

Covid-19 & Protagoras Paradox

Yogi Rabbit

Over 2000 years ago, in Greece, there was a lawyer named Protagoras. A young student, Euthalos, requested to apprentice under him, but was unable to pay the fees. The student struck a deal saying, "I will pay your fee the day I win my first case in the court." The teacher agreed. When the training was completed and a few years had elapsed without the student paying up, the teacher decided to sue the student in the court of law.

The teacher thought to himself:

If I win the case, as per the law, the student will have to pay me, as the case is about non-payment of dues.

... And if lose the case, the student will still have to pay me, because he would have won his first case.

Either way I will get paid.

The student's view was:

If I win the case, I won't have to pay the teacher, as the case is about my non-payment of fees.

And if I lose the case...

I don't have to pay him since I wouldn't have won my first case yet.

Either way I will not pay the teacher.

This is known as **Protagoras Paradox**. Whichever way you look, both have equally convincing arguments, one can go either way in supporting the teacher or the student and would not be wrong.

Medical practitioners often come across such situations - either in making a *diagnostic* or *therapeutic* decision. One physician can recommend a course of treatment based on scientific evidence and another can recommend a diametrically opposite course again based on medical evidence. Right or wrong, but some merit would exist on both sides. Often the physician himself is having an internal struggle to make a decision about the most appropriate course of action. Protagoras & Euthalos are arguing in his mind - to do this or to do that. The horns of dilemma keep tearing him apart.

But what prompted this essay was a tweet by Donald Trump: '**Hope the cure is not worse than the disease.**' I hate to say, but I find some merit in this tweet.

In our global attempt to flatten the Covid curve, I hope we do not flatten the global economy curve. The question is: 'What's the best way forward?'

One group recommends **total lockdown** to break the transmission chain. Based on evidence from China, they managed to control the spread of the virus by ruthless lock own and three months later they are showing that disease is controlled in Wuhan.

On the other hand, the other school of



thought is **graded isolation** & protection of elderly and very young & those with co-morbidities. Let it spread amongst the young and healthy, after all the disease ultimately will be controlled when we achieve **herd immunity**.

The medical community is divided in these two groups. To enforce complete lockdown or graded isolation?

To complicate the issue, the **epidemiologists** have joined the bandwagon with a cacophony of statistical analysis. From Rosy to Doomsday predictions. If we don't do a complete lockdown, then a million people will die in one year. No, say some, more like 90 million will die in one year. Whose data analysis is correct? Some suggest: do nothing, nature will take over in a few months and all will be well; they quote historical data to justify their recommendations. On whose inputs should we base our disaster management strategy?

Then come the **economists** with their doomsday predictions. If this continues till May, our medical resources will be overwhelmed, agriculture will suffer, food shortages will occur, production will come to a standstill. There will be an economic crisis of the proportions that world has not seen ever. So, break this lockdown nonsense and let's get back to work as usual.

What will our **political masters** do? Guess is they will listen to medical experts, epidemiologists and economists. Then they will decide what course of action will ensure their survival, what will get them people's votes and they will run with that...

At present 'lockdown' finds favour with them. Boris in UK had to abandon the recommendations of the medical community about graded response, because the people's perception was - 'Our Government is not doing enough to protect us citizens.' That means revolt against him. So, screw it, let's go with total lockdown if that's what the people want. Gradually people will get tired of lockdown and demand: 'Let life go on.'

Then with equally convincing arguments, the governments will say the time has now come to lift the blockade, we have controlled the contagion, we have won.

Incidentally the Protagoras Paradox has not been resolved till date. Students in law school still hold mock trials and give arguments on both sides. Without any resolution of the dispute.

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Editor-in-chief: M. Ramlallah
Senior Editor: Dr RN Gopee

This epaper has been produced with the assistance of
Doojesh Ramlallah, Sultana Kurmally and Kersley Ramsamy

Pearl House 4th Floor Room 406 - Sir Virgil Naz Street, Port Louis
Tel: 5-29 29301 Tel/Fax: 212 1313

Hard realities about the Covid-19 pandemic



Dr R Neerunjun Gopee

As at March 29, 2020, 12:15 GMT the global tally of coro-navirus ases was 680,195, with deaths at 31,905. For Mauritius the corresponding figures were: 102 and 2.

There is a literal tsunami of information circulating about the pandemic, including fake news on social media liable to cause panic and in some cases even meant for rabble-rousing. The latter can divert the energies of the law and order forces which are already overstretched in all jurisdictions. It is important therefore that people be very mindful about getting the correct information from authoritative sources, and not be swayed by all manner of claims about such issues as the extent and spread of the pandemic, medical therapies, alternative treatments, prevention modalities and so on.

There is a saying quoted in management workshops which goes: the only thing that is constant is change.

As regards Covid-19, the only thing that is certain is that, from the beginning, there have been a lot of uncertainties. And some queries that are yet to receive plausible answers.

For example, how did the epicenter shift from Wuhan in China to Lombardy in Italy and is now in New York, USA?

How come Beijing and Shanghai in the Chinese mainland have registered only about 500 cases, with only a few deaths, whereas the number of cases is rising exponentially elsewhere as also the number of deaths, which have already exceeded China's in Italy and Spain?

We are up against some hard truths which are going to haunt us for quite a while.

Except for Singapore, no



"Dr Paul Young is a virologist who is leading one of the many teams across the world which form part of GVN (Global Viral Network) and are working on development of a vaccine against Covid-19. In an interview, this is what he says in *Prospect*, an English magazine: 'At the very earliest, I don't see vaccines, even under very accelerated conditions, being available within twelve months. And so, a vaccine may not impact this first wave. Where it probably will have an impact is in a second wave. All the pandemics we've seen in the past, which includes the Spanish Flu of 1918-19, have seen a second and even third wave of infection...'"

country was prepared to deal with Covid-19 as it began to spread from China. Singapore had learnt from its traumatic experience with the first SARS epidemic in 2003, and immediately thereafter began to prepare itself for another epidemic. It is considered a model for the world to emulate. There are lessons for Mauritius too, and we will have to apply them once this pandemic is over, in anticipation of another one as Singapore did.

Even the most sophisticated health systems in the world, top of the list being the USA, have been overwhelmed by the magnitude and the rapidity of spread of the epidemic, and are struggling to cope with shortfalls in medical equipment (ventilators in particular), PPE or Personal Protective Equipment such as surgical gloves/masks/ gowns, medical/nursing and other health professionals, drugs and ancillary supplies.

Allied to this is the disposal of the rising numbers of dead, which is compounded by the emotional and psychological trauma of relatives and friends not all being able to be present or to carry out the proper funeral rites.

How long will this pandemic last? Months, according

to an interview in *TIME* magazine of Dr Bruce Aylward, senior adviser to the Director-General of the World Health Organisation who led a joint WHO mission to China in February to study the effectiveness of the coronavirus response in the country. He bases his view on the exponential growth that is still happening in Europe, North America, the Middle East, which he thinks will be replicated in other parts of the world, like Africa and parts of the Indian subcontinent where the pandemic is just beginning.

What will be the cost in terms of human lives? This will depend on whether we are able to stop the spread of the epidemic, which in turn depends on a) how effectively we apply the social distancing and other public health measures that are recommended, b) the capacity of health systems to treat cases, and c) prevention by means of a vaccine.

Right now social distancing and public health measures, which may mean lockdown for periods of up to four weeks (as New Zealand has done), are judged to be the most effective strategy.

Treatment is currently at best for the symptoms only – medication for cough, fever, aches, etc., and ventilation in extreme cases

(about 5%). Countries which have the technical capacity have already begun to manufacture ventilators in large numbers by expanding capacity or repurposing factories.

Hydroxychloroquine use as an antibiotic: although there has been a small promising study in Marseille, France, a specific recommendation cannot be made. This can only be done after clinical trials have estab-

There is a saying quoted in management workshops which goes: the only thing that is constant is change. As regards Covid-19, the only thing that is certain is that, from the beginning, there have been a lot of uncertainties. And some queries that are yet to receive plausible answers. For example, how did the epicenter shift from Wuhan in China to Lombardy in Italy and is now in New York, USA? How come Beijing and Shanghai in the Chinese mainland have registered only about 500 cases, with only a few deaths, whereas the number of cases is rising exponentially elsewhere as also the number of deaths..."

lished its efficacy, and several are under way. In some countries, such as India, doctors are being advised to use their judgement in individual cases based on their experience with the drug (in cases of malaria, rheumatoid arthritis, lupus), because there are known side effects.

There are many concoctions

being advised to boost immunity. Many of these contain ingredients such as lemon juice, ginger, pepper, cloves, turmeric, coconut oil which are already used in preparing food, so nothing new here. Basically one must eat healthily.

What about a vaccine? Dr Paul Young is a virologist who is leading one of the many teams across the world which form part of GVN (Global Viral Network) and are working on development of a vaccine against Covid-19. In an interview by his daughter, a journalist, this is what he says in *Prospect*, an English magazine: 'At the very earliest, I don't see vaccines, even under very accelerated conditions, being available within twelve months. And so, a vaccine may not impact this first wave.

Where it probably will have an impact is in a second wave. All the pandemics we've seen in the past, which includes the Spanish Flu of 1918-19, have seen a second and even third wave of infection. We may ultimately see this virus establishing itself as one of the many respiratory infections we all encounter each winter season' (italics added). Note: we have to be prepared for a second wave.

Meanwhile, locally, we have to brace ourselves up for several weeks of hardship. But this can be mitigated by mutual cooperation and collaboration, and culling the best ideas wherever they come from. Because this is much more than a health crisis:

instead of being negative, let us accept any constructive criticism, not play politics, and work together to ensure that the needs of the people are being met – for food, fuel, prescription medication and human interaction especially for the elderly.

Livelihoods during and post curfew

What about the Small Planters and Sellers?

TP Saran

After the unexpected announcement by the Prime Minister during a press conference on Monday March 23 of the *couvre-feu sanitaire*, there then came the realization by the unprepared population that perhaps there hadn't been any prior thought-through strategy by the authorities about the fallouts of this drastic measure. That may explain why, on a daily basis since then, some new arrangement is being made public.

The latest is the memo issued on behalf of the PMO headlined 'MEMO on Control access to shops with Social Distancing during opening of supermarkets and superettes post curfew COVID 19'.

The message contained is that restrictions on movements are likely to continue even post curfew.

The MEMO addresses the problem of supply of food items to the people – but incompletely. Just like the packages distributed to the 35,000 families on the social register. But what about the rest of the population of about 1.3 million? Does this afterthought of a MEMO apply to all of them? It is a fact that during the week starting on March 16, people had already started panic buying, as evidenced by the crowds and queues at the supermarkets.

But, as the editorial in the last issue (March 27) of this paper pointed out, 'there is **another aspect of equally critical concern**: that the provision of food, especially vegetables, is also a matter of **livelihood for hundreds of small to medium scale vendors who meet the daily needs of those categories of people who do not have the means to do bulk buying at supermarkets**. As no one knows how long this crisis will last and the restrictions maintained, some **serious thinking will have to be done involving the vegetable growers' representatives, and work out how to make sure that our citizens have access to vegetables and fruits, as well as ensuring the livelihoods of those engaged in this sector**'.



Pandemic & food supply at supermarkets. Photo - telegraph.co.uk

The MEMO doesn't address this concern.

The reality is that the supermarkets buy from bulk suppliers, and they have their favourite ones: the small planters are excluded. And licences to the bulk suppliers is



Social distancing at work in India, whilst ensuring regular vegetables supplies

on the basis of personal and political contacts.

There is much sophisticated talk about supply chains and such things meant for drawing rooms. The reality is that both the crisis and the post crisis look set to be prolonged, and both imports and exports are going to be curtailed: all countries will give priority to their own needs. Specifically, we will have no choice but to rely on our own local supplies, and increasingly this will mean vegetables and fruits.

On Tuesday March 24, the police were seen to be chasing small planters who had gone to their fields. This sends a very wrong signal, and the police have clearly not been briefed – and that's not the only instance.

We must not complicate the crisis further.

The people will need vegetables and fruits. Much if not most of it is grown by small planters and farmers. The fundamental issue is: how will people get access to vegetables and fruits while respecting the basic sanitary norm imposed, namely social distancing?

And here the principle is to limit physical contact between people, by not clustering, self-protecting, and keeping a safe distance (minimum: one metre).

On the other hand, it is not known when *la foire* and *bazaar* will be allowed to operate.

So there is a need to reconcile the supply of vegetables and fruits to the people while abiding by sanitary rules about Covid-19.

Is there a solution? Yes, and it is not rocket science.

1. It must start with daily messaging about 'contact at a safe distance' for as long as is required, and use of masks and gloves.

2. The sellers (*marchands*) have their Business Registration RN and a mode of transport.

3. The BRN should be authorized for use as an authorisation for them to source **produce** from their usual planters/growers.

4. Similarly, with the BRN they then go about in their locality and sell to families, with only one member of the

family coming out to collect and pay – and again, both parties keeping the same distance and wearing masks and gloves.

In this manner: planters/growers will continue to produce vegetables and fruits, and **supply** sellers who will then **distribute** them to families who need them.

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Through the production, supply and distribution of vegetables and fruits, an essential need of the people will be met and livelihoods will be preserved, at the same time maintaining a most important – because it is about survival – segment of economic activity.

Another advantage: this method of sourcing and distribution will also meet another important sanitary requirement: avoiding crowds.

It may eventually have to be considered for the other non-perishable food items available at the large and small (round-the-corner) outlets, as well as for bread.

The above proposal is of course amenable to fine tuning, but its implementation has become a matter of national emergency.

If Government does not regulate the flow for the planters, we will be soon facing blackmarket and astronomical pricing for vegetables sold through in black market, and it seems this may be happening already.

Better be safe than sorry – before there is a social calamity.

TP Saran

Spanish Flu & Covid-19

The Economic Crisis of 1929

When the economic crisis broke out in 1929, nobody knew when it would end. We don't know how and when the present crisis will end. We should perhaps think the unthinkable



Sada Reddi

In our last article on the Spanish influenza epidemic of 1919 (MT 20 March 20), we underlined the fact that the calamity occurred at a time when the colony had the financial resources accruing from high sugar prices to face the challenge.

There was no economic crisis during or in the aftermath of the epidemic. It was quite different in several other countries where the influenza epidemic led to the 1921-22 economic recession. However, on 24th October 1929 the American stock market crashed, and in one single day 12,894,650 shares changed hands. A few historians have tried to find a causal link between the epidemic and the 1929 Great Depression but they could conclude that it could only have been a contributory factor. Here, a decade after the epidemic, Mauritius faced a grave economic crisis resulting from the Great Depression, which affected the economy and society at all levels.

Crisis after the Great Depression

After the sugar boom of the 1920s, the prices of sugar began to fall drastically and had a deflationary impact on the economy. The average price of sugar fell by 20% annually between 1924 and 1929 and by 27% in 1930. The island's revenue declined from about Rs 40 million in 1920-1921 to about Rs 14 million in 1929-1930. All governments of the time made an already bad situation worse by pursuing a policy of retrenchment.

"The extremely difficult conditions in which the labourers lived explains why in 1937 when the economic situation improved, the labourers and small planters and other staff of the industry felt that they deserved an increase in their wages for the sacrifices they had endured. When these were refused by a few estates, and even worse when a few sugar mills cut the prices of the Uba canes, the small planters organized a protest march to Port-Louis to present their grievances to the Protector of Immigrants. The labourers in turn made a similar demand for an increase in their wages but the employers refused to give them their due..."

All European economies faced similar problems because they implemented orthodox fiscal policies advocating that expenses should not exceed income. According to Keynes, fiscal policy during a depression calls for government expenditure to exceed tax revenue with a view to boosting aggregate demand. He criticized the British government for its orthodox policies. Unfortunately that same policy was adopted in Mauritius.



"The difficult years of the Great Depression were followed by the outbreak of the Second World War in 1939 and lasted up to 1945. The War plunged the country in a serious food crisis that debilitated the labouring classes for another 7 years. From 1925 when sugar prices started to fall to the end of the War, the labouring classes had suffered for two decades. When the economic crisis broke out in 1929, nobody knew when it would end. We don't know how and when the present crisis will end..."

Response

In response to the crisis, the colonial government cut its budget allocations, closed schools and laid off many government employees. Private companies cut costs by reducing their labour force. Unemployment was on the rise. The sugar estates resorted to the same policy of cutting wages, dismissing workers and employing more women and children at lower wages. In 1927, the daily wage of a male labourer was Rs 1.25; in 1929 it dropped to Rs 1.00, and in 1930 to 50-75 cents. A woman labourer obtained 30-45 cents daily and a boy received 25-30

cents. (Anjalay of Belle Vue Harel was paid 25 cts a day for carrying manure in the 1940s.)

There were several reductions in wages such that the daily wage of a male labourer dropped to 45 cents in 1932, and did not improve until 1935/36. The monthly wage of an estate labourer amounted to Rs 10.50; with food allowance it came to Rs 25. In the 1930s, the wages remained

around Rs 10 mostly for that period, but with a fall in the prices of food, wages and food came down to Rs 17. These are official figures but, in reality, labourers' actual earnings were much less.

Between 1935-1936, four sugar factories closed down; in towns, lack of money for construction and reduction in maintenance work affected both the agricultural and industrial classes. This is reflected in government statistics. Between 1921-1931, agricultural labour declined by 3000 while the industrial class declined by 10,000. Employers recruited more women as agricultural workers. The number of women agricultural labourers increased from 9678 in 1921 to 15,105 in 1931.

Impact on labourers

As conditions worsened, labourers resorted to protests. In 1934 and 1935, workers marched to Parc à Boulets clamouring for jobs. In 1935 the Spinning and Weaving Mill dismissed workers who thereafter assembled at Government House to stage a protest. In July, 100 men were dismissed from the Public Works Department and they assembled at the Company Garden to protest. On the 7th June 1935, 200 unemployed Indians marched about 30 miles from the south of the island to see the Governor in the capital. One paper reported that these peaceful marches were becoming frequent and could turn into a catastrophe.

Unemployment and underemployment were on the increase. The colonial government opened an Unemployment Bureau

but all it achieved was a census of the unemployed and it was closed soon after. Malnutrition was rampant and productivity was low. There was reduction in the consumption of rice which suggests that workers were underfeeding themselves. Dr Millien calculated that the population registered a deficit in carbohydrate by 18%, protein by 35% and fat by 59%.

Deterioration in health of population

The health of the population deteriorated and there was an increase in hookworm and malaria. In 1930, whooping cough swept over the island for 3 months causing a large number of deaths among children. In 1932, 30,000 patients were treated for hookworm. In 1931 and 1932, there was an increase in death rate and low birth rate. Though the reasons 'were obscure but it is believed to have been due to depressed economic conditions aggravated by a severe cyclone in 1931'. The total deaths from malaria increased from 2310 in 1929 to 3984 in 1931. In 1937, the Mauritian intellectual non-workers, artisans and members of the general population lamented 'the terrible miseries from which we have been enduring for the last decade, which situation is daily worsening without any serious attempt made by the responsible authorities to alleviate the hardship, poverty and destitution'.

Financial support to sugar sector

Although in those days, there was no stimulus package *per se*, on numerous occasions the colonial government provided financial support to the sugar industry to weather the storm. The financial measures were many: repayments of several loans were remitted in full. There was a reduction in export duties, a grant-in-aid from the Mauritius Improvement and Development Fund to the extent of one pound per ton of sugar produced, to be repaid over a period of 30 years. Customs export duties were reduced. The Watts Commission found that Mauritius was incurring losses when sugar was below per Rs 8.98 cwt F.O.B, and recommended a higher price for Mauritian sugar, which was considered over-generous by Malcolm de Chazal who denounced several flaws in the report of the commission of inquiry. In fact the recommended price was not based on any real examination of the figures in Mauritius. Francis Watt, who was a sugar estate owner in the West Indies, had written to the West Indian Commission and recommended the same figure for Mauritius.

Financial support to the industry was extended to all the sugar estates whether they were making a profit or loss. Later the Hooper Commission of Inquiry found that of the 31-35 factories which filled a survey questionnaire, except for 1931 and 1934 when 23-28 factories reported a loss, 29 mills out of 34 reported a profit for the remaining years. All the financial assistance went to the sugar estates; neither the workers nor the small planters benefited from that assistance extended by the British government.

5 reasons the coronavirus hit Italy so hard

The coronavirus found dangerously fertile ground in elements of the country's demographics, business, geography and culture

Italy is one of the nations worst hit by the global coronavirus pandemic. As a scholar in the field of security and emergency management who has studied and worked in Italy, I have determined that there are at least five major reasons why the country is suffering so much.

1. Lots of old people

Italians have the sixth-longest life expectancy in the world – 84 years old. That means lots of Italians are elderly: In 2018, 22.6% of its population was 65 or over, among the highest proportions in Europe.

Medical researchers have said the coronavirus poses a more serious threat to older people than to younger ones. Older people are more likely to contract the COVID-19 disease and, mostly, to have a more severe case of it. That can also increase the demand for hospitals' intensive-care units.

Many older Italians may have been also exposed to the virus in the workplace; in 2019 the average Italian retirement age was expected to be 67, at least two years later than average retirees in other Western developed nations.

2. Close proximity

Italians aren't used to social distancing. They are very physically affectionate people: Hugs and cheek-kisses are common not just among family members but also friends and even work colleagues.

Even when they're just chatting, Italians are closer together than many other people, because their culture's psychological perception of personal space is smaller than in other countries. Large social gatherings, formerly common in public areas, were banned



Even when they're just chatting, Italians are closer together than many other people, because their culture's psychological perception of personal space is smaller than in other countries. - Photo - italmagazine.com

by Italian Prime Minister Giuseppe Conte at the beginning of March 2020.

3. Dense population

There isn't a lot of space in Italy for people to spread out in. Italy is a densely populated country, with an average density of 533 people per square mile. In comparison, Germany has a population density of 235 people per square mile while the US has 94.

Two-thirds of Italians live in urban areas that are even more dense. Rome has 5,800 people per square mile, and Milan packs more than 19,000 people into every square mile. That's almost twice the density of Berlin and Washington, D.C.

4. Northern Italy is a business hub

Milan, in northern Italy, is the country's financial capital, and has close trade and educational connections with China. The whole region of northern Italy is home to offices for many multinational corporations. Workers

travel from all over the world to attend meetings and conventions in northern Italy. An infected person not only could infect others, but those people could rapidly spread out across the entire country.

5. Massive number of cases

With far fewer people, Italy's infection rate is much higher than China's. No other country has a truly comparable set of circumstances.

A key factor in emergency management is learning lessons from others in similar circumstances – but there is no one for Italy to learn from at this stage of the crisis. Chinese experts have travelled to Italy to help – but many of the lessons they are bringing only became clear after Italy's outbreak began, so the Italians are behind where other countries, with more recent outbreaks, may be.

The Italian government has progressively worked to contain the disease, including declaring a total national lockdown on March 10. More than two weeks later, the country may finally be seeing a decline in the number of new cases.

Italy has struggled – and is continuing to fight – against an unprecedented crisis that found dangerously fertile ground in elements of the country's demographics, business, geography and culture.

But its people haven't lost their social habits – just adapted them, and created perhaps a temporary new national motto: "Distanti ma uniti." Distant, but united.

Sara Belligoni
University of Central Florida



Milan's Fashion Week drew models, designers and other fashion professionals from around the world, even in late February 2020. - AP Photo/Antonio Calanni

Spanish Flu & Covid-19

The Economic Crisis of 1929

• Cont. from page 5

Protest marches by labourers

The extremely difficult conditions in which the labourers lived explains why in 1937 when the economic situation improved, the labourers and small planters and other staff of the industry felt that they deserved an increase in their wages for the sacrifices they had endured. When these were refused by a few estates, and even worse when a few sugar mills cut the prices of the Uba canes, the small planters organized a protest march to Port-Louis to present their grievances to the Protector of Immigrants. The labourers in turn made a similar demand for an increase in their wages but the employers refused to give them their due. They



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organized a march on Union sugar factory which resulted in the shooting of labourers. One month of labour unrest engulfed the whole island in 1937.

Present crisis – prepare for long haul too

After 1937 the workers had thought that their situation would improve but that was not to happen. The difficult years of the Great Depression were followed by the outbreak of the Second World War in 1939 and lasted up to 1945. The War plunged the country in a serious food crisis that debilitated the labouring classes for another 7 years. From 1925 when sugar prices started to fall to the end of the War, the labouring classes had suffered for two decades. When the economic crisis broke out in 1929, nobody knew when it would end. We don't know how and when the present crisis will end. We should perhaps think the unthinkable and brace for the short-term but also for the long haul.

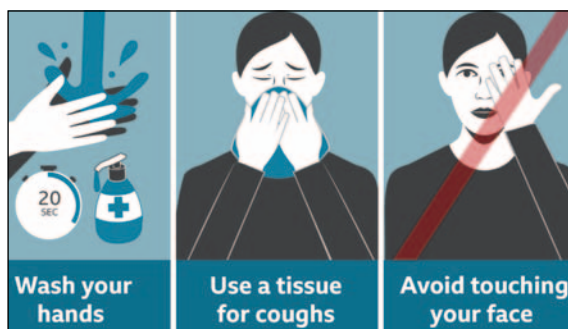
Sada Reddi

How can I treat myself if I've got – or think I've got – coronavirus?

You may have a confirmed diagnosis of COVID-19, or just suspect you have it. Either way, if you have mild to moderate symptoms, treat them as you would with any other cold or flu

New cases of the coronavirus are reported every day, and as yet there's no vaccine. So what treatments are available if you're one of the unlucky ones who gets infected?

If your symptoms are mild, you



should treat them the same way you would a cold or flu.

A spectrum of severity

SARS-CoV-2, the virus that causes COVID-19, is one of hundreds of viruses that cause colds and flu symptoms in humans.

The infection ranges in severity from almost silent (asymptomatic), to a mild cold, all the way to lung and organ failure. The symptoms may be worse than a normal cold or flu because this coronavirus is new (or "novel") to our species and we haven't built up herd immunity to it yet.

But current estimates suggest about 80% of cases will have relatively mild to moderate illness.

If you're one of these, you might not know for sure whether you have COVID-19, as you may not be eligible for testing. It's important you self-isolate if you're unwell regardless.

But from the perspective of treatment, if your illness is reasonably mild, it doesn't really matter whether you have a confirmed COVID-19 diagnosis or not.

So how do I treat the symptoms?

The World Health Organisation (WHO) says the most common symptoms of COVID-19 are fever, tiredness, and dry cough. Some patients may have aches and pains, nasal congestion, runny nose, a sore throat or diarrhoea.

The most bothersome symptoms tend to be fever and muscle pains. You can safely treat these with paracetamol.

The WHO initially recommended people with COVID-19 avoid taking ibuprofen to relieve symptoms. But it retracted that advice days later, so it seems reasonable to also consider using anti-inflammatory drugs.

You can treat nasal congestion with decongestants and nasal saline. Effective treatments for a sore throat include honey, salt water gargles, and sore throat sprays or gargles.

Cough is a more difficult symptom to control, but you may be able to improve it with honey, steam inhalations and saline nose sprays. Cough suppressants have only minimal benefit in reducing a dry cough.

It's also important to support your immune system, particularly with rest and a healthy diet.

There's some evidence zinc lozenges may shorten the duration of some colds and flus, including COVID-19. But this evidence is conflicting and not of high quality.

Meanwhile, there's no convincing evidence beyond the placebo effect for a range of other common treatments, such as vitamin C and echinacea. But these are unlikely to cause harm.

Don't try this at home

It's important not to take medicines that haven't been approved for the treatment of colds and flus.

Anecdotal reports and a small case series of patients in China have suggested a role for the antimalarial drug chloroquine in treating COVID-19.

Further clinical trials of this drug are currently underway, but at this stage it's recommended as treatment only in COVID-19 cases complicated by viral or bacterial pneumonia, and under the guidance of medical professionals.

One HIV antiviral combination drug, lopinavir-ritonavir, seemed promising. But it failed to make a significant difference in 199 patients with COVID-19 in China.

So there are no effective curative treatments as yet, but clinical

trials of different antiviral agents are continuing.

While lots of information about prevention and treatments for coronavirus is circulating online, a good rule of thumb is if it sounds too good to be true, it probably is.

If you're unsure about anything, look to reliable sources like the Australian government or the WHO, or consult a doctor.

What about people with more serious illness?

About five to seven days after the onset of symptoms, some patients develop shortness of breath and trouble breathing, which will require medical attention.

Shortness of breath occurs when pneumonia develops, causing a buildup of thick mucus in the lungs that blocks the transfer of oxygen into the blood vessels.

If your condition deteriorates, call ahead to a doctor or hospital and inform them of your COVID-19 status. If you're experiencing severe symptoms, such as shortness of breath, call an ambulance.

If your symptoms are more severe, you might need treatment in hospital. Shutterstock

How long before I'm not infectious anymore?

If you're hospitalised with COVID-19, you will remain in isolation until you're no longer experiencing symptoms and a test confirms you're no longer infectious.

In a group of hospitalised patients in China, the average duration of virus still detected in the respiratory tract was 20 days.

Mild cases, however, have a shorter duration of illness, and the virus clears more quickly from their bodies.

Australian guidelines state that cases with a mild illness not requiring hospitalisation can end their self-isolation if they meet these two criteria:

- at least ten days have passed since the onset of symptoms
- all symptoms of acute illness have been resolved for the previous 72 hours.

David King

The University of Queensland

Don't believe everything you read on social media

What is orthohantavirus? The virus many are Googling (but you really don't need to worry about)

According to Google Trends, the top globally trending topic this week is 'orthohantavirus', as spurious sites claim it's next pandemic on the horizon. The claim is baseless. According to Google Trends, the top globally trending topic this week is "orthohantavirus", as spurious sites claim it's the next pandemic on the horizon.

Take it from me: it's not.

This baseless claim circulating online underscores the need to get health information from reputable sources – and that you shouldn't believe everything you read on social media.

What is orthohantavirus?

"Orthohantavirus" – commonly known as hantavirus – is a very, very rare virus. There have never

spread to that person, but this type of transmission is rare;

- scientists believe that people may be able to get the virus if they touch something that has been contaminated with rodent urine, droppings, or saliva, and then touch their nose or mouth;
- scientists also suspect people can become sick if they eat food contaminated by urine, droppings, or saliva from an infected rodent.

How worried should I be about hantavirus?

Not very. In general, infectious disease specialists do worry about zoonoses – the coronavirus that causes COVID-19 and Ebola are both important recent examples of animal-associated diseases that have crossed the species barrier.

Hantavirus, however, is not thought to be a big threat at the moment.

There's certainly no chatter among infectious disease physicians about hantavirus right now. I'm not seeing anything concerning about it on any of my researcher net-

works and mailing lists that warn about virus outbreaks.

There was a recent report of a single case in China but there's no indication of any sort of spread.

I think, for now, let's concentrate on the pandemic we have – which is coronavirus and also the annual influenza season – rather than worry about uncommon viruses.

However, this coronavirus outbreak and everything that's come before reinforces that we need early warning systems to work out what's out there that could be threatening.

Yes, it is true that animals carry a lot of viruses but very few come across to humans.

Hantavirus is certainly not one we are particularly concerned about right now.

Allen Cheng

Monash University



Don't believe everything you read on social media. - Photo Shutterstock

been confirmed human cases in Australia. The last two reported confirmed cases worldwide were in January in Bolivia and Argentina.

It is in a class of diseases called zoonoses, meaning it is a virus transmitted from animals to human. In this case, the animal in question is rodents (usually rats). Hantaviruses can cause severe disease, including bleeding and kidney failure.

How does hantavirus spread?

According to the US Centres for Disease Control and Prevention (CDC), hantavirus is spread from several species of rodents in their urine, droppings, and saliva. It is thought that transmission occurs when they breathe in air contaminated with the virus.

CDC also reports:

- if a rodent with the virus bites someone, the virus may be

How to guard your mental health during the Covid-19 outbreak

These are challenging times for our mental and emotional well-being. The stress and uncertainty of the Covid-19 outbreak have been difficult enough, and now the social distancing requirements have led to profound changes in our daily routines.

So many of the routines and activities we took for granted have suddenly fallen away: commuting to work, going to class, hanging out with friends, shopping in stores, going to the gym. Now that our lives have been stripped down, we need to be very intentional about protecting our mental health. Here are five key practices to guard your heart and mind during this crisis.

* Be good to your body

Mental health starts with physical wellness. A growing body of research supports our intuitive understanding that the mind and the body are intimately connected. The following areas are especially important:

- **Make sleep a sacred priority.** Give yourself enough time in bed to get the rest you need (typically seven to nine hours). Stick to a consistent sleep schedule as much as possible, resisting the tendency to let your schedule fall apart if you don't have daily commitments. Build in a technology-free winding down routine for 30 to 60 minutes before bedtime.
- **Move every day.** Now that gyms are closed and our activities are so limited, it's easy to become inactive and not realize that you're barely moving throughout the day. Find a way to move. Go for walks every day if you're still allowed to where you live. Look into online exercise or yoga videos. Consistent physical activity is well known to lower stress and anxiety and improve mood, not to mention strengthening your immune system.
- **Feed your body and mind.** Speaking of your immune system, choose healthy food options like vegetables and fruits, and avoid highly processed foods and refined sugar. Limit your alcohol consumption, and beware of too much caffeine, which can aggravate stress and anxiety.

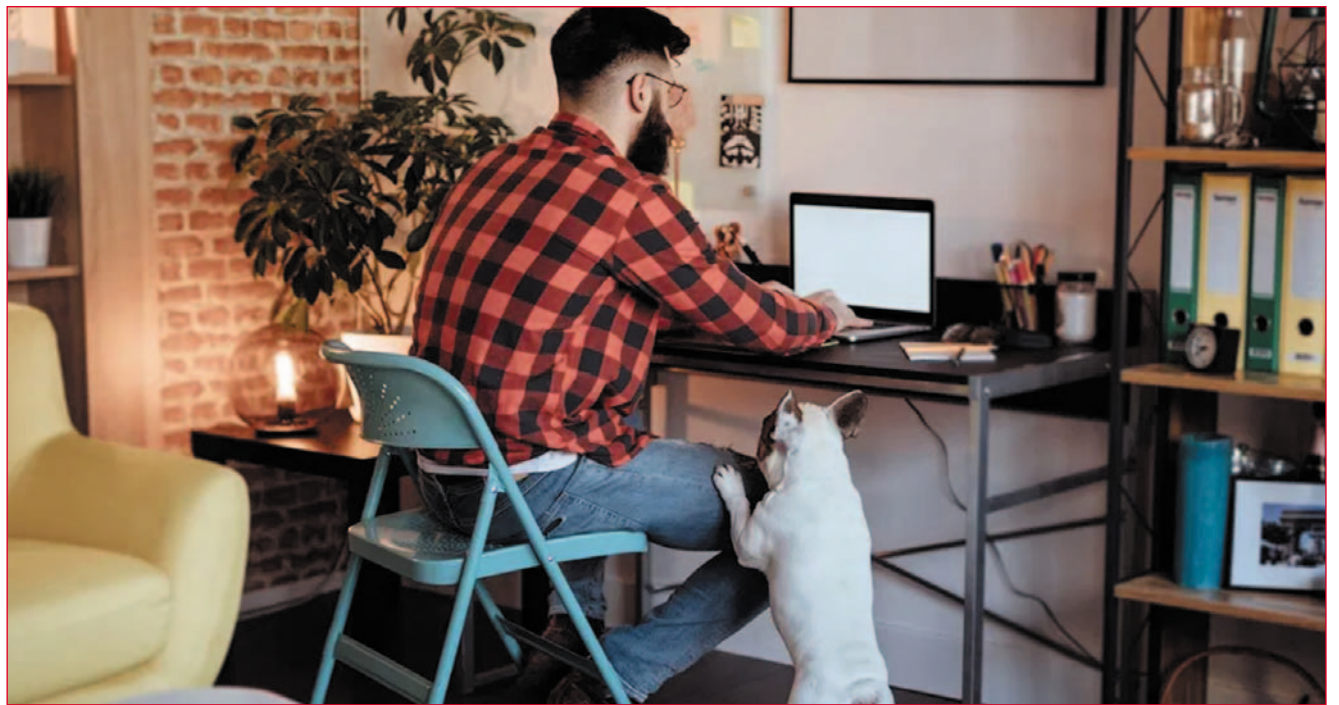
* Follow a schedule

Your body and brain operate on a 24-hour (circadian) cycle, and need specific activities to happen at predictable times. There's a perfect German word for activities that provide timed structure to our days -- *Zeitgeber*; the direct translation is "time giver." Establishing a consistent routine is one of the friendliest things you can do for yourself during this period of social distancing. Incorporate as many of the following *Zeitgebers* as you can:

- **Sunlight:** Spend time in the sunshine in the early part of the day. Exposure to natural light is probably the most powerful way to establish a healthy circadian rhythm. If your area is discouraging nonessential time outdoors, at least sit by a window in the morning.
- **Sleep:** Go to bed and get up at about the same time every day.
- **Meals:** Eat breakfast, lunch, and dinner at consistent times.
- **Exertion:** Plan a consistent time for exercise (e.g., first thing in the morning; after work).
- **Bathing:** It can be surprisingly easy to fall off the shower wagon when you don't have to leave the house for an extended length of time. If you have kids at home, ensure that they bathe regularly, too. The routine is good for them, and being stuck at home together is a lot nicer when everyone smells fresh.
- **Work:** Follow a predictable work schedule, even when working from home. Put it in your calendar to make it feel more official.

* Be kind to your mind

Your thoughts can be a powerful ally or a formidable foe, now more than ever. Practise training your mind in



helpful directions that support your well-being:

- **See the story.** Recognize that your mind is constantly making predictions, which are just *guesses* about the future. Right now, it may be telling you stories like: You're going to get horribly sick. Or, you'll be ruined financially, etc.
You don't have to believe everything your thoughts tell you. Know that they're fantasies that may or may not come true -- and that other outcomes may be more likely.
- **Direct your attention.** We can't completely control the thoughts that go through our heads, but we can decide where to focus our attention. For example, we can choose to focus on the worries of the day, or on being the person we want to bring to these challenges we're facing. We can dwell on our struggles, or on opportunities to love each other through this time.
- **Practise gratitude.** If it's hard to think of things to be grateful for, just imagine how things could be worse -- because as hard as this time it, it could be much, much worse. Even our current difficulties can point to something good -- for example, being stuck inside with your kids underscores that you have a family (even if the noise is a bit much at times).

* Find Moments of Stillness

Stress and tension collect in the body and mind throughout the day. Set aside time religiously to release this nervous energy. Step out of the modes of *doing* and *producing* and checking the news, and into a state of *being*. The following principles and practices can help.

- **Release tension.** Notice where stress lodges in your body, and find ways to let go of the tension. For example, try this quick exercise: Sit comfortably and take three slow, relaxing breaths. Shrug your shoulders up toward your ears, feeling the tension that creates, and then let your shoulders completely relax. Repeat the shrug/release cycle twice more. End with three more slow breaths, and notice how you feel.
- **Breathe.** Close your eyes and take a slow, smooth breath in through the nose for a count of 4, feeling the belly rise and expand. Exhale slowly out the mouth for a count of 8. Pause briefly before starting the next inhale. Repeat for 1-3 minutes.
- **Unplug.** Being constantly connected to screens takes a toll on your nervous system, but it can be hard to avoid when so much of your work and home life exists online. Establish some tech-free zones; good candidates include mealtime, the bathroom (I know), the bedroom, and during quality time with those you

care about.

- **Be in nature.** All kinds of good things can happen when you simply step outside. Your stress level tends to go down, your perspective widens, and your mood generally lifts. You don't have to go for an hour-long hike; just a 5-minute walk around your house can make a big difference. If your time outside is restricted, savour brief essential trips outdoors -- for example, while walking from the car to the grocery store. Look around, feel the air, breathe.

* Share Love

Finally, and perhaps most importantly, exercise your truest nature as a being of love. It's easy to neglect our relationships or to frankly find them irritating, especially with the people closest to us that we see every day. But nothing is more important for your well-being than these relationships. Invest time and energy in the people who will be with you no matter what.

- **Be with people you enjoy.** "Being with" might be virtual for now, through texts, emails, and Skype, etc. One way or another, find time each day to focus on the people who matter most to you, whether friends, parents, partners, children, siblings, or canine/feline "family." Prioritize time with those you find to be life-giving.
- **Forgive.** Look for opportunities every day to let go of others' shortcomings. There may be many such opportunities if you're living in close quarters with others! Be quick to forgive an accidental slight, for example, and make the first move to smooth over a potential rift with someone you care about. These gestures make huge deposits in the bank account of your relationships.
- **Serve.** Find a way to be of service every day. Serving is especially important during difficult times like these, because it draws you out of a world-shrinking preoccupation with your own struggles. Liberate yourself from narrow self-focus by asking yourself what those around you need. Few things are more rewarding than doing something to improve someone's life.

We don't know exactly how long this social distancing directive - or the virus, itself - will last, so it's wise to go ahead and start putting emotional wellness practices in place now, on the front end of this journey. You can begin by choosing just one to focus on, and then adding others in the following days.

Seth J. Gillihan, Clinical Psychologist, WebMD

Vinegar won't kill COVID-19 in your home. Here's what will



* **SARS-CoV-2 has been shown to survive on some surfaces for up to 16 hours, making it important to regularly disinfect your home.**

* **Products containing bleach, alcohol or hydrogen peroxide are the best at killing off germs.**

Consider these expert tips for cleaning your home to kill the new coronavirus that causes COVID-19 (and the pathogens behind other deadly diseases).

"Not many scientific studies have asked which are the most effective disinfecting agents to use against SARS-CoV-2, the virus that causes COVID-19, because it was discovered so recently," says Siobain Duffy, associate professor of ecology at Rutgers University with expertise in emerging viruses and microbial evolution. "So scientists are assuming that what works against other coronaviruses can work against this one."

"Each disinfecting chemical has its own specific instructions. But an important general rule is that **you shouldn't immediately wipe a cleaning solution off as soon as you've applied it to a surface. Let it sit there long enough to kill viruses first,**" says Donald Schaffner, professor and extension specialist in food science with expertise in microbial risk assessment and handwashing.

How to clean to kill off coronavirus

The US Centers for Disease Control and Prevention recommends daily disinfection for frequently touched surfaces such as tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.

The CDC also recommends the use of detergent or soap and water on dirty surfaces prior to disinfection.

If someone in your home is sick with flu-like symptoms, consider regularly disinfecting objects in your home, since SARS-CoV-2 has been shown to survive for 16 hours on plastics.

Whatever cleaning solution you use, let it remain in contact with the surface long enough to kill viruses and other pathogens. The time needed will depend on the chemical.

Don't use different cleaning agents at the same time. Some household chemicals, if mixed, can create dangerous and poisonous gases.

How do I clean with bleach?

Bleach (*Eau de Javel*) can be diluted with cold water to make an effective disinfectant against bacteria, fungi, and many viruses including

coronaviruses. You can typically use one-quarter cup of bleach per 1 gallon of cold water-but be sure to follow the directions on the label of your bleach.

Make dilute bleach solution as needed and use it within 24 hours, as its disinfecting ability fades with time.

Non-porous items like plastic toys can be immersed in bleach for 30 seconds. Household surfaces that won't be damaged by bleach should get 10 or more minutes of exposure.

Bleach solutions are very hard on the skin, and should not be used as a substitute for hand-washing and/or hand sanitizer.

What about alcohol?

Alcohol in many forms, including rubbing alcohol, can be effective for killing many pathogens.

You can dilute alcohol with water (or aloe vera to make hand sanitizer) but be sure to keep an alcohol concentration of around 70% to kill coronaviruses. Many hand sanitizers have a concentration of about 60% alcohol, and Lysol contains about 80%; these are all effective against coronaviruses.

Solutions of 70% alcohol should be left on surfaces for 30 seconds (including cellphones-but check the advice of the phone manufacturer to make sure you don't void the warranty) to ensure they will kill viruses. Pure (100%) alcohol evaporates too quickly for this purpose.

Containers of 70% alcohol should be sealed to prevent evaporation. But unlike bleach solutions, they will remain potent as long as they are sealed between uses.

A 70% alcohol solution with water will be very harsh on your hands and should not be used as a substitute for handwashing and/or hand sanitizer.

Can I use hydrogen peroxide?

Hydrogen peroxide is typically sold in concentrations of about 3%. It can be used as is, or diluted to 0.5% concentration for effective use against coronaviruses on surfaces. It should be left on surfaces for one minute before wiping.

Will vinegar kill off coronavirus?

Vinegar, tea tree oil, and other natural products are not recommended for fighting coronaviruses.

A study on influenza virus found that cleaning with a 10% solution of malt vinegar was effective, but few other studies have found vinegar to be able to kill a significant fraction of viruses or other microbes.

While tea tree oil may help control the virus that causes cold sores, there is no evidence that it can kill coronaviruses.

World Economic Forum

In a Light Vein

A woman invented this Coronavirus

I am beginning to suspect a woman invented this Corona virus because:

1. Mostly men die.
2. Football matches cancelled.
3. Sports events cancelled.
4. Bars & pubs closed.
5. No socializing in public
6. You have to stay at home with your wife for 24/7!!!

These 7 things from Sholay are a must-do to defeat Corona



1. Jo Darr Gaya Samjho Marr Gaya

Do not panic. Do not be afraid. These are testing times. Face the pandemic bravely. Every cough is not Corona. Do not die of a heart attack even before Corona gets you.

2. Kitne Aadmi The?

Always be aware of how many people are going to be at a certain place. Do not go to crowded places. Do not gather as if you will miss watching something if you

do not go out. You will miss nothing. Remember this is CORONA, not KAREENA.

3. Itna Sannata Kyun Hai Bhai?

Do not ask this unless you are living under a rock or are a left-liberal. You should support Janta Curfew & should be ready for more of these sannatas in the coming days.

4. Kya Samajhkar Aaye The... Sardar Khush Hoga... Sabashi Dega!

Do not think your going to the office at this time would be applauded (unless of course you work at a hospital). Your boss would not be happy if he comes to know that you have gone to the office especially when you have been told to Work-From-Home. You suck at following orders. SIT AT HOME.

5. Basanti, Inn Kutto Ke Samne Mat Nachna

Do not go out dancing. Do not even throw dance parties at home. If you must dance... dance alone...but never with or in front of anyone.

6. Yeh Ramgarh Wale Apni Betiyon Ko Kaunsi Chakki Ka Aata Khilate Hain Re?

It is very important to know which chakki's & grocery stores are open in the neighborhood during a lockdown. Do not hoard things but do know where all things will be available when you need them.

7. Ab Tera Kya Hoga Kaliya!

And if you are still unlucky after all this & get the virus you can only wonder. There's no antidote. If you reach this stage stop following SHOLAY & move on to KAL HO NA HO.

Be Indoors. Be Safe.

Kindly don't forward clips which have content of police hitting people walking on the road.

After seeing those clips, some wives are sending their husband to the market again and again!

We asked one question to a group of people.

"Whom would you love to see first, after 21 days of lockdown?"

80% of wives said: "Maid."

100% of husbands also said the same.

Akshay Kumar takes Twinkle Khanna to the hospital amidst the coronavirus scare

Akshay Kumar took his wife Twinkle Khanna to the hospital and Twinkle Khanna cleared that it wasn't for Coronavirus



The coronavirus outbreak in the country has been a major concern. The deadly virus has been spreading like a wildfire in the whole world and even in India, the cases have grown. The Government has asked people to stay indoors and schools, colleges, offices, malls, theatres, gyms have been shut down. The shoots of films, television shows have all been stopped. PM Narendra Modi has now announced a 21-day lockdown in the country. Amidst all this, Akshay Kumar was seen taking his wife Twinkle Khanna to the hospital. Twinkle Khanna had shared the video of their drive from the hospital. No, this is not because Twinkle Khanna has Coronavirus. Apparently, Twinkle Khanna has been injured and had a broken leg.

In a video, we have seen Akshay is seen driving his wife back from the hospital with his mask on. Twinkle filmed the scene from inside the car and shared a glimpse of the deserted streets of Mumbai. Twinkle Khanna said, "It is 10:31 am on a Sunday morning and the roads are deserted, except for pigeons and crows - these wonderful gifts for us. Here's my driver all the way from Chandni Chowk. We are on our way back from the hospital. Nope! I don't have the coronavirus. People go to the hospital for many things, including, like me, for being unusually clumsy. So, this Sunday, my husband's pocket is lighter, our hearts have never been more full and and my foot is bloody broken. A happy Sunday to you as well." Along with the video, Twinkle Khanna wrote, "Deserted roads all the way back from the hospital."

Akshay Kumar recently donated Rs. 250 million to PM Narendra Modi's CARES fund.

Disha Patani is surely one of the hottest and desirable actresses of Bollywood. The diva has the perfect figure, sharp looks and dancing skills that could put the best dancers to shame. Well, not just that, her last release Malang was super successful at the box-office and that has made her value as a star in the industry go up for sure. Disha will next be seen in Radhe: Your Most Wanted Bhai alongside Salman Khan. The film is directed by Prabhudeva and will also have Disha showing off her moves in the remake of the hit Telugu song Seeti Maar. The actress is pumped up for the release of this Salman starrer, however, recently when she was questioned about what next? She had quite a defined answer ready. She said, "I grew up on super-hero and action films, especially Jackie Chan's. I want to do an out-and-out action fest."

When asked about being content with where she is currently in her professional space, she said, "I have a long way to go to leave a mark. I am working hard everyday and hoping that someday, people will accept me in a different way." All the best to you Disha!

"I want to do an out-and-out action film"
- Disha Patani



Yami Gautam reveals why she's not chasing the perfect body

In the past few years, Bollywood stars have used social media to encourage people to follow a healthy lifestyle. Actresses, in particular, are urging people to focus more on fitness instead of craving for the size zero body. However, Yami Gautam revealed that she's following this mantra of fitness for quite a while now.

During an interview with a leading daily, Yami revealed that she foolishly cut down on carbs and other essentials for her body in her bid to pursue the perfect figure. She revealed that an intense workout schedule and work commitments barely left her anytime to rest which caused severe problems. However, she now seems to be done chasing a body that society considers to be ideal and has adopted a more calming way to make herself stay healthy and fit. The actress revealed her workout routine lasts for 45 minutes and is a combination of Ashtanga and Hatha yoga, along with Surya namaskars.

On the work front, Yami Gautam was previously seen in Ayushmann Khurrana and Bhumi Pednekar starrer *Bala*.



Janhvi Kapoor reveals what's changed after her debut film *Dhadak*

Even though Janhvi Kapoor is just one film old in Bollywood, she has some exciting times ahead with 4 big projects in the pipeline. Janhvi managed to impress many with her performance in her debut film *Dhadak*, which was an official remake of the hit Marathi film *Sairat*.



While the film had a good run at the box-office, Janhvi recently shared her thoughts about her performance in the love saga during an interview with a leading daily. The young actress revealed that she lacked confidence in front of the camera and was too stiff in certain portions of the film. However, she also spoke about how she ensured to play her part with honesty and sensitivity. Since she's worked on quite a few films post *Dhadak*, she also stated that she lacked technical understanding at the time.

Janhvi Kapoor has films like Gunjan Saxena: *The Kargil Girl*, *Dostana 2*, *Roohi Afzana*, and *Takht* in her kitty. However, with the coronavirus pandemic taking over, we might have to wait a bit longer than the original release dates of these films.

Ram Kapoor gives a peek into how his dog is trying to sunbathe during quarantine



Just like others, Ram Kapoor and his family are staying at home due to lockdown in the country. The actor took to his social media to share how even his dog is tired of the quarantine and looks for places in the house to sunbathe.

In the video, the 'Bade Acche Lagte Hain' actor said, "Even my dog is sick of isolation and is trying to find his one little piece in the sun. It's too funny." He teases his dog for sunbathing, following him around.

Ram captioned his video as, "My dog trying to sunbathe while being indoors. #stayhome #staysafe."

Due to the Covid-19 scare, most of the television

celebs are confined to their households. While some are keeping themselves busy with cooking, others are indulging in reading and other creative activities.

Recently, Divyanka Tripathi shared that she has got time off work to indulge in her hobbies. She said, "Due to hectic shooting schedules in recent years, it was difficult to take out time for hobbies, one being reading. However, with the current scenario, I am catching up on reading."

Meanwhile television actor Karanvir Bohra is doing his bit at home. He feels that all the men should help their mothers, wives and sisters in the kitchen as well as with other necessary cleanliness routines at home since even the housemaids are off duty now.

COVID-19: Divyanka Tripathi rekindles love for reading

With the COVID-19 pandemic creating a lockdown situation in the country, actress Divyanka Tripathi Dahiya has found a perfect way to spend her days of isolation -- by pursuing her passion for reading.

She has a collection of over 400 books comprising fiction as well as non-fiction at home, and she is making most of her free time during the lockdown to catch up on reading. "I do have a huge collection at home. Few of the books have been gifted by fans and the rest were brought by me as I have a fascination with owning all kinds of books," Divyanka said.

"Due to hectic shooting schedules in recent years, it was difficult to take out time for hobbies, one being reading. However, with the current scenario, I am catching up on reading. It's been almost 4-5 years since I had the leisure to just lie down and read a good book and hence I am digging into my library and pulling out all the unread books off the shelf, ingest them and digest them and it feels marvelous as books have a way of transporting you to a different world from the reality we are currently living in," she added.

Divyanka is known for playing the lead role in the long-running TV show "Yeh Hai Mohabbatein". The actress has also featured in shows such as "Banoo Main Teri Dulhann" and "Adaalat". Apart from the fiction space, she has also participated in reality shows. Divyanka and her husband Vivek Dahiya had also won the "Nach Baliye" show.



One year on, Radhika Madan fondly looks back at 'Mard Ko Dard Nahi Hota'



The action comedy "Mard Ko Dard Nahi Hota" was released a year ago on this day. Although the film failed to create much of a ripple at the box-office, it has been accepted as a cult flick by the niche audience.

Radhika Madan, who has been impressing Bollywood buffs with her recent outing "Angrezi Medium", was the heroine of "Mard Ko Dard Nahi Hota". She was paired opposite debutant actor Abhimanyu Dassani, son of "Maine Pyar Kiya" heroine Bhagyashree.

A year down the line, Radhika got nostalgic recalling the Vasan Bala-directed film. "I feel extremely happy today as 'Mard Ko Dard Nahi Hota' completes a year. This film is always special for me because it helped me push my boundaries and perform action sequences that I couldn't have imagined. There are so many fond memories. This was the film that really changed my foundation. I had grown up watching films where hair and sarees flew, but Vasan Sir made me understand that in the end it is just going to be my craft that will sustain. After 'Mard Ko Dard Nahi Hota', I have started looking on to projects with a different outlook," she said.

Rubina Dilaik and Hina Khan are in RACE for...

Hairstyles can make or break your daily look.

And with regards to hairstyles, they are synonymous with comfort and simplicity, the classic ponytail has always remained a go-to, especially on bad hair days. But with the advent of more styles, the one thing which has brought a revolution are the braids! Be it gym or a dinner date or the most happening party in town, braids are no more just an option for keeping your hair tight and tucked for the perfect gym look or settling that frizziness from your tresses.

The braid has now gained the status of being a style statement that is now experimented with in ways more than one. From tousled to slicked back to a ladder braid, the possibilities of wearing a one are many!

Our television actresses are very talented and make very interesting style statements wherever they go. We host a poll to find out who out of Drashti Dhami, Sanaya Irani, Jennifer Winget, Hina Khan and Rubina Dilaik nails the braided look.

While Rubina and Hina received 33 and 30 percent votes respectively, Jennifer gave a close competition to them with a 15 percent. Drashti received a 12 percent of total votes and Sanaya holding 10 percent of votes.

Who do you think has a better hairstyle sense out of the actresses?



Coronavirus: it's tempting to drink your worries away but there are healthier ways to manage stress and keep your drinking in check

Stress and boredom might see us drinking more alcohol at home in the coming weeks and months. But there are alternatives



In these difficult times, it's not surprising some people are looking to alcohol for a little stress reduction. But there are healthier ways of coping with the challenges we currently face.

Why do we drink more in a crisis?

People who feel stressed tend to drink more than people who are less stressed. In fact, we often see increases in people's alcohol consumption after catastrophes and natural disasters.

Although alcohol initially helps us relax, after drinking, you can feel even more anxious. Alcohol releases chemicals in the brain that block anxiety. But our brain likes to be in balance. So after drinking, it reduces the amount of these chemicals to try to get back into pre-drinking balance, increasing feelings of anxiety.

People may also be drinking more alcohol to relieve the boredom that may come with staying at home without much to do.

What happens when we drink more?

Alcohol affects your ability to fight disease

Alcohol impacts the immune system, increasing the risk of illness and infections.

Although the coronavirus is too new for us to know its exact interaction with alcohol, we know from other virus outbreaks drinking affects how your immune system

works, making us more susceptible to virus infection.

So, if you have the coronavirus, or are at risk of contracting it, you should limit your alcohol intake to give your immune system the best chance of fighting it off. The same applies if you have influenza or the common cold this winter.

Alcohol affects your mood

Drinking can affect your mood, making you prone to symptoms of depression and anxiety.

This is because alcohol has a depressant effect on your central nervous system. But when you stop drinking and the level of alcohol in your blood returns to zero, your nervous system becomes overactive. That can leave you feeling agitated.

Alcohol affects your sleep

Alcohol can disrupt sleep. You may fall asleep more quickly from the sedating effects of alcohol, but as your body processes alcohol, the sedative effects wear off.

You might wake up through the night and find it hard to fall back to sleep (not to mention the potential for snoring or extra nocturnal bathroom trips).

The next day, you can be left feeling increasingly anxious, which can kickstart the process all over again.

Alcohol affects your thoughts and feelings

Alcohol reduces our capacity to monitor and regulate our thoughts and feelings.

Once we start drinking, it's hard to know when we're relaxed enough. After one or two drinks, it's easy to think "another won't hurt", "I deserve it", or "I've had a huge day managing the kids and working from home, so why not?".

But by increasing alcohol consumption over time, eventually it takes more alcohol to get to the same point of relaxation. Developing this kind of tolerance to alcohol can lead to dependence.

Alcohol ties up the health system

Alcohol related problems also take up a lot of health resources, including ambulances and emergency departments. People have more accidents when they are drinking. And drinking can increase the risk of domestic and family violence.

So an increase in drinking risks unnecessarily tying up emergency services and hospitals, which are needed to respond to

or two?". Any changes to your drinking habits now can become a pattern in the future.

How to manage stress without alcohol

If you are feeling anxious, stressed, down or bored, you're not alone. But there are other healthier ways to manage those feelings.

If you catch yourself worrying, try to remind yourself this is a temporary situation. Do some mindfulness meditation or slow your breathing, distract yourself with something enjoyable, or practise gratitude.

Get as much exercise as you can. Exercise releases brain chemicals that make you feel good. Even if you can't get into your normal exercise routine, go outside for a walk or run. Walk to your local shops to pick up supplies instead of driving.

Maintain a good diet. We know good nutrition is important to maintain good mental health.



the coronavirus.

How to manage your alcohol consumption

Don't stock up on alcohol. The more you have in the house, the more likely you are to drink. Increased access to alcohol also increases the risk of young people drinking.

Monitor your drinking. If you are getting on board with the new virtual happy hour trend, the same rules apply if you were at your favourite bar.

Try to stay within the draft Australian guidelines of no more than four standard drinks in any one day and no more than ten a week.

Monitor your thinking. It's easy to think "What does it matter if I have an extra one

Try to get as much sleep as you can. Worry can disrupt sleep and lack of sleep can worsen mental health.

Build in pleasant activities to your day. Even if you can't do the usual activities that bring a smile to your face, think about some new things you might enjoy and make sure you do one of those things every day.

Remember, change doesn't have to be negative. Novelty activates the dopamine system, our pleasure centre, so it's a great time to try something new.

So enjoy a drink or two, but try not to go overboard and monitor your stress levels to give you the best chance to stay healthy.