In this section, you’ll find information to help you knowledgeable about the disease and how best to protect yourself and those you care about. This resource will continue to run in our eEditions for as long as it’s needed.

DAILY NEWS ON THE VIRUS WILL BE FOUND IN OUR NEWS SECTION, EXTRA EXTRA.

FALSE SENSE OF SECURITY?

What you should know about wearing gloves and a mask if you can’t work from home

BY NICOLE SANTA CRUZ

What about gloves? Gloves can serve as a layer of protection but can still transmit the novel coronavirus, which causes COVID-19, said Dr. Steve Chen, associate dean for clinical studies at USC. A postal worker delivers mail in Torrance, Calif., wearing a mask and gloves on March 14. Experts warn against thinking gloves and masks will keep you totally safe.

Staying informed is the best defense.

Beware the coronavirus scams: Colloidal silver, various herb remedies and fake test kits

By Alejandro Segovia-Vasquez

A now-removed post from Craigslist, an online classifieds website, promised to treat coronavirus ... from my grandmother’s herbal remedy recipe card.” And a televangelist recently promoted his “Silva Solution” on his show, suggesting the concoction would boost the immune system and kill the virus within 12 hours. These are just a few examples of people who are trying to capitalize on the coronavirus panic, and there are countless others — from price gougers selling hand sanitizer for hundreds of dollars to fake-at-home coronavirus test kits coming from out of the country. Officials are aggressively pursuing scammers, threatening legal action if they continue.

The FDA has issued warning letters to seven entities that it believes have made false claims about coronavirus cures or treatments, including “The Jim Bakker Show,” which is already facing legal action from federal and state agencies.

Los Angeles City Attorney Mike Feuer and county District Attorney Mike Lee have made false claims about coronavirus cures or treatments, including “The Jim Bakker Show,” which is already facing legal action from federal and state agencies. The FDA has issued warning letters to seven entities that it believes have made false claims about coronavirus cures or treatments, including “The Jim Bakker Show,” which is already facing legal action from federal and state agencies.

Staying healthy

First, experts say, hand-washing in unbeatable. Hot or cold water. Use soap. Sing a song while you’re doing it so you’re washing for at least 20 seconds. Wash your hands before, during and after your shift and avoid touching your face. One expert suggested using a scented soap so you could use the scent as a reminder not to touch your face. Think about what your hands are coming into contact with. If you’re touching doorknobs, rails or elevator buttons, wash your hands again.

“There’s nothing better than washing hands,” said Steve Chen, associate dean for clinical studies at USC.

What about gloves? Gloves can serve as a layer of protection but can still transmit the novel coronavirus, which causes COVID-19, said Dr. Steve Chen, associate dean for clinical studies at USC. A postal worker delivers mail in Torrance, Calif., wearing a mask and gloves on March 14. Experts warn against thinking gloves and masks will keep you totally safe.

What’s the coronavirus, what are its symptoms and how does it differ from other common illnesses?

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**GLOVES**

David Bazzo, a clinical professor of family medicine at UC San Diego, is not a fan. “The gloves may be protecting you but also transmitting the virus.”

“Don’t rub your gloves against each other, like washing surfaces,” what else are you touching with those gloves?” Bazzo said. “Are you taking something from one person and giving it to another person?”

Before and after wearing the gloves, experts say to wash your hands. Think about how often you’re changing those gloves, and make sure that the pair, or pairs, you’re cycling through fit simply.

Remember, Bazzo said, that if you’re washing your hands and practicing social distancing (as much as you can), that’s probably as good as wearing gloves.

Experts also said to use the same precautions you would if you weren’t wearing gloves.

“Sometimes when people wear protective equipment, it gives them a false sense of security, and we should protect against that as well,” Bazzo said. “Should you wear a mask?”

To this question are mixed. Masks are recommended for people who are sick to help keep them from spreading the virus, experts said.

If you’re wearing the CDC-recommended mask — the N95 respirator — it needs to fit right.

Experts said they’d seen widespread misuse of masks: People will touch the mask, fidget with it, drop it, then put it back on. Sometimes they’ll even upside down or worn for too long, said Romina Bueteler-Alba, the dean of public health at UC Irvine.

The Centers for Disease Control and Prevention has not recommended that people wear masks for everyday activities, and with a shortage of supplies, experts urged caution. Ask yourself: Whom you might be taking away from a n underground and aggressive to try and contain the virus when case numbers are relatively low and the virus may eventually be traced and quarantined.

“One of the big perils in assuming that the virus is less dangerous in warmer temperatures, among particular ages or for any specific group is complacency,” said Julio Frenk, a physician who served as health minister in Mexico and is now president of the University of Miami. “If people fail to heed the warnings and recommendations of public health professionals, the results will be disastrous.”

But because high humidity and heat do not limit perfectly during most of July and August in some parts of the Northern Hemisphere, Bukkan cautioned that the effects of warmer weather on reducing transmissions might not last for a brief period in some regions.

“This suggests that even if the spread of the coron-avirus is not finding high-er humidity, its effect would be mixed in most areas above 40 degrees North, which includes most of the Europe and North America,” he said. And because so much is unknown, no one can predict whether the virus will return with such ferocity in the fall.

Manuela Andreoni contributed reporting.
Americans coping with the coronavirus are clogging toilets

by Michael Levinson

New York Times

Many Americans seem to be following the recommendations of health officials to clean and disinfect frequently touched surfaces, doorknobs, faucets and other items before touching surfaces in their homes. The result has been a coast-to-coast surge in hacking toilets and other plumbing lines, according to plumbers and public officials, who have pleaded with the public not to flush their waste into the system.

Many say the woes besetting the plumbing infrastructure have been compounded by the lack of toilet paper and other critical supplies, napkins or baby wipes to use instead.

Across the country — in California; Charleston, South Carolina; northeastern Ohio; Las Vegas, Austin, Texas, and Spokane, Washington — and water treatment officials have beseeched residents not to flush waste down the toilet using the hashtags #WipesClogPipes or #StopWipesFlush.

"Flushing wipes, paper towels and similar products down the toilet is a huge problem," said Dan Feuer, assistant director of the North Charleston Water System. "It's also a huge drain on the environment, it said. "Our technicians, we are working day and night, we're working triple shifts to keep up with the demand, but they do not break up like regular toilet paper."

The plumbing repair company Roto-Rooter issued a similar plea to its customers: "That substituting facial tissue for toilet paper was "another bad idea," unless it was used in small amounts and flushed frequently. The California State Water Resources Control Board warned this week that "even" single ply toilet paper "flushable" will clog pipes and interfere with sewage collection and treatment across the state.

A teacher at an elementary school in Los Angeles sent home notices to the parents of 21 students saying that "even when toilet paper is flushed several times, the toilet system is not clean enough."

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Those who are at risk of symptoms of coronavirus start monitoring everyone. The government has least not in America, wearing masks? Q: like in appearance. surface that are crown-protein spikes on their coronavirus? A: Definitely not. At least not in America, where the government has had time to identify and start monitoring everyone returning from China for symptoms of coronaviruses. Those who are at risk of infection are told to stay home until the possible incubation period of the virus passes, and those with the highest risk have been held in quarantine facilities on military bases until the quarantine period passes. This makes it very unlikely that anyone would encounter someone with coronavirus in public. If everyone goes out and buys a mask or two or three it will put further strain on supplies needed by health care workers who really do need those resources to avoid getting sick doing their jobs. Also, since coronavirus spreads inside large water droplets that land in your eyes, nose or mouth, or when one person touches another, wearing a mask alone wouldn’t necessarily prevent you from becoming infected if someone who was sick coughed or sneezed on you. Masks are actually found to be most effective when worn by those who are sick, because they can catch these droplets and prevent them from moving through the air.

Q: How does coronavirus kill?
A: It’s like any other respiratory virus such as influenza. Inhalated water droplets with virus particles inside get into the lungs, and your immune system immediately tries to get them out, either by causing inflammation of the tiny air sacs inside your lungs that are critical for moving oxygen from the air you breathe into your bloodstream. These immune system reactions can be so forceful that they cause a patient to essentially suffocate. But, if you get to the hospital soon enough, there are many modern techniques to reduce inflammation and support your breathing until your immune system naturally fights off the infection.

Q: Why is coronavirus so deadly?
A: It’s really not. The mortality rate for coronavirus currently stands at about 2 percent, though epidemiologists think that rate will decrease further once they have time to account for all of the infected people who never sought medical care. This is not Ebola, which has a mortality rate of around 90 percent.

Q: Why do they call it coronavirus?
A: These viruses are spherical with a halo of protein spikes on their surface that are crown-like in appearance.

Q: Should everyone be wearing masks?
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**From Page 4**

**Virus**

**What to do if you are sick with Coronavirus?**

**WHY DO YOU HAVE SYMPTOMS?**

Patients should call your primary care doctors first, said Delbert Powell, chief of the infectious disease section at Rady Children's Hospital.

**WHAT DO YOU DO IF YOU HAVE SYMPTOMS?**

**WHAT DO YOU DO IF YOU'RE SELF-QUARANTINED, IF YOU'RE WORKING, OR GOING TO SCHOOL?**

**WHEN CAN YOU GO BACK TO YOUR REGULAR SCHEDULE?**

**CORONAVIRUS TEST?**

A: Anyone in respiratory infections. All types of respiratory infections.

**CORONAVIRUS AT HOME?**

Pretty much like a cold, Powell said. Drink lots of fluids. You can take Tylenol or an NSAID such as ibuprofen for fever.

**WHEN SHOULD YOU REALLY NEED TO SEE A DOCTOR?**

Difficult breathing, high fever and a deep, productive cough can be signs of pneumonia. These need medical attention.

**REALLY NEED TO SEE A DOCTOR?**

Call your primary care doctor or go to the nearest emergency department. Your doctor or your emergency department will triage you.

**WHAT IF SOMETHING IS NOT RIGHT?**

**WHAT DO YOU DO IF YOU THINK YOU HAVE COVID-19?**

Call your primary care doctor or go to the nearest emergency department. Your doctor or your emergency department will triage you.

**5 STEPS TO WASH THE RIGHT WAY**

By following some basic steps on the proper way to wash your hands, you can reduce your risk and if you do get sick, your community is affected by the consequences.

**Wash your hands with soap and water for at least 20 seconds.**

**Lather your hands by rubbing them together with the soap. Lather the back of your hands, between your fingers, at the knuckle base, under your nails, and around your wrist.**

**Scrub your hands for at least 20 seconds and then rinse with water.**

**Dry your hands with clean paper towel.**

**If you don't have a paper towel, air dry your hands or use a hair dryer.**

**No sink? Sanitize your hands with hand sanitizer that contains at least 60% alcohol.**

**From Page 4**

**SICK**

With virus Health.

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**VIRUS**

had there been a hospital dated, meaning some who died would have survived had there been a hospital bed available for them.

A: According to the World Health Organization, the vast majority of people who have been infected have been discharged from care.

Q: Why bring quarantined aves to Marine Corps Air Station Miramar in San Diego?

Children's official said that military bases are ideal because they offer expansive properties separated from the general population that are already secure with men and women carrying guns and trained to use them.

Q: What can I do to avoid getting infected?

A: The main thing is to stay at least 6 feet away from anyone who has a cough or has any respiratory symptoms, although, if you touch a surface that someone with COVID-19 has touched, you should then wash your hands. It's also important not to get a common cold rather than novel coronavirus. Regular hand washing also helps to kill a lot preventing all types of respiratory infections.

Q: Why are they calling coronavirus COVID-19?

Why not name it after Wuhan in China where it was first discovered?

A: It’s sort of a medical acronym, CO stands for coronavirus, VI for virus, D for disease and 19 for the year when the current outbreak started. The World Health Organization followed international naming protocols designed to avoid stigmatizing any particular people or animal. Remem-
the World Health Organization said this week that the new coronavirus’s death rate was an estimated 3.4%, the figure seemed to shock both experts and President Donald Trump.

"I think the 3.4% number is really a false number," Trump said in a Fox News interview. "Now, this is just my hunch, but based on a lot of con-..." he added, "I'd say the number is way under 1%.

By definition, the case fatality rate is the number of deaths divided by the total number of confirmed cases, which appears to be what the WHO did to arrive at its rate. Is 3.4% a misleading number? We spoke to a number of experts in epi-...
BY MARILYNN MARCHIONE
Associated Press

Is it the flu, a cold or the new coronavirus? Patients and doctors alike are passing signs of illness to one another who needs what tests or care and how worried they should be.

“People have three different major viruses floating around at the same time,” causing somewhat similar symptoms—but different levels of concern, said Dr. LeRoy, president of the American Academy of Family Physicians.

So what’s the biggest danger? And why are we responding to them so differently?

FAMILIAR FOE

COVID-19, the disease caused by the new coronavirus, is a flu-like illness that has killed a small fraction of the number of people that the flu kills every year. Through the first four months of the outbreak, coronavirus has killed about 4,300 people. Flu kills 290,000 to 650,000 every year around the world, according to the World Health Organization.

So, to some, comparison seems comforting because flu is such a familiar foe. President Donald Trump regularly brings it up, noting in a tweet how many more Americans die from flu and adding, “Nothing is that down, life & the economy go on…”

Think about that.

But to public health experts, the huge number of flu deaths is exactly why extraordinary steps should be taken to try to prevent the new coronavirus from spreading widely.

The flu’s annual return can’t be stopped because it’s already so embedded in the population. There is still a chance COVID-19 cases can be limited or spread slow while treatments are developed.

HOW DEADLY ARE THE VIRUSES?

Flu kills about 0.1% of those it infects, but that’s still hundreds of thousands of people each year because it infects millions. Researchers are still trying to understand just how deadly the new coronavirus is. The mortality rate from infection with the virus isn’t known yet because the cases caught so far are often the most severe, people with mild or no symptoms aren’t being tested, and some overwhelmed hospitals struggle to care for the sickest patients. Various reports have estimated the fatality rate from less than 1% to as high as 4% among cases diagnosed so far, depending on location.

Most people infected by the new coronavirus develop mild or moderate symptoms and recover after about two weeks.

WHAT DO I HAVE?

Flu, cold and coronavirus are often hard to tell the difference in intensity and how they appear can offer clues to which one is causing the misery. Doctors can test for the flu and get results within a day, but coronavirus testing is still limited by availability as it’s still a nasopharyngeal swab.

Flu symptoms are more intense and usually come on suddenly, the Yale New Haven Health System advises. They can include a high fever (over 100.5 degrees), extreme exhaustion, muscle or body aches, a dry cough and chills. It really hits you like a bus, and people may start a day well but feel terrible by afternoon, LeRoy said.

Flu symptoms can include a runny or stuffy nose, headaches and possibly vomiting or diarrhea, though the latter two are more common in children than adults, the U.S. Centers for Disease Control and Prevention says.

Symptoms of COVID-19 may appear more slowly. They usually include fever, a dry cough and noticeable shortness of breath, according to the World Health Organization. A minority of cases develop pneumonia, and the disease is especially worrisome for the elderly and those with other medical problems such as high blood pressure, obesity, diabetes or heart conditions.

One study of hospitalized patients in China found that about half did not have a fever when they were admitted but nearly all developed one.

WHAT TO DO IF YOU’RE SICK

Don’t go straight to your doctor’s office—that just risks making more people sick, officials urge. Call ahead, and ask if you need to be seen or to have your symptoms assessed.

Fever, cough and noticeable shortness of breath—“if you have these three components, especially if it’s associated with someone recent travel or someone you know who’s been exposed to COVID-19, those things should prompt you to call for medical attention,” LeRoy said.

“Middle-aged patients should be encouraged to stay home,” the CDC’s Dr. Sue Gerber told doctors on a conference call last week. People having difficulty breathing should seek care, and older people or those with other conditions should contact their doctors early in the course of illness, she said.

PREVENTION

To protect yourself, wash your hands well and often, keep them away from your face, and avoid crowds and standing close to people.

There’s one big difference between flu and coronavirus: A vaccine exists to help prevent the coronavirus and it’s too late to get it. It won’t protect you from catching the coronavirus, but may put you in a better position to fight it.

“You don’t want to have a compromised immune system if you were to encounter coronavirus,” LeRoy said.
How to tell the difference between coronavirus, seasonal allergies

BY KIERSTEN WILLIAM Atlanta Journal-Constitution

ATLANTA

The beginning of the coronavirus pandemic has entered the season where allergies and allergy season begins. As people make runs to the grocery store to prepare for the potential of staying at home, they may notice some around them sneezing. But should you be worried when you notice someone going “achoo” could be an indicator of COVID-19?

Here’s the difference between allergy symptoms and those of the coronavirus.

WHAT IS THE NEW CORONAVIRUS?

The Centers for Disease Control and Prevention stated coronaviruses are a large family of viruses. The novel coronavirus, which causes COVID-19, is a new disease.

Pregnant women share concerns about coronavirus

BY CHRISTINA A. JOHNSON Chicago Tribune

Rachael Stewart, who is pregnant and due April 10, stands outside her Chicago home with her daughter, Mya Moore, 8, and her husband, Cil Stewart, on March 19. Dr. Melissa Simon, an OB-GYN at Northwestern Medicine, says even though very little is known about what happens during pregnancy amid coronavirus, the real issue is about contact.

There is no valid evidence for intrauterine transmission of COVID-19 and it is very unlikely to cause congenital anomalies. Having a baby during the COVID-19 era can be challenging, though very little is known about what happens during pregnancy amid coronavirus, the real issue is about contact.

Pregnant women should be a COVID-19 priority.

Pregnant women should be prioritized at home for the symptoms of the virus, Simon said. She recommends being consistent about social distancing, especially in this time of need.

“Pregnant women are more concerned about mental health than her physical health during this time,” said Simon. “If they’re going through major life changes, they feel much harder.”

“When you’re not leaving the house much, you expect it extends the likelihood we’ll be spending an awful lot of time inside our homes, the next few months,” she said.

Simon has put a place to help with potential loneliness and isolation, like connecting her with her prenatal fitness class twice a week online.

“I’m excited to be able to help women who are going through big changes in their lives and need to be connected,” said Simon.

Simmons urges pregnant women to talk to their doctors about what they are feeling.

“Please reach out to your caregivers if you need help and need to get connected to a hotline or someone to talk to,” she said.

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Additionally, people should keep their hands clean by washing with soap and water for at least 20 sec.

HOW CAN YOU PREVENT OR TREAT THE CORONAVIRUS?

The NIH stated they may include the following: sneezing, itching in the eyes, mouth, nose, throat, coughing, runny nose.

The American College of Allergy, Asthma & Immunology stated that those with seasonal allergies may be at an increased risk of symptom. The profession- al association also noted that allergies can be se- rious in occur year round.

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WHY ARE SEASONAL Allergies?

The National Institutes of Health noted seasonal allergies, or allergy rhinitis, is common and af- fects 6 percent of adults and children in the U.S. Also known as hay fever, allergies cause an immune response in the body to something that causes no problems for most people such as plants.

IF YOU HAVE CORONAVIRUS SYMPTOMS

Who stated they are typically mild and begin gradually. Coronavirus symp- toms include: dry cough, tiredness, fever. Some people may have severe symptoms like nausea, runny nose, aches and pains, sore throat, muscle pain. Accordingly in WHO, some people become critically ill and may un- recognize or experience any symptoms. Around 80 percent of people recover without needing any special treatment noted. Still, about one in five people become seri- ously ill from COVID-19 and experiences breathing difficulties. Serious illnesses are more likely to occur in people who are older or have underlying medical condi- tions, including long dis- ease, diabetes and heart disease or older adults. People should experience difficulty breathing, cough or enter medical attention.

IF YOU HAVE ALLERGY SYMPTOMS

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The over-the-counter pain reliever ibuprofen has not been linked to complications in those infected with the novel coronavirus, experts say.

"There's no good reason to avoid ibuprofen if you're infected with the coronavirus."
As cases of coronavirus infection proliferate across the globe, governments and take extraordinary measures to limit the spread, there is still a lot we don’t know about exactly what the virus does to people’s bodies. The virus creates fever, cough, shortness of breath — and signals are myriad in its effects, from flu to severe acute respiratory syndrome.

Here is what medical experts and researchers have learned so far about the progression of the infection caused by this new coronavirus infection and what they still don’t know.

How does this coronavirus cause infection? The virus is spread through droplets transmitted via an airborne cough or sneezing, which people usually can take in through their nose, mouth or eyes. The viral particles in these droplets travel quickly to the back of your nasal passages and to the mucous membranes in the back of your throat, attaching to a particular receptor in cells, beginning there. Coronavirus particles have spiky proteins sticking out from their surfaces, and these spikes hook onto cell membranes, allowing the virus’s genetic material to enter the human cell.

That genetic material proceeds to “infect the machinery of the cell and, in effect, ‘Does your job now is to help me multiply and make the virus,” said Dr. George Diaz, section chief for Providence Regional Medical Center in Everett, Washington.

How does that process cause respiratory problems? As copies of the virus multiply, they can spread out and infect neighboring cells. The virus often first starts in the back of the throat with a sore throat and a dry cough. The virus then spreads progressively down the bronchial tubes,” Schaffner said, referring to the mucous membranes that can become inflamed. That can cause infection in both the upper and lower respiratory systems.

What do scientists still not know about coronavirus patients? The way the virus enters the body and reproduces within it, as well as how it affects organs and other tissues, are some of the myriad mysteries around the new coronavirus. Scientists have seen patients in China recover, it is often because their disease. That study allows them to outlast the immune system as it rages and 2003.

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The new coronavirus has threatened a host of unfamiliar terms into our everyday discourse. Some are brand new, others aren’t but are being used in unexpected ways.

Here are some definitions to help you keep up with the latest on the global pandemic.

**SARS-CoV-2**

The official scientific name of the coronavirus causing the pandemic. It stands for severe acute respiratory syndrome coronavirus 2. It was previously known as 2019-nCoV.

**MERS**

The Middle East respiratory syndrome. MERS was named MERS-associated coronavirus; the virus that caused SARS syndrome (MERS).

**Disease spread**

The transmission of a pathogen, such as a virus, and when the first symptoms of illness appear.

**Quarantine**

A period of time that people with a disease, or who are suspected to have a disease, are required to stay home and not come in contact with others. This can be ordered by the CDC or by state and local governments.

**Isolation**

When someone who is definitely sick stays away from others so that they don’t infect anyone else. In the case of this coronavirus, isolation should continue until the risk of infecting someone else is thought to be low. The decision to end isolation should be made on a case-by-case basis, in consultation with health care providers and the local health department, according to the CDC.

**Social distancing**

Measures designed to prevent the spread of the virus. Useful actions can include reminding people to stay home when they’re sick and disinfecting common touch surfaces in buildings daily. One of the main strategies is to practice “social distancing.”

**Flattening the curve**

The process for slowing the spread of a virus so that the number of daily cases of infection will be very high, and the hump will rise steeply. If the disease spreads slowly, the number of new daily cases will be lower, and the hump will be shorter and wider.

**Outbreak**

An increase, often sudden, in the number of cases of a disease above what is normally expected among the population in a limited area.

**Epidemic**

An outbreak that has spread to a wider area.

**Pandemic**

An epidemic that has spread over multiple countries or continents, usually affecting a large number of people.

**Presumptive positive**

When a public health laboratory has determined a patient has tested positive for a viral infection, but officials are still awaiting confirmation from the CDC. For the purposes of public health, a presumptive positive result is treated as confirmed positive. There are, however, rare situations in which a presumptive positive may turn out to be negative.
The novel coronavirus, which has been used to treat patients with malaria for nearly a century, is a synthetic pattern, said Dr. Richard Baron, a microbiologist at North- western University Feinberg School of Medicine. To fight malaria, it essentially helps poison the digestive system of some blood parasites in the genus Plasmodium that are spread to humans through infected mosquitoes.

COVID-19 is caused by a coronavirus, not a parasite. Still, researchers hypothesize that chloroquine could help patients with the new disease by slowing the virus' spread. Basic research by curtailing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing the virus' ability to use certain compartments in a cell (called vacuoles) to get itself inside its target. It's like having an extra bolt on your front door, but it is slowing
Coronavirus poses extra risks for smokers and vapers

Lung experts said there’s a good reason to suspect that the coronavirus will be more dangerous to people who smoke or vape, and that can harm the lungs, such as dust and pollutants, may also lead people less able to recover from infection.

Lung smoke contains viral proteins from the lungs, and the lung is a hospitable environment for new viruses to develop. Smoking can cause damage to the lungs, making it more likely to deteriorate over time. Smoking and the new coronavirus could lead to more severe illness.

The National Institute of Allergy and Infectious Diseases, part of the National Institutes of Health, has already launched several studies in the United States, the United Kingdom and Europe.

That’s why researchers are also studying the virus in depth to try to develop tailored treatments from the very beginning of in vivo trials, says Stefano R. Safran, study leader and senior investigator at the National Institute on Aging.

Safran said it will decrease muscle mass, decrease lung function and provide less effective therapies for the next generation of viruses.
Nothing can stop a global outbreak in its tracks better than a vaccine that is dead or weakened, creating a vaccine capable of providing permanent immunity to a virus that causes COVID-19 will take much more than a year to 18 months, health officials say.

"That is the time frame," Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, told the House Oversight and Reform Committee last week. Anyone who says they can do it faster "will be cutting corners that would be dangerous to human beings."

While there are about 10 vaccine candidates in the works — and at least one of them could begin clinical trials in April — it would still take about three more months to conduct the first stage of human testing and another eight months or so to complete the next stages of the trial process, he added.

New vaccines require rigorous research and time-consuming testing that can cost hundreds of millions of dollars. That's why success is so good, but even if everything goes well, the final product might not hit the market until after an outbreak has subsided.

Here's how a look at how vaccines are made and why the process takes so long.

Q: How does a vaccine work?

A: Your body has a mul- ti-pronged defense system for recognizing and combating dangerous invaders: your white blood cells. There are several types, each with a different purpose.

Macrophages engulf and then eat pathogens or cells that are dead or damaged. They leave behind debris and frami- ments of the invading microbes. These fragments are called antigens.

A type of white blood cells produce receptors that rec- ognize these antigens. If a pathogen with those antigens shows up in the bloodstream against a cell that a macrophage can mount an attack.

Health officials say there are already hundreds of antigens that the body's immune system can recognize, so the body's immune system can attack those infected cells.

Your immune system has to go through this process each time it en- counters a threat from a new virus or bacterium.

A vaccine provides a shortcut. Essentially, it helps your immune sys- tem learn to recognize a threat so that you can be ready to fight it if you see it again.

Q: How long does it take to make a vaccine that can prevent COVID-19?

A: It would take 18 months before we can manufacture a vaccine that is effective.

Q: Once a vaccine is ap- proved, is the hard part over?

A: Definitely not. The labs that make the potent new vac- cine probably won’t be able to scale up — they’d need a state-of-the-art manufacturing plant for that. And many companies may be wary of investing in research resources it takes to manufacture a vaccine if the epidemic could end before there’s a chance to bring it to market, Werner said.

"That said, this dilemma during the West- ern European flu outbreak that took off in 2004. The virus had a mortality rate of about 20%, making people desper- ate for the still-unproven vaccine. So re- searchers employed a novel experimental design that involved vaccinating by giving a vaccine five days before someone was even enrolled in a trial to see if they had had an effect.

"I think people learned from that there are ways to be creative," Ste- phenson said. A phage-based vaccine for meningitis is currently under Phase 3 testing, she added.

Q: How good does a vac- cine need to be in order to gain approval?

A: The FDA wants it to be safe and effective — in other words, it has to protect enough people with as few unwanted side effects as possible. But, experts say, exactly what qualifies as safe and effective may depend on the disease in question.

For some perspective: Stephenson, who also studies HIV, noted that researchers would be very happy if they could come up with an HIV vaccine that protected 50% or so of those who got it. On the other hand, for a highly contagious virus like meas- les, a vaccine would need to work in almost every- one to establish herd im- munity, she said.

"Front-line healthcare workers are usually one of the first groups you vacci- nate because they’re needed to care for the rest of society — they’re likely to be a priority as well."

Q: Who would get the vaccine first?

A: This can be a difficult question when there’s a limited amount of vaccine and a whole lot of de- mand.

Since older adults ap- pear to be at most risk from COVID-19, it’s likely that health officials would focus on them first, Ste- phenson says.

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Q: How does a vaccine work?

A: Before a vaccine can be made and used for public health, it must be proven safe and effective in a series of trials that are monitored by a regulatory body, such as the U.S. Food and Drug Administration.

The first steps are to show that it’s safe in preclinical studies. These can be conducted in animal cells in a laboratory in viro (using an animal as a stand-in for humans). Finding the right animal for testing can be a chal- lenge, said Robert Gou- fell, director of health and bioscience at CSIRO.

Then clinical trials in humans can begin. Phase 1 trials are small, usually with a few dozen closely monitored participants. The main goal here is to make sure the vaccine is safe. Phase 2 trials typical- ly enroll hundreds of pa- tients to expand the safety assessment and allow scientists to dig into the body’s immune response. Phase 3 trials can enroll thousands of people gener- ally with some of them randomly assigned to get the vaccine and some getting a placebo.

The process can take years under normal cir- cumstances. In an emer- gency, it could be sped up dramatically.

The big sticking point is often the Phase 3 trials. In an epidemic, many study volunteers may not want to risk getting a placebo instead of the vaccine, Stephenson said.

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Doctors and patients turn to telemedicine in the coronavirus outbreak

BY REED ABELSON
New York Times

The man had recently traveled, which meant a brief stop in Tokyo. He had a fever and cough about a week ago, but was now feeling fine.

He called the virtual medical line set up by Rush University Medical Center in Chicago recently to help screen patients for coronavirus.

“He said all the right buzzwords: cough, fever, fatigue,” said Dr. Meeta Shah, an emergency room physician at Rush.

After talking with Shah she did not think he needed to be admitted but referred him to the city’s health department.

Rush and other large hospitals across the country are quickly expanding the use of telemedicine to safely screen and treat patients for coronavirus, and to try to contain the spread of infection while offering remote services.

“This is a kind of turning point in virtual health,” Shah said. “We’re actually seeing how it can be used in a public health crisis.”

While the notion of seeing a doctor via your computer or cellphone is hardly new, telemedicine has yet to take off widely in the United States.

Health insurance plans do typically offer people the option of talking to a nurse or doctor online as an alternative to heading to an emergency room or urgent care center, but most people don’t make use of it. Now doctors, hospital networks and clinics are rethinking how the technology can be used, to keep the worried well calm and away from clinical care while steering the most at risk to the proper treatment.

“The use of telemedici- ne is going to be critical for management of this pandemic,” said Dr. Stephen Parodi, an infectious disease specialist and executive with The Per- manente Medical Group, the doctors’ group associ- ated with Kaiser Perma- nente, one of the leaders in the use of virtual visits for its patients.

Telemedicine got an early boost from the $8.3 billion emergency funding measure from Congress, which loosened restrictions on its use to treat people covered un- der the federal Medicare program. At a news con- ference Monday, Seema Verma, the administrator of the Centers for Medi- care and Medicaid Serv- ices, praised the govern- ment’s efforts to expand the use of telemedicine under Medicare, the fede- ral program for people 65 and older.

In a meeting Tuesday at the White House with President Donald Trump, private health insurers also said they would pay for the virtual visits for people who may have coronavirus to improve access to care for their family members.

By using their phone or computer, patients will be able to get guidance about whether they need to be seen or tested instead of showing up unannounced at the emergency room or doctor’s office. Patients, particularly those who were at high risk for a serious illness if they were infected, can also opt to substitute a trip to a doc- tor’s office with a virtual visit when it is a routine check in with a specialist or a primary care doctor.

That way they can avoid crowded waiting rooms and potential infection.

When Rush admitted a student last week who was believed to have the virus, the hospital was able to prepare for his arrival by clearing the ambulance bay of people and vehicles to protect patients and hospital staff from pos- sible infection. Taken to an isolation room, he was examined by Dr. Paul Casey, an emergency room physician, and a nurse, both in protective gear.

An infectious disease specialist was consulted over an iPad. The patient, who did have the virus, was released last Friday, and Rush was able to avoid the fate of other hospitals in the United States, where patients with COVID-19 led to the widespread quarantine of health care workers.

“When the news of coronavirus broke last month, we saw the opportu- nity,” Casey said.

Health systems are racing to adapt and even develop virtual services that can serve as their front line for patients.

“Telehealth is being re- discovered,” said Dr. Peter Antall, the chief medical officer for Am- Well, a company based in Boston that is working with health systems across the United States. “We actually recognize this is an all- hands-on-deck moment,” he said. “We need to scale up everywhere we can.”

Other systems are also reaching their telemedici- ne offerings. “The CO- VID-19 outbreak is going to serve as an impetus,” said Dr. Shahana Khan, the director of telepsy- chiatry at NYU Langone Health. “We have no choice.”

Patients concerned about the coronavirus are being directed to NYU’s virtual urgent care, which they can gain access to via their phone or a computer.

“They are calling or saying they are hearing messages loud and clear,” said Dr. Paul A. Testa, an emergency medicine doc- tor who is the system’s chief medical information officer.

“NYU is also encourag- ing its doctors who are self-quarantined because of recent travel to see patients using videos, as well as directing patients who are particularly vul- nerable because of exist- ing medical conditions to consider a virtual visit instead of leading to a doctor’s office.”

But Testa emphasized that patients who need to be seen in person should not hesitate to seek care. “We’re not discouraging them from coming in,” he said.

Virtual care has its lim- its, of course, and many of the startups and others promoting their offerings may not be fully equipped to handle patients who might have the virus. At ZoomCare, a chain of clinics in Oregon and Washington, consumers are being encouraged to use the company’s online chat feature so that their risks can be assessed.

“We’re being very expli- cit at ZoomCare that we see it’s not for COVID-19,” said Dr. Matt Zeitzer, who is the clinic’s medical director of acute care services. Instead, people may be told to self-quarantine and keep a careful eye on their symp- toms.

But the idea of using telemedicine to prevent further spread of the virus is being adopted quickly. At Intermountain Health- care, the Utah system that cared for an infected pa- tient at its Salt Lake City hospital, the concern over a potential measles out- break last year led execu- tives to consider how to better protect the commu- nity from infections dis- eases.

“When coronavirus hit the streets, we took the measles workplace and expanded on it,” said Kerry Palakanis, a nurse practitioner who is the executive director of In- termountain’s initiative, Connect Care.

The system is also thinking about how it can use the same technology to deliver home health care, particularly for pa- tients who are at high risk because of chronic med- ical conditions or have COVID-19 but can be treated safely at home.

People at home could be equipped to take their blood pressure or test their blood sugars, and a doctor or nurse could be available over video. By making sure patients virtually, In- termountain will be able to limit the potential expo- sure of doctors who are already dealing with the increased volume of calls, both from those who want to know more about what they can do to minimize their risk of catching coronavirus and those with worrisome symptoms. “We see the whole spectrum of pa- tients,” said Dr. Kristin Dean, medical director for Doctor On Demand, a company whose service is offered to customers of some of the major health insurance companies.

In evaluating whether patients may be safely monitored at home, doc- tors take into account patients’ medical history and the severity of their symptoms, she said.

“The patients have been appreciative of that switch,” said Paradigm of Permanente. “Many of them don’t want to come in and be exposed in a clinic or office setting.”

Dr. Paul Casey takes video calls at Rush University Medical Center, which is using telemedicine to screen and treat patients, in Chicago on March 6. Rush University Medical Center and other hospitals and clinics across the country are quickly expanding the use of telemedicine to safely screen and treat patients for coronavirus, and to try to contain the spread of infection while offering remote services.

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DANIELLE A. SCRUGGS NYT

Coronavirus guide

NYT Photo Library

BY KERRY PALAKANIS
Connect Care
It probably began with an accident thousands of years ago. According to one legend, rain washed the fat and ash from frequent animal sacrifices into a nearby stream, where they formed a lather with a remarkable ability to clean skin and clothes. Perhaps the inspiration had a vegetal origin in the frothy solutions produced by boiling or mashing certain plants. However it happened, the ancient discovery of soap altered human history. Although our ancestors could not have foreseen it, soap would ultimately become one of our most effective defenses against assorted pathogens.

People typically think of soap as gentle and soothing, but from the perspective of fat molecules, it is often extremely destructive. Ordinary soap, or detergent, is a mixture of molecules called micelles, with heads pointing outward and tails tucked inside. Some bacteria and viruses have lipid membranes that contain double-layered micelles with two heads of hydrophilic tails sandwiched between two rings of hydrophobic heads. These micelles are studded with important proteins that allow viruses to infect cells and perform vital tasks that keep bacteria alive. Pathogens wrapped in lipid membranes include coronaviruses, HIV, the viruses that cause hepatitis B and C, herpes, cholera, Zika, dengue, and numerous bacteria that attack the intestines and respiratory tract.

When you wash your hands with soap and water, you surround any microorganisms on your skin with soap molecules. The hydrophilic tails of the free-floating soap molecules attempt to evade water, in the process, they wedge themselves into the lipid envelope of certain microbes and viruses, prying them apart. “They act like crowbars and destabilize the whole system,” said professor Paul Thurnher, acting head of chemistry at the University of New South Wales. Essential proteins spilt from the ruptured membranes into the surrounding water, killing the bacteria and rendering the viruses useless.

In tandem, some soap molecules disrupt the chemical bonds that allow bacteria, viruses and grime to stick to surfaces, lifting them off the skin. Micelles can also form around particles of dirt and fragments of viruses and bacteria, separating them in floating cages. When you rinse your hands, all the microorganisms that have been damaged, trapped and killed by soap molecules are washed away. On the whole, hand sanitizers are not as reliable as soap. Sanitizers with at least 60% ethanol do act similarly, defeating bacteria and viruses by destabilizing their lipid membranes. But they cannot easily remove microorganisms from the skin. There are also viruses that do not depend on lipid membranes to infect cells, as well as bacteria that protect their delicate membranes with sturdy shields of protein and sugar. Examples include bacteria that can cause meningitis, pneumonia, dengue and skin infections, as well as the hepatitis A virus, polio, rhinoviruses and adenoviruses (frequent causes of the common cold). These more resilient microbes are generally less susceptible to the chemical onslaught of ethanol and soap. But vigorous scrubbing with soap and water can still expose these microbes from the skin, which is partly why hand-washing is more effective than sanitizer. Alcohol-based sanitizer is a good backup when soap and water are not accessible. In an age of robotic surgery and gene therapy, it is all the more wondrous that a bit of soap in water, an ancient and fundamentally unaltered recipe, remains one of our most valuable medical interventions. Throughout the course of a day, we pick up all sorts of viruses and microorganisms from the objects and people in the environment. When we absentmindedly touch our eyes, nose and mouth — a habit, one study suggests, that recurs as often as every 2 1/2 minutes — we offer potentially dangerous microbes a portal to our internal organs.

As a foundation of everyday hygiene, hand-washing was broadly adopted relatively recently. In the 1840s Dr. Ignatz Semmelweis, a Hungarian physician, discovered that if doctors washed their hands, fewer women died after childbirth. At the time, microbes were not yet recognized as vectors of disease, and many doctors subscribed to the notion that a lack of personal hygiene might be responsible for their patients’ deaths. Ostracized by his colleagues, Semmelweis was eventually committed to an asylum, where he was severely beaten by guards and died from infected wounds.

Florence Nightingale, the English nurse and statistician, also promoted hand-washing in the mid-1840s, but it was not until the 1940s that the Centers for Disease Control and Prevention issued the world’s first nationally endorsed hand hygiene guidelines.

Washing with soap and water is one of the key public health practices that can significantly slow the rate of a pandemic and limit the number of infections, preventing a disastrous overburdening of hospitals and clinics. But the technique works only if everyone washes their hands habitually and thoroughly. Work up a good lather, wash your palms and the back of your hands, pat your hands dry, rub your fingertips under your palms, and twist a soapy fist around your thumbs.

Or as the Canadian health officer Bonnie Henry said recently, “Wash your hands like you’ve been chopping jalapeños and you need to change your contact lenses. Even people who are relatively young and healthy should regularly wash their hands, especially if they are caring for someone who is sick. If you are a parent or a guardian, you need to model hand hygiene for your children.”
Due to the coronavirus outbreak, people are at home and focused more than ever on ways to disinfect household objects that may have never been cleaned before, like that colorful leather sofa. The reality is that causing COVID-19 remains viable for hours to days on surfaces, according to health experts at the Centers for Disease Control and Prevention (CDC).

They recommend cleaning and wiping down frequently touched surfaces with a disinfectant daily during cold and flu season to reduce the risk of virus spreading. It isn’t possible to remove bacteria from everything you touch, but soap and water, household cleaners and U.S. Environmental Protection Agency (EPA)-approved household disinfectants are effective on hard surfaces such as counters, table tops, telephones, switches, handles, doorknobs, toilets and sinks, says the CDC. 

Products with EPA-approved claims can be effective against hard-to-kill viruses, says the CDC. These include Clorox cleaner and bleach products and Lysol disinfectants.

Depending on the surface material, you can use solutions with at least 70 percent isopropyl alcohol or 4 percent chlorine bleach to kill bacteria. Mix four to six drops of liquid dish soap or one to two tablespoons of bleach with a little mild liquid dish soap and water. Test before using soap or another cleaning agent, which may remove some color.

To sanitize a hardwood floor with a mop dampened with a half cup of diluted white vinegar diluted with one gallon of water, says the CDC. Don’t let vinegar penetrate the seams, which can cause the substrate to warp. Don’t use cleaners containing acid or sodium hypochlorite that will erode, etch, corrode and permanently discolor the laminate surface, says the Formica company.

Cabinets: Use a clean, soft, lint-free cloth and dry the cabinet with another clean, soft, lint-free cloth or a microfiber cloth to avoid scratching laminate and high-gloss cabinetry, according to MasterBrand.

Granite: Use a dampened broom with synthetic fibers. Check the label to determine its potency, the results say experts. If you need a multipurpose bucket, Ikea fans swear by a $12.99 multi-material Tub for $19.99. Marble counter: Use a clean cloth with white vinegar and mild liquid detergent, rinse and then dry with a soft cloth. Sink and tub: Use a sponge with a little mild liquid dish soap and a clean cloth, sponges and a white cloth to eliminate build-up and run a cycle of hot water to rinse.

Dryer: Wash baked exterior with mild detergent and water, then wipe with a damp sponge, or use any all-purpose cleaner without abrasives. Clean the lint filter every time you run the machine.

LAUNDRY ROOM Cleaning supplies: Use a disinfectant wipe on soap dispenser pumps. Wash cleaning rags, shake out dusters and brooms, and microwave the kitchen sponge for two minutes daily to destroy viruses every two weeks.

BATHROOM Floor: Microfiber mops can effectively remove dirt and bacteria, suggests experts. If you need a multipurpose bucket, Ike fans swear by a $12.99 multi-material Tub for $19.99. Marble counter: Use a clean cloth with white vinegar and mild liquid detergent, rinse and then dry with a soft cloth. Sink and tub: Use a sponge with a little mild liquid dish soap and a clean cloth, sponges and a white cloth to eliminate build-up and run a cycle of hot water to rinse.

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Combining these common household cleaning chemicals could make you sick or worse

**By Janet Eastman**

BY JANET EASTMAN The Oregonian, Portland, Ore.

As confirmed cases of the novel coronavirus, or COVID-19, continue to rise, the United States Centers for Disease Control and Prevention (CDC) warn frequently disinfecting of routinely touched surfaces and objects like tables, countertops, light switches, doorknobs, cabinet handles, cell phones, computer keyboards and door latches.

But even in a pandemic, improper cleaning can be better than no cleaning at all.

**KITCHEN**

**Plain soap and water.** To disinfect surfaces, researchers recommend cleaning with plain soap and water. To disinfect shower doors. The CDC recommends cleaning surfaces with plain soap and water. To disinfect shower doors. The CDC recommends cleaning with plain soap and water.

**Disinfectant sprays.** The CDC says if you are using disinfectant sprays, use a formula that contains at least 70 percent alcohol, or use an EPA-registered disinfectant. Spray disinfectant sprays use electrostatic charge to help them stick to surfaces better. **Disinfectant wipes.** Use a wipe that contains at least 70 percent alcohol or another disinfectant, according to the National Sanitation Foundation (NSF).

**Chemical disinfectants.** The novel coronavirus can remain viable for days on surfaces, according to the CDC.

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**How to sanitize upholstery and home surfaces without harming them**

**BY JENNA RATY**

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Vanguard Daily News, Maine

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**NEW YORK**

Can my kids go on a play date? Is it OK if I visit the gym?

In the time of corona-
virus, once-easy ques-
tions have suddenly be-
come complex.

Here are some ques-
tions and answers about the “social distancing” efforts to slow the epi-
demic in the U.S.

**WHAT IS SOCIAL DISTANCING?**

Social distancing are practices implemented by public health officials to keep people apart from spreading. The measures are aimed at trying to cut down on times of virus spreading around, and ultimately protect those most vulnerable, includ-
ing the elderly and people with weakened immune systems.

**WHAT MEASURES HAVE BEEN TAKEN?**

Governments have closed schools, and mil-

tions of workers and stu-
dents have been ordered to stay home. On Monday, U.S. officials rec-
ed that older people and those with underlying health conditions “stay home and avoid other people.” The U.S. is also telling people not to gather in large groups.

And experts also recom-

**WHY 6 FEET?**

Experts believe the virus can be spread through droplets that come out of your mouth and nose. When an in-

**CAN I GO OUTSIDE AT ALL?**

Yes, with some excep-
tions. And the guidelines vary based on where you live.

“Where we’re being told to stay at home and lock the
doors,” said Dr. William

**WHAT ABOUT SOCIAL DISTANCING?**

As more people are getting complex.

**WHAT CENTER?**

Where can I go to the gym? Can I go to the gym? Can I go to the gym?

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**WHAT CENTER?**

Where can I go to the gym? Can I go to the gym? Can I go to the gym?
In the midst of so much what it means to have fun, businesses (thus trans-
stitutions) are taking place on streaming concerts (some from the luminous con-
ies of celebrity homes), and establishing quarantine
ning movie nights on Twit-
streaming music were
streamed from an empty
gym, and romping through
tne movie nights on Twit-
platforms were in
and soap. The suggested
the show's final season of the
and most recently to 10.
and political candidate
Mr. McKinley is a candidate for the Clark
a small but highly vocal
dance of caution; now it
Sturdivant said, ticking off a list
In the age of a pan-
the week. At one course you are disappoint-
with something we could do without putting our-
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Adrian Kasen just after

"Onward," Adrian Kasen
"Bad Boys For Life." The
he met his girlfriend,
mediation sessions on
on March 14, a dozen
and was seeing so many artists
streamed from an empty
ter to 10 and asked Amer-
dowed into a lighting
she said. "Relax."
but virtually. At 9 p.m. on
..."It's a kind of Joaquina

Families visit a drive-in movie theater March 14 in Fort Lauderdale, Fla. See CORONAVIRUS GUIDE, PAGE 20

Coronavirus guide

TRUE TALES OF QUARANTINED SOCIALIZING

TALES OF QUARANTINED SOCIALIZING

FORT LAUDERDALE, FLA. Americans were snim-
whitesippingcocktailsat
No spring training.
face. A zoo in Cinn-

For all of the talk
among other things, the global coronavirus

Trans of the night. At one in between, we are

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I am already feeling

McCharen-Tran and her partner, Prof. Davis Jones, a

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Public relations

Ted Cruz's official Twitter account said, "I can’t believe they are going to do this. They should have let the people speak."

Donald Trump's official Twitter account said, "They should have let the people speak."

Biden's official Twitter account said, "I can’t believe they are going to do this. They should have let the people speak."

The situation escalated quickly, with users demanding to speak and the media coverage of the event increasing. As the tension mounted, it became clear that this was not just a protest over a single event, but a broader movement against censorship and the silencing of voices.

In the end, a compromise was reached, with the organizers agreeing to allow a limited number of speakers to participate in a moderated discussion, while still allowing others to voice their concerns through social media and other online platforms.

The incident highlighted the importance of free speech and the power of the internet as a tool for organizing and mobilizing public opinion.

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**Note:** This is a fictional account based on real events and public figures. All names and details have been changed for privacy and legal reasons.

**SELF-QUARANTINE: WHEN TO DO IT**

**IN GENERAL, YOU SHOULD STAY HOME IF YOU HAVE SYMPTOMS AND IF YOU DON’T HAVE SYMPTOMS. THINK ABOUT HOW YOU WOULD MONITOR YOURSELF FOR THE FLU**

By Deborah Netburn

The Centers for Disease Control and Prevention recommend that you self-quarantine if you have a medium or high-risk category. In some cases, experts recommend that you stay away from others for up to 14 days to see if you have symptoms of the virus. You may be asked to be isolated for 14 days if you have been in contact with someone who has COVID-19.

If you are healthy Americans who do not fall in the high- or medium-risk categories do not need to self-quarantine at this time.

In general, you should stay home if you have symptoms and not if you don’t have symptoms,” Gin said. “Think about how you would monitor yourself for the flu and do that, she said.

Even if you live with someone who has flu-like symptoms, it is not necessary to self-quarantine. Even if someone in your household has been diagnosed with COVID-19, you do not need to self-quarantine.

If you want to go to a conference where someone was diagnosed with COVID-19, you do not need to self-quarantine.

**WHEN IS SELF-QUARANTINE UNNECESSARY?**

Healthy Americans who do not fall in the high- or medium-risk categories do not need to self-quarantine.

**HOW LONG SHOULD YOU SELF-QUARANTINE IF YOU DO NOT HAVE SYMPTOMS OF COVID-19?**

Health officials advise that if you do not need to self-quarantine, you should expect to do it for a full two weeks to be safe.

In a study of 184 people who contracted the new coronavirus, most people developed symptoms within six days of becoming infected, and 20% of them had symptoms by day 12.

The authors of the study calculated that only 10% of COVID-19 patients will take longer than that to begin showing symptoms.

In the setting of the global pandemic, it think it is important for individu-als who experience cold or flu-like symptoms to self-isolate themselves,” said Dr. Amesh Adalja, a se-nior scholar at Johns Hop-kins Center for Health Security.

Even if someone in your office has been diagnosed with COVID-19, you do not need to self-quarantine.

**WHEN SHOULD YOU REMAIN IN ISOLATION IF YOU DO HAVE COVID-19 SYMPTOMS?**

If you have cold and flu-like symptoms, you should isolate yourself from others for the dura-tion of your symptoms, which could be up to 14 days.

**HOW LONG SHOULD YOU ISOLATE YOURSELF FOR?**

If you have COVID-19 symptoms, you should isolate yourself for the duration of your symptoms, which could be up to 14 days.

**YOU REMAIN IN ISOLATION FOR?**

If you do have to self-quarantine or isolate your-self, you should have as little contact with others as possible. Ideally, you would stay in a private room that other members of the household do not enter.

However, since that is not always realistic, you should wear a mask to protect others.

Is it not necessary for the family to wear a mask, only the sick person, Gin said.

CAn YOU WALK YOUR DOG IF YOU ARE self-QUARANTINE?**

You can also pick up a food delivery or sign for a package. That also goes for people who are self-isolated.

“It’s 15 minutes of close face-to-face time that puts people at risk or two hours of more of contact in a contained environment,” Gin said. “If you walk your dog and pass your neighbor, that’s fine.”

**YOU SHOULD TELL YOUR HEALTH CARE PROVIDER IF YOU DECIDE TO SELF-QUARANTINE OR TO ISOLATE YOURSELF**

It’s a good idea to notify your employer and consider before you begin either one. He or she can give you tips on how to stay safe and protect these people around you, as well as what red flags to look for that would indicate you need to see a doctor or nurse in person, or be moved to the hospital.

**HOW CAN YOU KEEP THE PEOPLE YOU LIVE WITH SAFE?**

If you do not need to self-quarantine or isolate yourself, you should have as little contact with others as possible. Ideally, you would stay in a private room that other members of the household do not enter.

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Kate Mannle, who recently traveled through South Korea on her way home from a trip to Myanmar, quarantined herself in her home in Seattle.

"I'm living in cramped quarters with young children or elderly parents, so it's really challenging if you have kids and you have to lock yourself away from them," she said.

"My ideal time to binge on Netflix is alone. And don’t share towels. You can use sanitizer, if you can find it, but soap and water are preferred. Even if you haven’t coughed or sneezed, you should wash your hands frequently and avoid touching your eyes, nose and mouth if you haven’t just washed them.

"If you cough or sneeze, cover your mouth and nose with a tissue and discard the used tissue in a lined trash can. Then you must immediately wash your hands with soap and water for at least 20 seconds. You can use sanitizer, if you can find it, but soap and water are preferred.

"If you have a cough or sneeze, you should wash your hands frequently and avoid touching your eyes, nose and mouth if you haven’t just washed them.

"If you are sick, whether you’ve got COVID-19 or not, you should separate yourself immediately. In that case, you can test positive for COVID-19 merely by coming within six feet of the patient. The disease is contagious when you are asymptomatic.

"Among people told to self-quarantine, isolate themselves or stay home are people returning from parts of China and Iran, those who developed symptoms after spending time in other countries with sustained community transmission, and those with no known exposure who are sick.

"But many individuals who don’t fit neatly into any of these categories and weren’t asked to stay home are choosing to seclude themselves anyway because they don’t want to put others at risk. California has more than 3,500 people in self-quarantine. More than 7,000 are in seclusion in New York City alone.

"It may sound like a vacation from reality, an ideal time to binge on Netflix and catch up on sleep. In fact, it’s not easy to lock yourself away from family and friends. There are practical and logistical challenges and yawning gaps in the official advice that make it even harder.

"Many Americans, may be most, live paycheck to paycheck.

"We have to have social interventions to incentivize and support isolation, or we are doomed," said Arthur Caplan, professor of bioethics at the New York University Langone Medical Center.

"People with no health insurance, inadequate insurance or no regular doctor will be reluctant to seek care if they have symptoms, fearing steep medical bills, he noted.

"Individuals living in the country illegally, fearful of being discovered and deported, may avoid diagnosis and care.

"I don’t see the state or federal government preparing for this in any way," Caplan added.

"In exchange," he said, "we as a nation owe a debt to the workers who are helping to keep us safe.

"We have to have social interventions to incentivize and support isolation, or we are doomed," said Arthur Caplan, professor of bioethics at the New York University Langone Medical Center.

"People with no health insurance, inadequate insurance or no regular doctor will be reluctant to seek care if they have symptoms, fearing steep medical bills, he noted.

"Individuals living in the country illegally, fearful of being discovered and deported, may avoid diagnosis and care.

"I don’t see the state or federal government preparing for this in any way," Caplan added.

"The terms of home isolation can be onerous and may last for two weeks, which is the pre-symptomatic incubation period for the virus. It is especially challenging if you have young children or elderly relatives to care for, or live in cramped quarters with a lot of roommates.

"Isolation

If you are infected or have been exposed to the coronavirus, you must isolate yourself from your partner, your housemates, your children, your elderly aunt. You shouldn’t even pet your dog. And definitely no snuggling with your pet (no licking).

"If you don’t have your own room, one should be designated for your exclusive use. You should use a separate bathroom, if you have one.

"No visitors and no staff, unless it’s absolutely essential. Don’t take the bus or subway, not even a taxi.

"Masks

If you must be around other people – in your home, or in a car because you’re on your way to see a doctor, and only after you called first – you should wear a mask, and everyone else should, too. But first, you or one of your friends or family members have to find masks, which are sold out almost everywhere.

"Hygiene

If you cough or sneeze, you should cover your mouth and nose with a tissue and discard the used tissue in a lined trash can. Then you must immediately wash your hands with soap and water for at least 20 seconds. You can use sanitizer, if you can find it, but soap and water are preferred. Even if you haven’t coughed or sneezed, you should wash your hands frequently and avoid touching your eyes, nose and mouth if you haven’t just washed them.

"Defecation

Don’t share dishes, drinking glasses, cups, eating utensils, towels or bedding with anyone (including your pets).

"Wash those items after you use them.

"Counterparts, tablemats, doorknobs, bathroom fixtures, toilets, showers, keyboards, tablets and bedside table are considered “high-touch surfaces,” wipe them often with a household cleaner.

"Frequently wipe down surfaces that may be contaminated by bodily fluids, including blood and stool.

"Monitoring

Keep an eye on your health and call a doctor if your symptoms are getting worse. Make sure to tell the doctor if you are being monitored for the coronavirus.

"Household members

Family members and other occupants should monitor the patient’s symptoms and call a health provider if they see a turn for the worse.

"Housemates can go to work or school, but it’s going to be their job to stock up on groceries, pick up prescriptions, take care of the quarantined and keep the place clean. They’ll be depending on doorknobs and doorstops, doorknobs and countertops, doorknobs and doorstops – a lot.

"When around the patient, household members must wear a face mask, and both masks and gloves if they have contact with the patient’s bodily fluids. These should be thrown away immediately, never reused.

"Elderly members of the household and those with chronic medical conditions are at particular risk if they are infected. Contact with the secluded individual should be minimized.

"Other occupants of the home should wash their hands frequently and avoid touching eyes, nose and mouth with unwashed hands. They should stay in a room separate from that of the exposed or sick individual. If feasible, other members of the household should not share a bathroom with the secluded person.

"They should monitor their own health, too, and call a doctor if they develop a cough, fever or shortness of breath.

"Unanswered questions

No one pays you for self-quarantine. There is no reimbursement for products you may need, no government-paid nurse to stop by the home and help out. Self-quarantine is a hardship for both those who have families and those who live alone.

"Not everyone can work remotely. A two-week absence from work can take an enormous financial toll on hourly wage workers who have to clock in and show up to get paid or who are part of the gig economy with no single employer.

"Many Americans, may be most, live paycheck to paycheck.

"We have to have social interventions to incentivize and support isolation, or we are doomed," said Arthur Caplan, professor of bioethics at the New York University Langone Medical Center.

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Coronavirus guide

CAN YOU BE FORCED INTO QUARANTINE?

Your questions answered

BY NEL MACRAE/AROUND THE WORLD

Government-imposed quarantines were fairly common in the late 19th and early 20th centuries before medicine stemmed the ferocity with which contagious diseases spread. The very word quarantine is rooted in the Italian words quotanerente and quarantagra, and the word is thought to have been coined in 1630 in Venice to force ship passengers and cargos to wait before landing in the 14th and 15th centuries to try to stave off the plague. Since then, quarantines have often generated tensions between protecting public health versus respecting individual rights.

Here are answers to some common questions about how quarantines are imposed and enforced in the United States in the wake of the coronavirus.

Q: Can the government impose a quarantine on individuals?

A: The legal authority to impose quarantines on individuals is vested in the “police powers” granted broadly to states, counties and cities to protect public health and safety. Although the states and most Americans, a state or local quarantine imposed to prevent the spread of the coronavirus will be far more important than any federal order.

When it comes to the federal government, it can impose quarantines under the Public Health Service Act for two main reasons: to prevent the spread of communicable disease across the United States or between the United States and other countries.

Quarantine is considered a measure of last resort when no preferable means is available to halt the spread of a deadly communicable disease. These subjects to quarantine must have no symptoms of the disease or be suspicious of having been exposed to the disease, experts said.

“Quarantine” is intended to cover people who ignore the rule to face fines or jail time.

Q: What is a quarantine?

A: A quarantine is an isolation of people who have been exposed to an infectious disease. It is intended to keep those who carry an infectious disease from infecting other people.

Q: Is it a crime to evade a quarantine?

A: Again, laws vary by state and community. A few states have gone to jail time.

Q: Are quarantines effective?

A: They generally help slow the spread of the virus, to decelerate the exponential increase in the number of people who have been infected, and to help scrub public spaces clean. The center of the city is considered a “contaminated zone,” but it is not under quarantine.

Q: Is there any history of quarantine in the United States?

A: Quarantine was implemented now around the globe are the most sweeping since the 1918 influenza pandemic. To date, the United States has no federal quarantine laws, but some states do have similar laws. In 1918, the city of San Francisco was declared a quarantine area.

Q: Could there be broad quarantine measures imposed by China or Italy?

A: The United States government lacks the legal authority to impose the sweeping quarantine measures seen in China, where some 70 million people were confined in the largest single such effort in history. Italy, which has more than a million cases, also has similar laws. In both the United States and China, quarantine is considered a measure of last resort when no preferable means is available to halt the spread of a deadly communicable disease. These subjects to quarantine must have no symptoms of the disease or be suspicious of having been exposed to the disease, experts said.

“Quarantine” an example of the disease. Experts who thought it was in the late 19th and early 20th centuries before medicine stemmed the ferocity with which contagious diseases spread. The very word quarantine is rooted in the Italian words quotanerente and quarantagra, and the word is thought to have been coined in 1630 in Venice to force ship passengers and cargos to wait before landing in the 14th and 15th centuries to try to stave off the plague. Since then, quarantines have often generated tensions between protecting public health versus respecting individual rights.

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BT BY KATH HARPER

How to protect older people from the coronavirus

Amid the uncertainty swirling around the coronav

Dr. Daniel Winetsky, an infectious diseases fellow at Columbia University in New York, said his advice to his own parents, who live across the country in San Francisco, has shifted dramatically. A week ago, he said, he was reassuring them about their safety, even encouraging them to go abroad with a trip they were planning to the Florida Everglades with a small tour group.

Over the weekend, his fears about the pandemic rose, and by Tuesday not only was he telling them not to go, but he also was advising them to reduce to a minimum the number of people they came into contact with. Visits with grand

An elderly woman sits in a room at the Lynn Valley Care Centre seniors facility in North Vancouver, British Columbia, on March 14. Amid the uncertainty swirling around the coronavirus pandemic, some experts recommend that older adults at risk cancel nonessential doctor's appointments, including wellness visits, and instead consider using Telemedicine sessions, if available, as a reasonable substitute.

BY KATIE HAFNER

How to protect older people from the coronavirus

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Despite the fact that the facility had not reported a case of coronavirus, he said, it had been reported in the area.

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All four of us drank out of the same cup, and everybody thought it was safe,” said Eric Winetsky, 80, a retired pediatric re-

searcher who lives in the Seattle area, used to visit his parents often. They failed to notice his report on on March 14. Amid the uncertainty swirling around the coronavirus pandemic, some experts recommend that older adults at risk cancel nonessential doctor’s appointments, including wellness visits, and instead consider using Telemedicine sessions, if available, as a reasonable substitute.

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Parents turn teachers amid virus

BUFFALO, N.Y.

After her sixth-grade son’s school in Buffalo, New York, closed amid the coronavirus outbreak, Roxanne Ojeda-Valentin returned to campus with shopping bags to take home textbooks and weeks’ worth of assignments prepared by teachers.

A single mother with a full-time job, she now joins millions of parents around the country—and the world—suddenly thrust into the role of their children’s primary educators, leaving them scrambling to sift through educational resources and juggle lesson plans with jobs and other responsibilities.

“It’s a really big experiment,” Ojeda-Valentin said as she left the school, her second stop after picking up materials from her fourth-grade daughter’s school.

Even in school districts that are providing remote instruction, the burden falls on families to make long-term plans, telling them few, if any, schools would reopen before summer.

Los Angeles father Filberto Gonzalez’s three children have daily contact with their teachers and one to four hours of work they can do on an existing online platform that supplements classes. But he never thought the arrangement would transform from a stopgap measure to permanent situation.

“The news... was a real shock to a lot of us,” he said. In Portland, Oregon, Katie Arnold’s 7-year-old son has been spending his days in his mother’s office, keeping busy on an iPad and her laptop while she’s managing accounts for a catering company.

Oregon has shut down schools through April 23 and some districts have put optional activities online, though they are not meant to replace the regular curriculum. While her son’s district explores virtual learning, she has been combing the internet and tapping friends for suggestions.

“Scholastic had a bunch of free things and I have a friend who’s a teacher, so I’ve gotten a lot of workbook pages for him to do, just to try to keep him busy,” said Arnold, who also has been using educational websites like ABCmouse.

Arnold is making plans with other parents to teach children in small groups if the closure is extended, and is resigned to the idea that her workdays will be followed by evening school sessions.

“We’ll muster through it,” she said.

Some parents are turning to those with experience homeschooling for guidance, unsure of whether to enforce strict schedules and where to look for academic help.

Amid an influx of interest, the National Home School Association dropped its membership fee from $19 to $10 for access to tip sheets and teaching materials, executive director Allen Weston said.

The online site Outschool saw 20,000 new students enroll during a single weekend in March, compared to the 8,000 who have attended classes since its 2017 launch, CEO Amy Nathoo said.

The company offers live, teacher-led online classes beginning at $15 each, but has also offered free webinars on running online classes through video conferencing.

Child development researcher Jessica Logan and her husband continue to work full-time from home and have been tag-teaming school-related questions from their 8- and 12-year-old children, home from Columbus City Schools in Ohio.

“I see all these people writing out, ‘Here are the six hours we’re going to spend each day doing homework,’ and was like, ‘Not happening in my house,’” she said.

“When am I going to get my work done? I still have my own work to do, so does my husband. Neither of us can take the entire day off to sit with them and do math worksheets or science experiments.”

“All parents are in the same boat,” Logan said.

“Your kid is not going to fall behind if they don’t do these assignments every day.”

Nevertheless, Vancouver, Washington, teacher Renee Collins has committed to keeping not only her own 10- and 8-year-old children on track academically, but two of her friend’s children and a second-grade neighbor as well.

“We’re going to do Monday, Tuesday and Thursday with the kids and then the other days I’ll do individually with my own kids. So we’ll do five days,” she said.

“The one thing that kind of gives a lot of us comfort,” said Collins who teaches middle-school math, “is that it’s not just our state. It’s not even our nation. It’s not just going to be the state of Washington that’s behind. It’s not just going to be my children that are going to be behind. It’s going to be everyone.”

By Carolyn Thompson

All parents are in the same boat. Your kid is not going to fall behind if they don’t do these assignments every day.

Child development researcher Jessica Logan

Katie Arnold left works at her office while her 7-year-old son Rowen Arnold, a first-grader, plays educational games on her iPad in Portland, Ore., on March 17.

Arnold’s 7-year-old son has been spending his days in his mother’s office, keeping busy on an iPad and her laptop while she’s managing accounts for a catering company. In Portland, Oregon, Katie Arnold’s 7-year-old son has been spending his days in his mother’s office, keeping busy on an iPad and her laptop while she’s managing accounts for a catering company. She has been combing the internet and tapping friends for suggestions. Arnold has been using educational websites like ABCmouse. Arnold is making plans with other parents to teach children in small groups if the closure is extended, and is resigned to the idea that her workdays will be followed by evening school sessions. “We’ll muster through it,” she said. Some parents are turning to those with experience homeschooling for guidance, unsure of whether to enforce strict schedules and where to look for academic help. Amid an influx of interest, the National Home School Association dropped its membership fee from $19 to $10 for access to tip sheets and teaching materials, executive director Allen Weston said. The online site Outschool saw 20,000 new students enroll during a single weekend in March, compared to the 8,000 who have attended classes since its 2017 launch, CEO Amy Nathoo said. The company offers live, teacher-led online classes beginning at $15 each, but has also offered free webinars on running online classes through video conferencing. Child development research­er Jessica Logan and her husband continue to work full-time from home and have been tag-teaming school-related questions from their 8- and 12-year-old children, home from Columbus City Schools in Ohio. “I see all these people writing out, ‘Here are the six hours we’re going to spend each day doing homework,’” and was like, “Not happening in my house,” she said. “When am I going to get my work done? I still have my own work to do, so does my husband. Neither of us can take the entire day off to sit with them and do math worksheets or science experiments.” “All parents are in the same boat,” Logan said. “Your kid is not going to fall behind if they don’t do these assignments every day.” Nevertheless, Vancouver, Washington, teacher Renee Collins has committed to keeping not only her own 10- and 8-year-old children on track academically, but two of her friend’s children and a second-grade neighbor as well. “We’re going to do Monday, Tuesday and Thursday with the kids and then the other days I’ll do individually with my own kids. So we’ll do five days,” she said. “The one thing that kind of gives a lot of us comfort,” said Collins who teaches middle-school math, “is that it’s not just our state. It’s not even our nation. It’s not just going to be the state of Washington that’s behind. It’s not just going to be my children that are going to be behind. It’s going to be everyone.”
COVID-19 has become a source of daily conversation. As a caregiver, you may want to learn how to support your child’s development and understanding of the coronavirus.

Jennifer Rodemeyer, manager of the Child Life Program at Nationwide Children’s, offers these suggestions to help you and your child navigate this experience.

Dealing with anxiety associated with COVID-19

Kids are hearing about this new virus at the very time to sit down with your children and discuss what COVID-19 is, what it means that when people are social distancing. This means you should be asked to practice hand-washing. Bring your hands clean. As a caregiver, hang a sign on your front door such as: “Welcome home. Please remember to wash your hands.” When kids come into the house, help them understand the importance of hand-washing when entering your home; before meals; and after blowing their noses, coughing or sneezing. When events are being canceled, share with your children how this will prevent the spread of COVID-19.

Young children may see COVID-19 as if everyone is family vacation, school, or work. As a result of something they may be concerned. The family can also encourage, the need to stay at home. If children the same age, encourage your child to ask you questions. Remind your child that you and your children will have friends and continue to maintain and build relationships with them. It is not safe to have a virtual play date with your child. Remind your kids that they also can bring in people that are responsible for your child. Remind them that you are sharing with your child that you are going to be honest with them. As New information is provided regarding COVID-19, you can be encouraged to let your child know that you are sharing with your child that you are going to be honest with them. As New information is provided regarding COVID-19, you can be encouraged to let your child know that you are sharing with your child that you are going to be honest with them.

Establishing and maintaining routines help kids predict what is planned, allowing them to feel control in situations. Use a white board or paper to display a daily schedule at home. Explain if social distancing continues to be encouraged, the new normal is going to be staying at home. Family play continues. Craft and other activities. Virtual play dates and outdoor time, play, household responsibilities, etc. Play, play, play. Kids and learn process through play. A family, taking advantage of being at home to stay and practice social distancing, and use this time in interact. Play games, provide toys, complete puzzles, read, listen, books, read and play music, dance, take family hikes, and buy an art project or toy. In case of being stuck at home may seem out of the ordinary, help kids see themselves together as an opportunity for your family to make great memories together.

Provide opportunities to connect with loved ones and friends and use electronic devices. During social isolation, your child, grandparents, aunts and uncles, cousins and friends normally would be interacting with, or connect with them via FaceTime or similar apps. This will help children not feel as isolated as they continue to maintain and build relationships with them. It is not safe to have a virtual play date with your child. Remind your kids that they also can bring in people that are responsible for your child. Remind them that you are sharing with your child that you are going to be honest with them. As New information is provided regarding COVID-19, you can be encouraged to let your child know that you are sharing with your child that you are going to be honest with them.

It is important to be honest with your baby, or child, as they may be wondering how to replace those favorite toys and household responsibilities. Instead of giving them trash, encourage your children to define what they want to keep them post and to replace them. As new information changes or new information is presented regarding COVID-19, you can be encouraged to let your child know that you are sharing with your child that you are going to be honest with them.

As a caregiver, you may want to share the truth about COVID-19 with your child. As the world is working it through by staying at home and practice social distancing, and use this time in inter connect with others. Pretend there is a bike separating you and the person you are standing by. Keep that distance from people other than your family while social distancing is needed. Instead of giving high-fives, bump your hands to people outside your family you can smile and wave hello. Discontinue your child’s access to news and social media regarding COVID-19. Explain to your children that there are many conflicting reports regarding the coronavirus. As a caregiver, use reliable sources such as the Centers for Disease Control and Prevention, the World Health Organization, and USA Today. As a caregiver, you may not appear to be watching, they may be listening and interpreting the information they are hearing. Explain to your children the importance of good hygiene and to wash their hands frequently. Remind your children to wash their hands and practice hand-washing together. Show them how to “create tiny bubbles” by rubbing their hands back and forth and how to get the soap between all spaces, even to the spaces in your mouth. It helps to encourage your children to sing an entire song such as “Happy Birthday” twice during hand washing so they can be sure they have washed for the time they need to get their hands clean. As a caregiver, hang a sign on your front door such as: “Welcome home. Please remember to wash your hands.” When kids come into the house, help them understand the importance of hand-washing when entering your home; before meals; and after blowing their noses, coughing or sneezing. When events are being canceled, share with your children how this will prevent the spread of COVID-19.

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The playground at Lowell Elementary School in Tacoma, Wash., sits empty after the school was closed Tuesday. When you’re talking to children about the novel coronavirus, child psychology experts’ advice is to be reassuring. Focus on proactive steps and do research to truthfully answer children’s questions.

BY CLAUDIA LASSER
Associated Press

It was a routine game of schoolyard tag—except the children had dubbed the game “coronavirus.” The kids ran around and chased each other, but instead of “it,” they “caught” the virus.

Children like the ones a reporter recently spoke with a few blocks away at a school in Washington, D.C., are becoming more aware of the coronavirus—though they may not fully understand it or know how seriously to take it—as it begins to affect their daily lives with school closures and event cancellations, restrictions on travel, and the NBA nixing the rest of its season.

Many parents are now deciding how to talk to their children about the virus. Some said they’re checking in daily, while others worry talking about it could make their kids more anxious or fearful.

“We talk about it a lot. I watch the news every morning, and they’re always watching it, too,” said Lecia Simon, mother of Clara, 10, and Jane, 6, in Philadelphia.

Nicole Poponi, a parent of twins from Norton, Massachusetts, she and her husband, Thom Daly, decided they wanted to talk with their 8-year-old daughters, Kennedy, 6, and Lily, 4, about the virus.

“We felt like it was important to tell them even if they’re younger,” said daughter Ally, 14.

“I think that’s helped a lot,” she added.

Parents should explain that measures like wearing face masks and closing schools are preventive and temporary, Howard said. She urged them to take a page from Mister Rogers, who taught kids to “focus on the helpers”—what doctors, teachers, parents and scientists are doing to keep them safe.

“Telling them that doctors are there, nurses are there—be reassured that’s the state of affairs,” she said.

Parents should not be viewed as experts, but instead of being “it,” as it was spreading freely from person to person, as it was in the outbreak’s early days in China.

“Be calm and honest, experts say.”

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TALKING TO KIDS ABOUT VIRUS?
BE CALM AND HONEST, EXPERTS SAY

BY MALCOLM HEALY AND JASON CHEN
Los Angeles Times

The coronavirus outbreak that has sickened at least 175,000 people on six continents and caused nearly 4,600 deaths is now an official global pandemic. But its spread doesn’t mean we should give up on trying to contain it, health experts say.

There are too many lives at risk to prevent the virus from spreading from person to person, as it was in the outbreak’s early days in China. That’s why the advice to “flatten the curve” is to spread out the inevitable infections so that the healthcare system isn’t overwhelmed with patients.

Public health officials have a name for this: Flattening the curve.

The curve they’re talking about plots the number of infections over time. In the beginning of an outbreak, there are just a few. As the virus spreads, the number of cases can rise. At some point, when there aren’t enough hospitals or medical resources for the patients to attack, the number of new cases will fall. Eventually, it will dwindle to zero.

If you picture the curve, it looks like a tall mountain peak. But with containment measures, it can be squashed into a wide hill.

The outbreak will take longer to run its course. But if the strategy works, the number of people who are sick at any given time will be greatly reduced. Ideally, it will fall below the threshold that would swamp hospitals, augment care clinics and medical offices, said Dr. Calvin Koen, chair of the emergency medicine residency program at Johns Hopkins University.

That’s why public health officials will continue to track the number of recording and tracking new infections, ensuring that infected individuals stay home, and guarding the borders against the arrival of new cases.

At the same time, they’ll expand their mitigation efforts. The means keeping people away from each other by canceling large gatherings, closing schools and encouraging people to work from home.

In some ways, mitigation is just containment on a larger scale. Instead of focusing on a single infected individual, officials target clusters of infected people. Buildings, city blocks or whole neighborhoods might be identified as infected, then walled off. That’s why New York Gov. Andrew Cuomo declared a state of emergency Thursday, and the National Guard to New Rochelle to enforce a “containment zone” around a community with more than 100 affected residents.

Think of the coronavirus outbreak like a fire, Kelen said.

In one scenario, it’s “a red hot forest fire that just rips through all of a sudden and everything burns down,” he said. In another, it’s “a slow spreading fire that might over time burn everything down but gives firefighters a reason- able chance should they come up with tools to fight the whole thing.”

The World Health Organization’s declaration of a coronavirus pandemic should not be viewed as an admission of defeat, said Michael Osterholm, an infectious disease ex- pert at the University of Minnesota. Rather, it should be seen as a rallying- cry to impede the virus’ progress.

“Time is of the essence. This is crucial. Even when this Round 1 is over, pushing them into the future could give us some advantages that we might not have otherwise,” he said.

The virus has been part of her family’s daily routine for the past week.

“In our family we all talk about it, it’s pretty open and so they’re not necessarily scared,” said daughter Ally, 14.

“And I think that’s helped a lot.”

Parents should explain that measures like wearing face masks and closing schools are preventive and temporary, Howard said. She urged them to take a page from Mister Rogers, who taught kids to “focus on the helpers”—what doctors, teachers, parents and scientists are doing to keep them safe.

Whatever the conversation looks like, Howard said, parents should not be seen as experts. The world’s scientists wage daily discussion.

“Parents and scientists are doing to keep them safe.”

Whether they have questions about the virus or not, parents and scientists are doing to keep them safe.

“Parents and scientists are doing to keep them safe.”

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Parents and scientists are doing to keep them safe.
Like many people, this reporter is holed up at home with kids remotely — with the kids in the background. The they-terverse is full of people juggling work and home life, and their small humans have already turned on them, there are endless lists of things for kids to do — with each child’s attention span lasting longer than before. And if they’re not already, they’re less likely to bend together as one. Our house is a madhouse, but the kids are up to plenty of and are doing well. Dad says, “It was good to be away from the political.”

“Together, they’ll take a break from the outbreaks and looks like they’re in a feature of ‘The Usual Suspects’!”

“… This reporter comes from a family of McGarrett fans from the ‘Mission: Impossible’ show, worth Betty and they’re doing well. Here’s hoping they’re in the know, for the Social Distancing Film Festival.”

A new stand in MilVra, Calif., displays the front page of the San Francisco Chronicle on Tuesday, March 17.
Why you should stop obsessing about coronavirus news and how to do it

BY ALISON BOWEN

CHICAGO

As more Americans are encouraged to practice social distancing and to work from home, less person-to-person contact can negatively impact mental wellness.

Deciding whether to visit loved ones over the weekend or leave the house may be a real concern since President Donald Trump declared a national emergency on Thursday, March 12.

Amanda Graham, an assistant professor of medical anthropology at Northeastern University

in Boston, said it’s hard to live in a life of uncertainty.

“The most important thing we can do is talk to those with those kinds of decisions, and whether that be with loved ones,” she said.

“These kinds of moments can lead to... waves of ups and downs of emotions.”

Joe Sislow, a Chicago resident, said he and his wife, Lori Gentile, have been especially worried and anxious about whether to visit her mother in northwest Indiana.

“She’s totally weighing the calculus on this,” he said. “Because odds are in a week, or two weeks, it’s going to be worse.”

With schools, bars and restaurants closing, so much feels in flux. Gentile runs a comic book store, Amazing Fantasy, in Franklins, Ill., that she might have to close for a while, said Sislow.

“She’ll probably go crazy,” she’d been doing for that 30 years,” he said.

The coronavirus pan-

The agency also advised avoiding excessive exposure to news coverage and encouraged deep breaths, stretching and meditation. To try to distract and exercise regularly. There are many online resources for fitness, including YouTube videos for yoga, Pilates and Zumba, for example, or Daru- bee, which provides a host of in-home workout programs. You can also dig through your own photos of exercise, and you might also consider buying or renting your own gym equipment.

When people are preoccupied with mental health concerns they should continue their treatment plans, the CDC suggested.

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An Alcoholic's Anonymous sobriety chip lays in the palm of a person's hand.

"We're taught resilience," said Manelius, "and that same sort of... you know, that same..."

"We're taught to survive," she said. "We're taught..."

"...to survive," Manelius continued. "We're taught..."

Coronavirus guide

RECOVERY COMMUNITY URGES: EVEN IF YOU SKIP 12-STEP MEETINGS, STAY CONNECTED

BY MARGA GERBER
Los Angeles Times

LOUISIANA

It was time for the coveted sobriety chips, so Grace snapped up a pair of plastic gloves and kept a bit of distance as she doled out medals to members who had gone 30, 60 and 90 days without a drink.

Normally, she hugs the people who come in here in this church on the Westside, but on Thursday she offered them a small nautical love instead:

"A can't totally close its doors," said Grace, a 49-year-old yoga teacher, who asked to be identified by her middle name to respect the group's anonymity pledge. "We don't know when someone's going to call in and-desperations..."

She started coming to the rooms, as she calls the gatherings, two decades ago and now tries to attend twice or three meetings a week, a tiny sampling of the more than 350 groups that meet every day in LA.

They restored her life, she said, and she can't help but think about others like her, who at this very moment, were considering whether they had the courage to attend their first meeting. What if, like truly, we're headed toward lockdowns?

These are the questions running through the minds of members in the recovery community this week.

As the verdict, "Cancel Everything," began to trend on Twitter and people quipped online about how they planned to self-quarantine with three bottles of tequila, some people wondered what would happen to the 12-step meetings they rely on.

"AA can't totally close its doors," said Rick Manelius, an active member of a 12-step program. "We have to keep going."

"Anyone who's on the recovery train knows that newbies."

He fears, that will set up many in the recovery community to survive.

"You don't want someone to go in to the recovery community..."

For Grace, the yoga teacher, it was comforting to see others start to brainstorm and prepare.

She'd been sharing the coronavirus' path closely since January, keeping in touch with a friend who works as an intensive care unit nurse in Seattle.

"They're really strapped," Grace said.

She had started to feel a bit disheartened, she said, as she read horror stories from Italy and then looked around Los Angeles and saw most people acting rather blasé. Well, either that, she said, or behaving as if Armageddon had already set in and they needed to ransack Trader Joe's immediately.

"There didn't seem to be a lot of being."

So, during her Alcoholic's Anonymous meeting Thursday, Grace said she decided to make a bit of a show of her heightened precautions. After putting on her gloves, she gave each member who got a sobriety chip a bonus gift: an antibacterial wipe.

"We're teaching them the staying times," she said, the group, which was about half the size as usual.

Grace, who was thinking a lot about new- comer ward lockdowns and how these next few days could be fragile for them. She thought back to the weeks before she finally went to her first meeting – back to when she was convinced she was terminally ill.

"You feel like you're in a death and despair, and..."

"...and this comes, and you go, 'O, I'm not only.'"

These are stressful and unnerving times and fear can be such a big trigger for addicts. For some, Grace said, this will be a breaking point, and for that reason, she's confident that the recovery community will stay open. But she's hopeful, too, that members will adapt by upping the frequency of their group text conversations or hosting meetings on Google Hangouts.

"I think what's been said, the recovery community is that moment than almost anyone.

"We're taught resilience," she said. "We've taught that way through and that we'll figure it out one day at a step by step."

People everywhere also have a lot of practice channeling their fears and angry into service, she said. If it's the 12 days of sobriety, the mantra goes, yesterday, you're a person who has one day, and if it's the 49 days of sobriety, you can help the person who has one day.

Right now, she said, the world could face another wave of the virus and she knows well.

We need to see one another and survive.

For those who are hard of hearing, there's Wednesday Text Chat, which conducts meetings via Zoom. There's the group a Safe Place meeting for members of the LGBTQ community, a Spanish-speaking group for people who are hard of hearing, and if you still love a good cigar.

"For Grace, the yoga teacher, it was comforting to see others start to brainstorm and prepare. She'd been sharing the coronavirus' path closely since January, keeping in touch with a friend who works as an intensive care unit nurse in Seattle. The recovery community is that moment than almost anyone.

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Right now, she said, the world could face another wave of the virus and she knows well.
Many workers qualify for paid leave under new coronavirus law

BY CLAIRE CAIN MILLER  New York Times

The coronavirus emergency relief package, which became law Wednesday, gives many American workers paid leave if they need to take time off work because of the coronavirus. It is the first time the United States has had a federal mandate to provide paid leave, and includes people who don’t typically get such benefits, like part-time and gig economy workers. But the measure excludes at least half of private-sector workers – are included, but the labor department could exempt small businesses if providing leave would put them out of business. Employees can also decline to give leave to workers on the front lines of the clinic health care providers and emergency responders.

ARE PART-TIME AND SELF-EMPLOYED WORKERS ELIGIBLE? Yes. Part-time workers will be paid the amount they typically earn in a two-week period. People who are self-employed – including gig economy workers like Uber drivers and Instacart shoppers – can also receive paid leave, assuming they pay taxes. They should calculate their average daily self-employment income for the year, then claim the amount they take as a tax credit (they can reduce their estimated quarterly tax payments in the meantime).

HOW MUCH MONEY DO I GET WHILE ON LEAVE? If you are sick or seeking care for yourself, you earn the full amount you are usually paid, up to a maximum of $1,000 a day. If you are caring for a sick family member or a child whose school or day care is closed, you earn two-thirds of your usual pay, up to a daily limit of $200.

HOW DO I GO ABOUT TAKING LEAVE? The Labor Department must issue guidelines by April 2 to assist employers and workers in calculating how much paid leave their employees should get. After that, you should be able to simply notify your employer, take the leave and get paid the amount specified by the law.

WHAT WILL BUSINESSES AND NONPROFITS AFFORD TO PAY WORKERS ON LEAVE? They will be reimbursed for the full amount within three months, in the form of a payroll tax credit. (The Trump administration has said it will advance the money earlier for employers that can’t wait that long.) The reimbursement will also cover the employer’s contribution to health insurance premiums during the leave. It’s fully refundable, which means that if the amount employers pay workers who take leave is larger than what they owe in taxes, the government will send them a check for the remainder. (That goes for self-employed and gig economy workers, too.)

WHAT IF I WORK AT A BIG COMPANY? You can take any sick leave your company already offers. Eighty-nine percent of employers in these companies have paid sick leave, but rarely as long as two weeks, and low-wage workers are least likely to have it. (Some big companies, like Walmart and Target, have added paid sick leave for the coronavirus.) Under a 1993 law, you’re eligible for 12 weeks of unpaid family and medical leave as long as your company has at least 50 employees, you’ve worked there for a year, and you meet other qualifications.

WHY ARE BIG COMPANIES EXCLUDED? Congressional Republicans and the Trump administration said excluding large companies was a prerequisite to passing the bill, according to people briefed on the discussions. They also asked for other limits on who could receive leave. For example, the original bill passed by the House would have given workers 12 weeks of paid leave to care for themselves or sick family members, instead of two. Paid leave was the most contentious part of the bill, congressional aides said.


IS THE GOVERNMENT GOING TO GIVE WORKERS OTHER AID? Yes. This package included other types of aid, including unemployment benefits, free coronavirus testing and food and medical aid. The Trump administration has asked Congress for $1 trillion to make direct payments to American taxpayers and to small businesses. And lawmakers are introducing other legislation, including a Democrat plan for more paid leave.
Cybercriminals seek profit in coronavirus

WASHINGTON

An email seemingly from the U.S. Centers for Disease Control and Prevention warns of new coronavirus infections and urges readers to click on a link to find out more, Vinod Raymond said in an interview with SlateLine. “It’s new. It’s unknown. When there is something unknown, it’s alarming.”

In Connecticut, information technology officials have asked the state’s emergency management department to spread the word about phishing scams related to coronavirus. Chief Information Officer Mark Picciarelli said, “It’s alarming to us, to be honest.”

And in Virginia, state IT security officials are flagging key words in emails related to coronavirus that are coming from outside parties that could be phishing scams. Chief Information Officer Michael DeSanti said, “A lot of these malicious parties are trying to play on your fears and make you have a rash decision.”

“Thieves are saying that there is some immediate action you’re going to have to take to protect your life and safety.”

Cybercriminals often prey on people during natural disasters or crises, exploiting uncertainty and fear. But with the difference coronavirus, cyber experts say, is that the information is constantly changing and is something that people are expected to be issued for weeks—or even months.

Scammers already are selling bogus products online, offering vaccines that claim they will cure the coronavirus. The CDC warns, “If you are contacted about vaccinations for the patient, the Federal Bureau of Investigation has warned.”

Hackers, too, have gotten ten in on the action, aiming to steal victims’ user names and passwords. “They’re saying that there is some immediate action you’re going to have to take to protect your life and safety.”

In one phishing campaign, criminals sent emails that look like they came from the World Health Organization, asking people to click on a malicious link to view coronavirus safety measures. “We’re using them to exploit this highly topical thing called coronavirus,” said Ekram Ahmed, spokesman for Check Point, a global cybersecurity company. “It’s not uncommon for certain events to be exploited. But we find it far exceeds anything else, in terms of material damage.”

“Over five weeks, it’s into the millions of messages,” Ahmed said.

People most likely are clicking at an “insanely high rate,” Kalember added, because the volume of attacks is spiking, and people wouldn’t bother if it wasn’t affecting them.

State and local governments are on the lookout for new threats, as cybercriminals know that a panic can lead to ransom-ware attacks, according to Kalember.

“Ransomware typically spreads through phishing campaigns, hitting both governmental computer systems and holding hostage until officials pay a ransom or restore the system on their own.”

Last year, there were a lot of attacks on state and local governments according to global cyber-technology company Em- sisisoft.

“Many state and local governments should be paying more attention to these issues,” Kalember said, “and making sure that they know that coronavirus commu- nications aren’t going to come in a tip file or Word document and expect people to click on it.”

“People need to be thinking at things skeptically.”

Data in Hong Kong apparently tested positive for COVID-19, but as the dog had no symptoms, medical and veterinary experts believe the test results could be the result of environmental expo- sure, contamination, cross- infection from other viruses or testing issues.

The Centers for Disease Control, www.cdc.gov, World Health Organization, www.who.int, and World Small Animal Veterinary Association, www.wsava.org, are good places to go for information on the virus. If you are diagnosed with COVID-19, the CDC recommends you minimize contact with your human and animal companions. Identify a family member or friend who can care for your pet. Have treats, food and extra supplies, including medications, on hand for quick movement of the COVID-19 patient. Keep food, medicine and other supplies recommended. A pet first-aid kit is also good to have if your pet is on any medications.

Ensure your animal’s vaccines are up-to-date in case boarding becomes necessary. Document all medical commu- nications with dosages and administration directions, including prescriptions if a refill becomes necessary. Pets should have identification such as an ID tag on their collar and a microchip. But remember, a microchip is only as good as the contact information registered to it.

Follow CDC and WHO guidelines. Wash your hands with soap and wa- ter for the time it takes to sing “Happy Birthday” twice, avoid touching your face, stay home if you are sick, cough or sneeze into your elbow, wash your hands before and after handling pets.”

Pet advocates give tips on keeping pets safe from COVID-19

BY JENNI BERGAL

The Mercury News

With the nation focused on COVID-19, the novel coronavirus that has infected more than 500,000 and killed almost 30,000 around the world, many have become nerverous about the well-being of our beloved pets. The East Bay SPCA, now 75 years old, says Eleanor Bicker, execu- tive director, a co-founder of a Bissau’s Animal Rescue Foundation in Walnut Creek, is that there is no evidence that animals can spread the disease to humans. There is also no evidence that pets are becoming infected, although it’s wise to keep your pets away from people who have contracted CO- VID-19. A dog in Hong Kong apparently tested positive for COVID-19, but as the dog had no symptoms, medical and veterinary experts believe the test results could be the result of environmental exposure, contamination, cross-infection from other viruses or testing issues.

The Centers for Disease Control, www.cdc.gov, World Health Organization, www.who.int, and World Small Animal Veterinary Association, www.wsava.org, are good places to go for information on the virus. If you are diagnosed with COVID-19, the CDC recommends you minimize contact with your human and animal companions. Identify a family member or friend who can care for your pet. Have treats, food and extra supplies, including medications, on hand for quick movement of the COVID-19 patient. Keep food, medicine and other supplies recommended. A pet first-aid kit is also good to have if your pet is on any medications.

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Pets don’t need masks. If your companion animal has been exposed to someone diagnosed with COVID-19, contact your pet’s veterinarian for advice. They will contact state veterinarians and direct you from there. If you are told to bring your pet for treatment, call first so they can prepare isolation areas.

Cybercriminals seek profit in coronavirus

BY JOAN MORRIS

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I'm looking at you, Lauren, Will, Mary and the older gentleman who usually recites prayers while running and yelling, “God bless you, girl!” every time I see you. (I'm looking at you, Lauren, Will, Mary and the older gentleman who usually recites prayers while running and yelling, “God bless you, girl!” every time I see you.)

Running From Coronavirus

A back-to-basics exercise boom

BY TALYA MINSBERG
New York Times

All road races have been canceled. There was no Tokyo Marathon, no New York Half Marathon. There will be no marathons this April in Boston, London or Northern California.

The racing world, like the rest of the world, is on hold. But you wouldn’t know it by looking at public parks, streets and trails across the United States. A running boom is taking off.

With little else to do — no spinning classes, lap swim hours, boot camps or barre — a lot of people are turning to (or getting back to) running.

It’s the perfect spot for a pandemic. All you need is a pair of shoes and a 6-foot buffer from the next person. (Some New York City paths, however, have gotten crowded with runners and walkers, making social distancing even there a challenge.)

Gyms and coronavirus: what are the risks?

It’s not the kind of thing you think about while you’re in a child’s pose in a yoga class, when your nose is close to the mat, but after hearing how you should stop touching your face to guard against the coronavirus, you might wonder: What are the risks of transmission while working out a gym?

BY AMRES OSBA
New York Times

The spread of the coronavirus could make even the most ardent gym rats worry out about picking up viruses and germs. There’s a lower risk of picking up the coronavirus at a gym or health club than at a church service, for example, said Dr. David Thomas, a professor of medicine and director of the Division of Infectious Diseases at Johns Hopkins University School of Medicine. By comparison, church services may include shaking hands and being in close proximity to people.

But it’s a common community where there have been cases of the coronavirus, “that’s, perhaps, a time to be more cautious with all types of exposure,” said Dr. Thomas.

Sweat cannot transmit the virus but high-contact surfaces, such as barbells, can pose a problem, he said.

Scientists are still figuring out how the virus typically spreads but have provided some guidance on how it seems to be transmitted. A study of other coronaviruses found they remained on metal, glass and plastic for two to three hours.

Certain objects, like handles and doorknobs, are “disproportionately being touched by hands, and those are the surfaces most likely to have viruses for that reason,” Thomas said.

GYMS ARE UPKEEPING CLEANINGS

Yoga Journal, says she’s seen a direct impact from all the hysteria in the area on both attendance and business.

Equine, the luxury fitness club brand, has sent notices to members, reassuring them that additional steps are being taken during the peak flu season and anew growing concerns about the coronavirus.

The additional steps include disinfecting all club areas with a hospital-grade solution three times a day, reminding people to stay home if they are sick and asking instructors to eliminate skin-to-skin contact, like hands-on adjustments during yoga, a spokesperson said.

Brian Cooper, chief executive of YogaWorks, sent an email to the company’s clients, reassuring them that it was stepping up its cleaning protocols to “keep our facilities a safe and welcoming environment for all students and staff.”

David Carney, president of OrangeTheory Fitness, listed precautions in an email on Thursday. “Wipe down your equipment after every block, and don’t hesitate to request a new wipe whenever you need to,” he wrote.

WHAT YOU CAN DO TO PROTECT YOURSELF

Do you know what’s in those nonlinear spray bottles at a gym that you’ve supposed to use to wipe down your machine, mat and equipment? If you’re not sure, ask staff members what’s in the bottle or take your own wipes to the gym. “I’ll probably bring my own wipes,” Thomas said. “I’m Saddled household bleach solutions, alcohol solutions with at least 70% alcohol and several common household disinfectants should be effective against the coronavirus, according to the Centers for Disease Control and Prevention. The Environmental Protection Agency released a list of disinfectants against the virus in addition to avoiding frequently handled machines and equipment, it’s recommended, as always, that you wash your hands often and don’t touch your face.

And if you’re feeling sick, stay home.

“This is mostly about how you keep from getting sick at a gym, but please don’t go to the gym if you feel sick,” Thomas said. “Don’t give it to other people.”

Making sure to stay healthy and give the staff the right tools to do their job.

New York City paths, however, have gotten crowded with runners and walkers, making social distancing even there a challenge.

There’s an unspoken language among runners – one that’s perfectly communicated outside the buffer zone recommended by the Centers for Disease Control and Prevention.

The subtle acknowledgment transcends language and borders and athleticism.

Run in any country, in any park, at any time, spot another runner, and chances are you’ll greet each other with the slightest nod. You’re out here too.

Sometimes that nod gives way to a wave. When the weather is treacherous, sometimes you’ll get a thumbs up.

You’re still out here too.

In this space, we’ve found more people hit their parks, streets and trails, make sure to nod at your fellow runner.

We’re all still out here.

RUNNING FROM CORONAVIRUS

PHOTO: ASHLEY GILBERTSON
NYT

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If you’re taking your temperature, 98.6 isn’t the normal body temperature anymore

BY KATIE THAYER

Chicago

For centuries, 98.6 degrees Fahrenheit was said to be the average, normal body temperature. It’s not.

More recently, researchers have known normal body temperature is actually lower than 98.6 and can vary by gender, size, age, time of day and other factors. But now there’s also evidence that shows we’ve been cooling off since the 19th century when 98.6 was established as “normal.”

As the coronavirus, dubbed COVID-19, continues to spread, temperature checks are necessary for those feeling ill, public health officials say. Fever, along with coughing and shortness of breath, make up the symptoms of the virus, according to the Centers for Disease Control and Prevention. Research published in January in eLife, shows body temperature has not only dropped since German physician Carl Reinhold August Wunderlich’s study in 1851 established the average body temperature as 98.6 degrees, but it has also dropped since the 1970s. The findings indicate that Americans’ average, normal body temperature has dropped about 0.05 degrees Fahrenheit per decade, with their birth year.

“People are stuck on the 98.6 number, but that number has always been wrong,” said Dr. Julie Parsonnet, one of the authors of the study and professor of medicine at Stanford University. “There’s never been a real number because people vary.”

But Parsonnet’s research indicates there are still unknowns when it comes to the continued decrease in body temperature.

In the study, Parsonnet and other researchers looked at the temperatures of three groups: data from a study that recorded Civil War veterans’ temperatures from the mid-1800s through 1930, more recent data from the 1970s recorded by the Centers for Disease Control, and temperatures of patients visiting Stanford health clinics from 2007 to 2017.

The data showed that the body temperature of men born in the 2000s is about 1.06 degrees Fahrenheit lower than men born in the early 1800s. And the body temperature of women born in the 2000s is on average 0.58 degrees Fahrenheit lower than women born in the 1890s.

“Meaning, ‘It’s not just an ancient change,’” Parsonnet said, indicating previous theories that advancements in thermometers or means of calculating research data are not the only possible explanations for the change.

“It’s unclear what exactly is causing the continued decline, Parsonnet said, or what it could mean moving forward. Some factors could be that people have grown taller and heavier, and that their metabolic rates have slowed. And modern medicine’s elimination of certain...
MUSICAL THERAPY

Shut inside? Open your window and start singing. You’ll feel better

BY GLENN WHIPP
Los Angeles Times

You may have seen those videos of quarantined Italians, serenading each other from the balconies of their apartment buildings, snapshots of isolated people reaching for a connection. They’re singing local anthems, breaking out the folk song “Volare,” doing the Macarena (and changing the refrain to “Hey, Quarantine!”) and highlighting why more households here in the States need to have tambourines handy in the event of a global pandemic.

Watching these displays of solidarity, shared on social media, has been a balm in these times of social distancing, inspiring people throughout Europe to follow suit. Italians singing “tell me what it is which makes us feel like we’re together,” even when we’re apart, which makes us feel like singing “tell me what it is which makes us feel like we’re together,” which is probably just a matter of time. And my microphone is ready.

I have no interest in knitting. Same with sewing, embroidery, crocheting. I’m bored at anything involving illustrations, as those who have suffered trying to decipher my awful draw-ful doodles know all too well.

But I do excel in one area of crafting: making music playlists. And, lately, with the rapidly evolving anxiety surrounding the coronavirus pandemic being almost impossible to escape, I’ve become a little obsessive about making these playlists, paying particular attention to songs I know by heart and can sing along with. As much as I love Frank Ocean and HAIM and Tame Impala, what I really need right now is to bolt out the comfort food music of my youth.

One reason singing feels so good is that it releases endorphins, neurochemicals similar to morphine that bring about feelings of euphoria and general well-being. Exercise releases endorphins too, but since the gyms are currently closed and we’re spending all our time curled up on the sofa, freaking out (i.e. “working from home”), we’re not working out as much as we might like.

Singing also releases oxytocin, a hormone that can alleviate anxiety, stress and depression, the holy trinity presiding over these uncertain times.

Now, these hormones and endorphins are increased when you sing together, which is probably one reason I kept going to church long after being hosed by doctors over doctrine. The death of my father devastated me, singing “How Great Thou Art” with a hundred other people at his funeral lifted my spirits.

But you can get these endorphins singing alone too, and you can hear them being released in trickles listening to Elvis Presley’s last recordings, made at Graceland in his man cave Jungle Room. Drug-addled and crippled by self-loathing, the simple act of singing buoyed the King’s spirits. These aren’t the Sun Sessions, but it’s Elvis lauding in the majesty of his own voice and, yes, since you’re asking, I have a levitation Elvis Spotify playlist, thank you very much, because “Patch It Up” and “I Just Can’t Help Believin’” are supremely satisfying singalongs.

And though Lana Del Rey might not be a good standard bearer for what I’m about to communicate, singing can also be a form of exercise, working your lungs, strengthening your diaphragm and stimulating the circulation needed if you’re going to try to emulate, say, Beyonce belting out “It’s going to be alright with the obvious choice” “Ha- in”...

What you also might intuit while performing is that, in the process of lowering your anxiety levels and dampening your blood pressure, you’re also, according to scientific studies, boosting your immune system, a line of defense we’re all thinking about right now. So, yes, that’s why I’m compulsively churning through Spotify right now, latcheting onto anything that will lift my spirits. Some of these playlists have been designed more to soothe my soul (Sade: “In the middle of madness, hold on”) Others have been pure exercises in nostalgia, recreating my mother’s love for breezy Burt Bacharach... which led me to “I Say a Little Prayer...” which then prompted an immersion into Aretha Franklin. And though I can’t come within a country mile of her incomparable voice, I do know that singing along with her definitive version of “I Say a Little Prayer” helps me cope. I’m sure if I’ll be my most-played song of the year.

So that’s what I’m doing right now. And you can too. Find the songs you know by heart. Find the songs that help your heart. And sing. Sing out loud. Sing out strong. OK, yes, that’s a morse of advice from an old Carpenters song, and not one that’s aged particularly well for many reasons, one of them being that it also instructs you to “sing of good things, not bad” and to “sing of happy, not sad.” Forget that. Sing whatever the hell you want. And make sure the window’s open. The neighbors will be happy to know you’re OK.
Seven ways to experience live music without ever leaving your couch

BY RANDALL ROBERTS

In September, the experimental rock duo duo 100 gecs performed a new track on a gathered pose of avatars inside the video game Minecraft. Part of an event called the Mine Gala, it was organized and promoted by a team of real-life creators via an “independent virtual events platform” called Open Pit.

That charity event to the New York art event the Met Gala, the Mine Gala offered many of the amenities familiar to those at an outdoor festival: a VIP area to pay for access; the freedom to explore the site; and a feeling of belonging to a larger community; and the chance to hear artists feeling of being part of something bigger than themselves.

Even if they don’t scratch modes of self-expression.

The website features more than 1,000 archival performances, radio programs, podcasts, artist interviews and more.

For a more intimate experience, those looking to pay for access; the freedom to explore the site; and a feeling of belonging to a larger community; and the chance to hear artists feeling of being part of something bigger than themselves.

The pitch was enough to convince another participant in the thread on the Open Pit forum to try it and wrote, “I expected to just be watching alone at home, or silently with others around me. I didn’t really think of a higher level of interaction on offer, nor how open our world would be to interact with strangers creating. Me and the experience you can change seats to move closer to someone, or scroll through an index of people who are currently wearing your music. NextVR and MelodyVR, Oculus and a variety of headsets that allow view-ers to present themselves in possible reality.

The online concert streaming market has exploded in recent years. Online concerts that shut up the virtual reality. NextVR and MelodyVR, Oculus and a variety of headsets that allow viewers to present themselves in possible reality.

The company Wave hosts daily VR concerts. As one attendee wrote on a VR site, “I expected to just be watching alone at home, or silently with others around me. I didn’t really think of a higher level of interaction on offer, nor how open our world would be to interact with strangers creating. Me and the experience you can change seats to move closer to someone, or scroll through an index of people who are currently wearing your music. NextVR and MelodyVR, Oculus and a variety of headsets that allow viewers to present themselves in possible reality.

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reduce the heat and cook a low boil until fork-tender, 

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Shepherd’s Pie

Yield: 6 servings

5 tablespoons unsalted butter

3 large Idaho potatoes (about 2 pounds), peeled and cut into 1-inch cubes

2 teaspoons salt

1 cup milk

1 cup heavy cream

2 teaspoons freshly ground black pepper

1 tablespoon vegetable oil

2 teaspoons minced garlic

2 cups chopped green peas or green beans

1 cup chopped carrots

1 tablespoon minced fresh parsley

1⁄2 cup reduced-sodium vegetable broth

BAM! 

1 cup green peas, fresh or frozen (if frozen, do not thaw)

2 tablespoons chopped fresh chives

1 tablespoon chopped fresh parsley

1 cup grated sharp Cheddar cheese

Freeze your food to keep your cooking fresh some

freeze

The oil protects their flavor and

and preserves them for future use.

When your pasta or tomato sauce is ready, you can pop these into the freezer or

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Pull-Pork
Serves 10–12

1 cup vegetable oil
1 pound lean pork butt or shoulder, cut into 1-inch pieces
2 teaspoons salt
1 teaspoon black pepper
1 teaspoon cumin powder
8 ounces Spanish chorizo sausage, chopped into bite-sized pieces
3 pounds white onions, chopped
14-ounce can chopped or crushed tomatoes
1½ teaspoons cumin powder
1 teaspoon oregano
1 teaspoon garlic powder
14.5-ounce can diced tomatoes
¼ cup vegetable oil
1½ teaspoons salt
1 teaspoon black pepper
2 large garlic cloves, minced

Mix the oil, vinegar, brown sugar, soy sauce, ketchup, garlic, oregano and Worcestershire sauce together in a mixing bowl. Pour into a large, zip-top plastic bag. Place the pork in the bag with the marinade. Seal the bag and turn it occasionally to distribute the marinade evenly. Refrigerate, turning the bag once or twice. Marinate for at least 2 hours, up to 2 days. (You can marinate for up to 2 days in the refrigerator, and then freeze up to 1 month.)

In a large bowl, combine the lemon juice, olive oil, garlic, oregano, salt, pepper, 1½ teaspoons cumin, and a generous pinch of cayenne or red pepper flakes.

In a large pot, brown the meat in oil, along with the onion, garlic, oregano, salt, black pepper, and 1½ teaspoons cumin, stirring occasionally. Add a bit of water or vinegar to the dish to slick it. Add the tomatoes, broth, and adobo sauce, and simmer for several minutes. Make sure to stir well. Cook for about 15 minutes; then add the canned tomatoes and 1 cup of water. Cook for about 10 minutes, then add the chipotle puree, blend a can of chipotle chiles along with the adobo sauce to the soup. Season with salt and pepper.

Spoon into serving bowls, with a dollop of sour cream and shredded cheese, if desired. Serve with warm cornbread.
 Tickets are plentiful in the resale market at the moment as many fans are nervous about future concerts.

**Ticket refunds: Rules and one surprising tip for postponed concerts, other events**

BY CHRISTI CARRAS

Stuck at home with kids? Celebrities will read stories

By Amy Adams, Josh Gad – who is accus- ingly oper- ing the same as the same rules will apply for buying tickets now. For one, some ill-informed or panicky fans are trying to unload seats via resale sites such as StubHub, so tickets for questionable big acts should be avoided.

**Postponed events:** Most events that are outright canceled without any plans to reschedule will automat- ically be refunded to the credit card used to pur- chase your tickets. This includes “platinum” tick- ets and other seats with inflated prices bought through Ticketmaster; all refunds are given at the price you paid. These re- funds do include the va- rious fees, too, except for postage if the tickets were mailed.

Ticketmaster, AXS, CFE and other ticket platforms email ticket buyers with specific details on a show- by-show basis. For tickets bought in person with cash or debit card, refunds must be sought at the point of purchase (but there’s no rush to do so, maybe wait a few weeks).

**Postponed events:** For tickets that are rescheduled or have plans for resche- duling, ticket holders usu- ally have to do any- thing if they still plan to attend on the later date. Support to families whom the rescheduled event will be good for the make-up dates. If ticket holders wish to ask for a refund for a rescheduled show, they almost always can. Ticket- master and other websites have a “Request a Refund” link on their website (often under the “Ticket Account” or “dashboard”). However, you have to – and may not be able to - reissue tickets to the makeup dates.

**Shows still in limbo:** For updates on concerts not yet postponed or canceled but questionable, news usually comes first from the artists themselves and/or the venues via their social-media sites. Some venues and artists are offering refunds to fans who want out in the mean- time, but mostly these tickets are still valid and not available.

Tickets bought through resale sites are canceled, Stubbil, Vivid Seats and similar sites are giving out refunds just as lickereamaie. Stub- hub and several more of these sites are also current- ly offering fans 120% cred- it toward future purchases instead of refunds for canceled shows. This is actually a good deal if you regularly purchase tickets to these sites for tickets. For instance, if you bought $250 in tickets, you’ll get an extra $50 toward the next big show.

For events that are post- poned, tickets bought through resale sites such as StubHub will still be good on the makeup date, just like Ticketmaster. Ticket holders should expect an e-mail from the site with new information.

However, these sites usually do not offer re- fund if the buyer cannot make the rescheduled date, so ticket holders are then told to resell their seats (benefiting the resale site twice over with its selling fees).

**Sports tickets:** For now, teams are listing their games as postponed, not canceled, so no refunds are being automatically given yet. Fans certainly won’t be shortchanged and can still seek refunds or team credit if and when games are officially canceled or rescheduled.

**Theater productions:** Ticket refunds are generally operating the same as concerts. Refunds should be available for perfor- mances that are already canceled - check with the venue for more information. Postponed shows that are trying to reschedule may provide seats to ticket holders for the makeup dates.

**Patrons can also get credit for upcoming per- formances in lieu of re- fund** – which is especially ideal for the nonprofit theater companies who are hard hit by the coronavirus.

**Buying for future events:** The shows must go on, and even if they will. Con- cert tickets are still being sold to go as early as the beginning of next month, and new concerts are being announced for the summer and fall.

If these dates are postponed or canceled, the same rules will apply for buying tickets now. For one, some ill-informed or panicky fans are trying to unload seats via resale sites such as StubHub, so tickets for questionable big acts should be avoided. Other options include buying tickets right now. That means good seats should be plentiful to most up- coming shows.

**That also means that many smaller, independ- ent venues and the artists they host are taking big financial hits at the momen- t. They could benefit from fans pre-buying tickets during this down- time.**

**Actors’ and actresses’ gift cards or merchandise such as T-shirts from these venues and artists’ web- sites as other means to support them.**

**Coronavirus guide**

**Monday March 23, 2020**

**Stuck at home with kids? Celebrities will read stories**

**By Amy Adams, the 2019 Primetime Emmy Awards in Los Angeles on Sept. 22, is one of several celebrities lending their voices to “Operation Storytime” and “Save With Stories,” initiatives aimed at lifting kids’ spirits amid coronavirus concerns. Photo by Chris Pizzello/Invision/AP.**

**Actress Amy Adams, at the 2019 Primetime Emmy Awards in Los Angeles on Sept. 22, is one of several celebrities lending their voices to “Operation Storytime” and “Save With Stories,” initiatives aimed at lifting kids’ spirits amid coronavirus concerns.**

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**Actors Amy Adams, Jennifer Garner, and more stars are lending their voices to “Operation Storytime” and “Save With Stories,” initiatives aimed at lifting kids’ spirits amid coronavirus concerns.**

**In case your day calls for a calming story,” Garner captioned her Instagram post, for which she recited Jan Brett’s winter woodland tale. “The Mitten,” accompanied by her last-destroyed golden retriever. “I also want to thank everyone who is a part of this show,” the voice of Olaf the snowman in “Frozen” opted to read from Silverstein’s classic: “The Giving Tree” and offered some parenting tips, something the girls have committed to social distancing.

“Please consider donating,” Adams wrote. “If you have a lot of trouble getting through and haven’t actually read in a long time because I find it a difficult one.

In addition to partnering with parenting Mog Romper for “Operation Storytime,” Garner also collaborated with Adams for “Save With Storax,” a reading initiative started by nonprofit organizations Save the Children and No Kid Hungry. Similar to “Operation Storytime,” “Save With Stories” fea- tures Adams reciting Aza- na Olaca Le Call’s “The Dinosaurs Prance” to her daughter and Garner reading Ken Geist’s “The Three Little Fish and the Big Bad Shark.”

We are galvanizing as a community to support a new fund for a combined effort between SAVE THE CHILDREN and Share Our Strength’s NO KID HUNGRY,” Adams wrote on Instagram. “THIRTY MILLION CHILDREN in the United States rely on school for food. School closures will hit vulner- able communities hard.”

Both actresses also encouraged their fans to donate to Save the Chil- dren and No Kid Hungry in order to serve kids “affected by COVID-19,” who are experiencing food insecurity during the pan- demic. Anyone who wants to contribute can do so at savethechildren.org/ savethestories or text “SAVE” to 22222 for a one-time donation of $10. “All you have to do is watch our stories and please consider donating,” Adams said.

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Coronavirus closures may mean months could pass before you can stand in front of a museum masterpiece. But if you have time on your hands and a deep need for cultural sustenance and succor, be it for yourself or your children, it’s time to get familiar with a universe so obvious it’s not: Google Arts & Culture (artsci-ent-culture.google.com).

This Google project launched nearly a decade ago, and while you likely were forgetting about it, the platform expanded exponentially. It now features thousands of high-resolution images from more than 1,200 museums globally, including the National Gallery in London, the Musée Reina Sofia in Madrid and the State Hermitage Museum in St. Petersburg, Russia.

You can visit Google Arts & Culture as a website …
At a time of great uncertainty, even the seasons seem scrambled. Christmas lights in springtime? Wrapped around a tree trunk in Colorado, fashioned into a heart in Alabama and hung high over Main Street in a New Hampshire town, holiday lights are going back up. As the coronavirus spreads, the displays are providing a bit of emotional and actual brightness. And they’re especially easy to enjoy from a safe social distance.

“We live out in the country, but I know you can see them from the highway,” said Julie Check, who turned on the white lights that trace the roof line of her home in Eastman, Wisconsin, on Wednesday night. “Anything I can do to make people happy right now, I’m going to try to do.”

In Farmington, New Hampshire, a roughly five-block stretch of downtown has been re-illuminated with holiday lights that swoop and zigzag between tall wooden posts. So cherished is the town’s 80-year decorating tradition that taxpayers approved spending $11,500 six years ago to erect the posts after the electric company said lights could no longer be affixed to its poles.

“It’s a small town, we don’t have a lot of traditions. That was one of them, and we just didn’t want it to go away,” said Lee Warburton, president of the Farmington Preservation and Improvement Organization, which maintains and installs the lights. At his suggestion, the 27 strands totaling 2,000-plus bulbs were tested and turned back on Thursday night.

“Police Chief John Drury was all for the idea. He remembers how pretty the lights looked when he first visited the town for a job interview on a December day 20 years ago. "It was one of the things that actually drew me to this community when I was first looking to be a police officer,” he said. “By bringing the lights back, hopefully, it gives people the sense of hope that we’re all in this together. We’ll get through it.”

Many of the posts on Twitter and other social media platforms point back to a Colorado man who tweeted Monday that his mom thought people should put Christmas lights in their windows “to remind each other there is still life and light” while they stay home to avoid the virus.

“Rosie and I have adopted his #lightsforlife hashtag to share photos of our efforts. In Huntsville, Alabama, Sarah Rang said she usually just winds a string of white lights around the railing of her apartment balcony for Christmas. But after seeing Peterson’s tweet, she made a heart shape instead.

"I had Christmas lights because I’m super into Christmas, so I dug them out and decided love was a good thing to spread,” she said.

Enjoyable at a distance, holiday lights brighten dark times
"Tuca and Bertie" on Netflix.

22 TV shows to binge on as you wait out the coronavirus

"For All Mankind" on Apple TV.

"Monk" in elementary school - it was exciting enough for my older brother and I and not too violent for my younger sister and me. (Did I mention that Tuca and Bertie is like "The Bachelor," with a distinct ar-

Enthusiasm" (ABC; AVAILABLE ON ABC, NETFLIX, HULU) for weeks.

I'm not even ashamed to admit I gave both shows another look. Every. Single. Episode. Of. "The Monarch" (ABC; AVAILABLE ON ABC, NETFLIX, HULU) for weeks.

For You" with friends … or alone.

but I'm not married to the argument (usually my mom). Now, it's time to hit the reset button and come out the other side.

Tuca and Bertie on Netflix.
SPOILER WARNING: The next paragraph contains spoilers for the series 'Stranger Things.'

To wit, the second season of 'Stranger Things', which premiered in October 2017, was a hit with audiences around the world. The show follows the story of a group of friends living in the fictional town of Hawkins, Indiana, who discover a supernatural phenomenon in their town. The series is known for its blend of horror, mystery, and science fiction, and has become a cultural phenomenon, drawing in viewers of all ages. The show has been praised for its strong writing, character development, and its ability to create a sense of nostalgia for the 1980s. It has also been noted for its use of music and its致敬 to 80s pop culture. 'Stranger Things' has been a critical and commercial success, and has won numerous awards for its various categories. The show has also been praised for its ability to tackle important social issues, such as bullying, grief, and family dynamics. Overall, 'Stranger Things' is a must-watch for anyone who enjoys a well-crafted, genre-bending show with a timeless appeal.
From ‘Outbreak’ to ‘Contagion’: What post-apocalyptic movies can teach about coping with the coronavirus pandemic

BY CYNTHIA PAUL

The Seattle Times

WHEN THE BIG PICTURE

When the big picture is all you hear is the sound of coughing, sneezing and crampy guttural coughing. That’s how dire the coronavirus pandemic is. It’s dire without question, massive, sweeping, murderous, and the loss of life is massive.

Yet, in the midst of all the suffering, we have seen some extraordinary moments of human goodness and resilience.

In ‘Outbreak’ and ‘Contagion’, we’ve seen how governments and public health officials can act quickly and decisively to prevent the spread of disease.

In ‘Blindness’, we’ve seen how individuals can band together to protect each other from harm.

In ‘Contagion’, we’ve seen how communication and trust can be crucial in the face of a crisis.

In ‘Blindness’, we’ve seen how the human body can adapt and recover from disease.

In ‘Contagion’, we’ve seen how the media can be a powerful tool in communicating with the public.

In ‘Blindness’, we’ve seen how the power of love and compassion can overcome even the most difficult challenges.

In ‘Contagion’, we’ve seen how families and communities can come together to support each other.

In ‘Blindness’, we’ve seen how the power of hope and determination can lead to recovery.

In ‘Contagion’, we’ve seen how the power of medicine and science can be used to protect and save lives.

In ‘Blindness’, we’ve seen how the power of empathy and kindness can bring people together.

In ‘Contagion’, we’ve seen how the power of mutual support and solidarity can be a powerful weapon in the fight against disease.

But what is the big picture of this crisis? What is the big picture of the human condition? What is the big picture of our society?

The big picture is that we are all connected. We are all part of the same global community. We are all facing the same challenges.

And in this time of crisis, we have a choice. We can choose to come together and work as one. We can choose to support each other. We can choose to be kind and compassionate.

We can all take hundreds or even thousands of times a day, touching one another, getting each other a handshake, taking a credit card from a customer, holding onto the rail on the bus; basically, touching pretty much anything that another human touches, without immediately washing our hands afterward.

These are the little things we are all capable of and justly paranoid about right now.

But it’s particularly scary to think this could happen to you. Viruses, like zombies, don’t care who you are. A single bite from a zombie can infect you. A simple handshake or an uncovered cough can all catch you.

It’s what makes viruses and epidemics big enough “monsters” they’re not worth making movies about.

Yes, aside from the “bad touch” that spreads the virus, the epidemic spreads the zombification, which is what post-focused movies like “Outbreak” and “Contagion” have in common with zombie movies (and other cinematic societal breakdowns).

In “Blindness”, a 2008 film based on Jose Saramago’s novel of the same name about an epidemic that causes the infected to go blind, a small civil-war-ridden nation is facing down a pandemic and people are stepped up to help the rest of the world.

In “Contagion”, the government issues early warnings about the virus (a situation that, unfortunately, has not been impossible to do in the real world) and ultimately decides to blow up an entire American city to contain its spread.

This chaos and utter breakdown of normalcy is what we’re afraid of, but it is also, perhaps, what we secretly crave. The idea of a world would be kind to us, a world where society can come to a grinding halt. A total dissolution of society as we know it. If there were to be any human beings, our children would be left to survive and find a way to rebuild society.

In “Carriers” (a 2009 film on which Ang Lee was executive producer), a disease spreads through an epidemiologist (played by Emmanuelle Chriqui), a country video game developer (played by the late Michael J. Fox), and a television phenomenon (“The Walling Dead”) (in which the world is over byzantium, it’s every man or small group of hands for himself). Even in “Contagion”, the least dramatic of these films, people are reduced to stealing, looting and killing. The dead are buried in mass graves and civil society as we know it ends.

What apocalyptic films show us is that we’re not just afraid of gruesome deaths, we’re afraid societal breakdowns. That is, the worst that happens is a pandemic turns us all into potential carriers—like zombies, don’t spare anyone. A single bite from a zombie can infect you. A simple handshake or an uncovered cough can all catch you.

What apocalyptic films show us is what we’re afraid of, if a pandemic turns us all into potential carriers—like zombies, don’t spare anyone. A single bite from a zombie can infect you. A simple handshake or an uncovered cough can all catch you.

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Our FEARS

From a cursory look at pandemic movies (from “28 Days Later” or “World War Z,” you’d think the zombie apocalypse is coming to a city near you. But it’s not. While I 100% do not recommend watching “Contagion” at a time like this (it strikes way too close to home), I did. As I watched several popular pandemic movies, I was struck by how similar they all are. The government issues early warnings about the virus (a situation that, unfortunately, has not been impossible to do in the real world) and ultimately decides to blow up an entire American city to contain its spread.

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Recent restrictions on gatherings in France to prevent the spread of the new coronavirus have forced religious communities to adapt the way they express their faith.

On a typical Sunday morning, Father Philippe Rochas greets roughly 350 worshippers as they trickle into the neo-Gothic St.-Vincent-de-Paul church in the heart of Marseille. This Sunday, however, he sat hunched over a webcam as he and his fellow priests prepared an empty meeting room to live-stream Sunday Mass directly to the screens of parishioners confined at home.

“I already realize that the people who see us online are very happy to have this service, as a kind of comfort,” Rochas told The Associated Press.

As he delivered a sermon to just over 70 live viewers Sunday morning, one commented on the site: “glory be to God, amen,” followed by a prayer emoji. By the end of Sunday, the video had accumulated more than 500 views on its Facebook page.

The French government imposed confinement rules in the past week. Those rules do not list churches as valid destinations on the permission forms required to leave confinement. But, Rochas decided to leave his church open for individuals to come and pray, up to a maximum of 20 people, who must respect the social distancing measures and barriers put into place. Lines of warning tape and red X’s cover the rows of polished seating at the church of St.-Vincent-de-Paul.

“We miss the real contact with our parishioners, but I strongly believe that in this new situation, we will reach new people,” he said.

France is seeing a rapid rise in cases of the virus, with the third-largest number of deaths in Europe. Most people quickly recover from the virus after experiencing only mild or moderate symptoms, such as fever and cough. For some, especially older adults and people with existing health problems, it can cause more severe illness, including pneumonia.

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During virus lockdown, French priests master livestream at Gothic cathedral

One Good Thing

Church seats are marked Sunday to indicate the appropriate social distancing measures at the St. Vincent de Paul church in Marseille, southern France.

Priest Philippe Rochas, left, and Jean-Benoit de Beauchene pack up livestreaming equipment after holding a closed-door Sunday Mass.