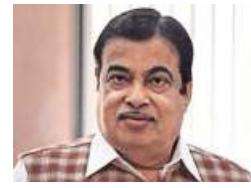


on Sunday



Lockdown alone will not help: Dr. Soumya Swaminathan of WHO
page 7



States must evolve ways to help migrant workers return: Nitin Gadkari
page 6



TRAI says all set top boxes must support interoperability
page 10



Trump announces sanctions on nations not willing to repatriate citizens
page 9

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NEARBY



City reports 5 deaths, 166 new COVID-19 cases

NEW DELHI
Five more deaths and 166 new COVID-19 cases were reported in Delhi on Saturday, taking the toll to 19 and cases to 1,069, stated a bulletin released by the Delhi government. A total of 26 persons have been discharged after recovery.

CITY ▶ PAGE 2

Four charged under NSA for preventing sealing

GAZIABAD

Four persons, including the imam of a mosque in Meerut, were arrested on Saturday after a crowd allegedly stopped police from sealing Jali Koti area in the city. Three persons from the area had tested positive on Friday. "Action has started against the four under the National Security Act," said Meerut SSP Ajay Sahni.

NORTH & EAST ▶ PAGE 4

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MAGAZINE ▶ 8 PAGES

CLASSIFIEDS ▶ PAGE 4

14-day extension of lockdown likely

In four-hour video-conference with Chief Ministers, PM hints at resumption of economic activity

NISTULA HEBBAR
NEW DELHI

Prime Minister Narendra Modi indicated on Saturday, after a marathon four-hour video-conference with Chief Ministers, that the country could see a 14-day extension of the COVID-19 containment lockdown as that was the common demand of a large number of States, including West Bengal. The Central government will announce guidelines for the same in the next couple of days.

Remarks by Mr. Modi at the meeting, however, also indicated the possibility that some economic activity may be resumed in the extended lockdown period.

"For the last two weeks or more, people have shown great discipline and stayed indoors and tried to follow social distancing since, as we say *jaan hai jahan hai* [the world is for who is alive], now we must also say *jaan bhi jahan bhi* [for both life and world]," a statement from the PMO quoted the Prime Minister as saying.

Farming operations

Puducherry Chief Minister V. Narayanswamy, after the meeting, said Mr. Modi felt farm activity should continue, and said guidelines for the construction industry

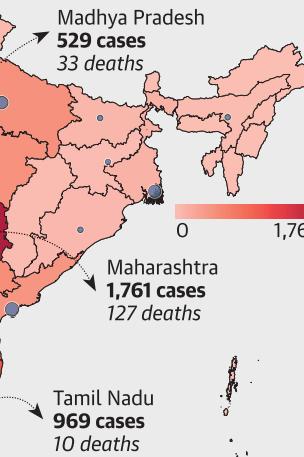
Rising fatalities

The total number of deaths related to COVID-19 was 275 as of 8.45 p.m. on Saturday. Chart indicates the number of cases (colour), and deaths. Larger the shade, greater the number of cases. Bigger the circle, higher the number of deaths



An effigy put on display at a Chennai market on Saturday to spread awareness.
■ M. KARUNAKARAN

Apart from Odisha and Punjab which extended the lockdown, Maharashtra and Telangana have also done so till April 30



would be issued by the Centre in a phased manner.

The lockdown was formally announced from March 25 to April 14 (21 days) but the trajectory of COVID-19 cases has led most State governments to recommend an extension. Mr. Modi, government sources said, was considering the request favourably. Sources said a formal announcement would be made after the weekend.

"Most States requested Prime Minister Modi to extend the lockdown for two more weeks," said govern-

ment sources.

Punjab, Telangana, Odisha, Maharashtra and Karnataka have already declared an extension till the end of the month, and Delhi Chief Minister Arvind Kejriwal preempted a formal announcement by the Prime Minister by taking to Twitter and offering unstinted support to the decision.

Chhattisgarh Chief Minister Bhupesh Baghel, in his intervention at the video conference, said activity within districts unaffected by COVID-19 should be allowed to

restart, albeit with sealed borders between districts and States very much in place and no train and air connectivity.

Andhra Pradesh Chief Minister Y.S. Jagan Mohan Reddy suggested that zones within districts be colour coded, and only the red zones undergo a containment lockdown.

CONTINUED ON PAGE 6
MORE REPORTS ON PAGES 2, 3, 4, 5, 6, 7, 8, 9 & 12
U.S. REPORTS OVER 2,000
DEATHS IN ONE DAY ▶ PAGE 9

Kejriwal seeks funds on par with States

JATIN ANAND
NEW DELHI

Chief Minister Arvind Kejriwal, while participating in the video-conference with Prime Minister Narendra Modi and his counterparts from other States on Saturday, favoured the extension of the ongoing nationwide lockdown by a fortnight, sources said.

However, he also sought to make a case for a Centre-sponsored relief package and funding on a par with other States to deal with the COVID-19 pandemic. The Chief Minister submitted that Delhi has "a dual role" and added responsibilities given the presence of foreign missions in its jurisdiction, a "significant population of foreigners" residing in it and migrant workers being sustained by it at shelter homes.

"PM has taken correct decision to extend lockdown. Today, India's position is better than many developed countries because we started lockdown early. If it is stopped now, all gains would be lost," he tweeted.

CMs raise funds crunch with Modi

Almost all want lockdown extended



Talking strategy: PM Narendra Modi in a meeting with Chief Ministers via video conference in New Delhi on Saturday. ■ PTI

SOBHANA K. NAIR
NEW DELHI

A majority of the Chief Ministers who participated in a video-conference meeting with Prime Minister Narendra Modi on Saturday flagged the issue of a crippling shortage of funds, with the lockdown choking revenue sources and also due to the delayed GST payouts from the Centre.

"uniform model" of restrictions for the entire country if the lockdown was extended. He said since the Centre and the States were jointly fighting the COVID-19 pandemic, the States must get adequate financial assistance.

He highlighted the difficulties in handling the issues arising out of the lockdown in the State.

Telangana Chief Minister K. Chandrashekhar Rao said his State used to get ₹40,000 crore each month in revenue, but this had now come down to a mere ₹4,000 crore. He expressed his helplessness in handling the pandemic with limited resources.

CONTINUED ON PAGE 6

Despite lockdown hurdles, sowing of summer crops up

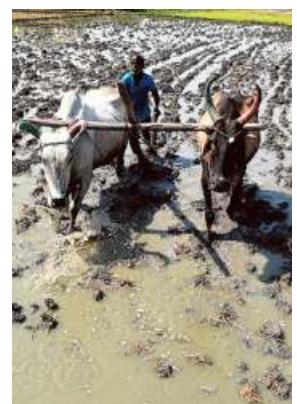
More area under rice, pulses, oilseeds: Agriculture Ministry

SPECIAL CORRESPONDENT
NEW DELHI

Early sowing of the summer rice crop has covered 37% more area than the same time the previous year, despite the COVID-19 lockdown limitations. Agriculture Ministry data show. This is the pre-monsoon sowing of paddy, with the major kharif crop sowing to be done after the rains begin in June.

Overall sowing of summer crops, including rice, pulses, coarse cereals and oil seeds, is about 31% higher than usual. In total, 48.8 lakh hectares have been sown so far.

Availability of fertilizers
The Centre has exempted agricultural activity from the lockdown restrictions and has also taken steps to ensure availability of fertilizers and pesticides for the coming season.



A farmer readying his field in Madurai district of Tamil Nadu. ■ G. MOORTHY

lakh hectares in Assam. This is more than a third higher than the 23.8 lakh hectares sown with rice during the same period last year.

Pulses have also seen a significant increase in early sowing, with more acreage covered in green gram and black gram. Overall, there was a 32% jump from about 3 lakh hectares to 4 lakh hectares.

The growth in oilseeds is more modest with a 12% increase in sowing area to 6.7 lakh hectares. Most of the hike comes from more land sown with groundnuts.

Among coarse cereals, more maize and bajra have been sown than in the previous year resulting in a 27% jump to 5.6 lakh hectares under cultivation.

WORK RESUMES IN A FEW TEA GARDENS IN ASSAM ▶ PAGE 8

Safe passage



All hands on deck: People get sprayed with disinfectants at a sanitising tunnel set up at a farmers' market in Visakhapatnam, Andhra Pradesh, on Saturday. ■ K.R. DEEPAK

Migrant workers' protest turns violent in Surat

Allow us to return to home States, say desperate men

MAHESH LANGA
AHMEDABAD

Lack of work has pushed several thousand migrant workers in Gujarat to the edge of starvation, sparking protests.

In the second such incident in the last 10 days, more than 2,500 workers in Surat took to the streets late on Friday, demanding wages, food and permission to return to their home States of Odisha, Uttar Pradesh and Bihar.

As the crowd of protesters grew, some elements turned violent, setting vegetable carts on fire and vandalising shops and properties along the road in the Laskana area, a migrant hub. Within an hour, about a dozen properties and as many vegetable carts were gutted. The police used force to disperse the mob, and more than 70 per-



Swift action: Fire services personnel dousing fires set by migrant workers in Surat on Friday. ■ SPECIAL ARRANGEMENT

sons were detained.

Gujarat DGP Shivanand Jha, in a letter to the Additional Chief Secretary (Home) Sangeeta Singh, flagged the worsening plight of the workers in shelter homes and migrant localities due to a lack of food and other basic amenities.

In his letter, Mr. Jha said

there were 778 shelter homes in the State. The 194 homes where 9,351 migrant workers – mainly from Uttar Pradesh, Bihar, Rajasthan, Jharkhand and Odisha – are housed lack adequate arrangements for food and sanitation, the letter said.

CONTINUED ON PAGE 6

3 shelters set afire over 'missing' homeless man

Six arrested, rioting case registered

STAFF REPORTER
NEW DELHI

Three night shelters at Kashmere Gate were set on fire allegedly by homeless people on Saturday evening after a body was recovered from the Yamuna and they suspected it to be that of a fellow shelter home inmate.

Delhi police Additional Public Relations Officer Anil Mittal said no one was injured in the fire. A case under sections of rioting has been registered and six persons have been arrested.

The police said four-five inmates of the night shelters jumped into the Yamuna on Friday when civil defence officials started beating them up for creating chaos during food distribution.

"When they came out of the river, they claimed one of

Odisha youth pedals 1,700 km to reach home

Left without a job after the lockdown, he cycled across four States over 7 days

SATYASUNDAR BARIK
BHUBANESWAR

Sitting idle doesn't come easy to 20-year-old Mahesh Jena, stuck at a COVID-19 isolation centre in Bichitrapur in Odisha's Jajpur, more so because he cycled 1,700 km across the country from Maharashtra to reach home.

"The seven-day journey was easier than tackling the boredom here," said Mr. Jena, who pedalled home after the nationwide lockdown on March 25 pulled down the shutters at his workplace and snapped all public transport systems.

Mr. Jena was working in an iron casting facility in the Sangli Miraj MIDC Industrial Area in Maharashtra, earning ₹15,000 a month. Soon after the lockdown



Dependable wheels: Mahesh Jena covered close to 200 km daily. ■ SPECIAL ARRANGEMENT

Jena needed at least ₹6,000 to pay for accommodation and food, but had just ₹3,000 with him.

Matter of survival
After remaining idle for a week, he realised that the lockdown was not likely to end soon. "All of sudden, I decided to go back home to Badasuar village in Jajpur by bicycle. It was a matter of survival," he said.

"On April 1, I set out. Though I did not have a map, I remembered the names of major stations during my train journey here," said the youth.

On the week-long, cross-country ride, Mr. Jena made most of the cool, pre-dawn hours, cycling till lunch before taking a break. He would stop at the few, still

open dhabas for a bath, lunch and a nap before getting back on his cycle. "I was averaging close to 200 km per day," he said.

And so Mr. Jena continued pedalling – from Solapur to Hyderabad, then Vijayawada through Visakhapatnam and Srikakulam, before entering Odisha via Ganjam, cycling almost 16 hours a day. "Heat exhaustion was taking a toll, but it did not distract me. I was determined to reach home," Mr. Jena said.

He reached Jajpur late on April 7 only to be stopped by villagers, who were reluctant to allow him in without a check-up. They informed the district administration, and he was sent to a quarantine centre at a school in Bichitrapur.

West Bengal pulled up for lockdown violations

MHA points to religious meetings

SPECIAL CORRESPONDENT
NEW DELHI

The Ministry of Home Affairs (MHA) has sought a report from the West Bengal government regarding dilution of lockdown measures that could have resulted in spread of the COVID-19 infection. The MHA alleged that the State police were allowing religious congregations and distribution of free rations by political representatives, spurring the spread of the virus.

In an April 10 letter to the Chief Secretary and the Director General of Police, West Bengal, the MHA said it had received reports from security agencies about "gradual dilution of lockdown" with an increase in the number of exceptions being provided by the State



Villagers protesting against the setting up of quarantine centres at Sian in Birbhum district of West Bengal. ■ PTI

government. "Shops selling non-essential items have been allowed to function. There is no regulation in vegetable, fish and mutton markets where people have been thronging in complete violation of social distancing norms," the letter said.

CONTINUED ON PAGE 6

Timings

DELHI

SUNDAY, APR. 12
RISE 05:59 SET 18:46
RISE 23:35 SET 09:18
MONDAY, APR. 13
RISE 05:58 SET 18:46
RISE 00:00 SET 10:10
TUESDAY, APR. 14
RISE 05:57 SET 18:47
RISE 00:34 SET 11:05

Delhi Weather

max min
Delhi City 37 19
Safdarjung 37 19
Palam 39 21

Delhi Palam Today

37°C A dry ad very warm weather to continue with mainly clear sky.

Delhi Palam Tomorrow

38°C A dry ad very warm weather to continue with partly cloudy sky. Chances of thunderstorm in parts.

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THE HINDU

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Air Quality of Delhi-NCR

Delhi 124	Gurugram 152
Ghaziabad 194	Faridabad 203
Noida 146	Greater Noida 162
Good 0-50	Satisfactory 51-100
Poor 201-300	Very Poor 301-400
Moderate 51-100	Severe >400
Air Quality Index at 4 p.m. yesterday (Average of past 24 hours)	[Source: CPCB]

IN BRIEF

FIR registered against virus-infected man

GURUGRAM
A man infected with COVID-19 has been charged with attempt to murder by the Palwal police for not informing the administration about his participation at a religious gathering in New Delhi. According to the FIR, registered at the behest of Tehsildar, the accused returned to his village in Hathin area on April 7 after taking part at the gathering in Delhi. However, despite administration's directions, he hid this fact and did not present him for medical examination. The matter came to light when Sarpanch informed the district administration about it.

BJP initiative feeds needy in city

NEW DELHI
Under its #feedtheneedy programme, the BJP provided food and essential items to as many as 8,90,007 people in the city on Saturday, it said. On April 10, the party claimed, food packets were distributed to 1,88,846 needy people and ration was provided to 20,084 people along with other essential goods, benefiting 2,08,930 people in total under the programme so far.

OFFICE OF THE EXECUTIVE ENGINEER TRANS. LINE MAINTT. DIV-III JKPTCL UDHAMPUR

Email: tlmdudh@gmail.com

Fax: 01992-270287

No-TLMD-III/Udh/81-84 Dated-9/04/2020

Dated-19-03-2020

Due to NIL response, the said NIT is hereby extended as detailed below.

(A) NIT Detail:-

S.No.: 1

Description of NIT:- Re-alignment of 220 KV D/C KPTL Between location No. KP 251-KP 253 District Ramban.

Cost of tender document:- Rs. 5000 (Rupees Five Thousand only)

Earnest Money (Rs.)- Rs. 2.92 lacs (Rupees Two lacs Ninety Two thousands only)

(B) Extension Period:-

1) e-bid submission end date and time:- 30-04-2020 up to 2:00 PM.

2) Last date of submission of hard copy of tender fees:- 30-04-2020 up to 2:00 P.M.

3) Date and time of opening of techno commercial bid:- 01-05-2020 at 03:00 PM.

4) Online Financial e-bid opening date and time:- Will be communicated to techno-commercial bidders

Commercially qualified bidders

Sd

Executive Engineer
Trans. Line Maintt.
Div-III JKPTCL
Udhampur

DIP/J-80/20

City reports 5 deaths, 166 fresh virus cases

COVID-19 cases in Delhi breach 1,000 mark; 19 deaths so far

STAFF REPORTER
NEW DELHI

Five more deaths and 166 new COVID-19 cases were reported in Delhi on Saturday, taking the total number of deaths to 19 and cases to 1,069, according to a daily bulletin released by the Delhi government. Of the total cases, 26 people have been discharged and 1,023 are still in different hospitals.

The victims

The deceased have been identified as a 79-year-old woman from Karol Bagh, 60-year-old woman from Sardar Bazar, 65-year-old man from Azad Market, 44-year-old woman from Malka Ganj, and 68-year-old man from Tamil Nadu.

A total of 2,569 people are lodged in different quarantine facilities and around 17,000 people are in home

HELPLINE NUMBERS

COMMON HELPLINE +91-11-23978046
DELHI - 011-22307145
GHAZIABAD - 010 41864533
NOIDA - 8076623612/6396776904
GURUGRAM - 108/ 0124-2322412/
9911519296/ 7015523417/ 9654231756

quarantine, according to the government.

Meanwhile, the government added three more areas to its list of containment zones taking the total number to 33.

Hospital shut

The Delhi State Cancer Institute (DSCI) was shut on Saturday for sanitisation after 22 staff and three patients tested positive for COVID-19.

“We are very concerned and the entire building is being sanitised. On Monday, I will talk with authorities and

take a decision on when the hospital will open,” said B.L. Sherwal, director of DSCI.

While the three positive patients and the 22 staff have been shifted to Rajiv Gandhi Super Speciality Hospital, other patients at the hospital have been moved to a different hospital. Though the hospital is not a COVID-19 treatment facility, on April 1, the DSCI was first shut after a doctor working at the institute tested positive for COVID-19.

The doctor’s brother had a travel history to the U.K.

Lady Hardinge doctors reject donation to fund

They demand risk, hazard allowance

STAFF REPORTER
NEW DELHI

The Resident Doctors’ Association of Lady Hardinge Medical College and associated hospitals on Saturday expressed their disapproval to an appeal by the administration to deduct their one day’s salary towards PM CARES Fund.

“Members of RDA, LHMC express complete disapproval of deduction of salary of the residents as we are dealing first-hand with COVID-19 cases. Instead, we should be provided with risk and hazard allowance in the time of global emergency. Since

RDA, LHMC represents all the resident doctors of the hospital, kindly consider this letter as objection to salary deduction of all the resident doctors,” a statement by the RDA read.

NIKHIL M BABU
NEW DELHI

After 10 days, 24-year-old Vinod*, a sanitation worker, finished his night shift at a COVID-19 treatment ward at Lok Nayak Hospital and returned home to his 12-member family – the youngest member being his elder brother’s two-year-old son, Harshu.

“I was scared that I would infect my family with the virus. So, I went straight to the terrace and bathed in hot water and washed my clothes and then only I met anyone in the house,” the sanitation worker said.

The government did not

We demand safety, not plate-beating'

Medical staff talk about emotional and physical strain that they undergo every day

BINDU SHAJAN PERAPPADAN
NEW DELHI

After an eight-hour shift in the burns ward of a designated COVID-19 hospital in the Capital, *Ram says he broke down in his car while driving back home on Thursday night. “The enormity of the risk I take every day just overwhelmed me,” he said.

“Today, I am better,” he assured over the phone before lapsing into another long silence.

Mr. Ram is father to two school-going daughters. He lost his wife in February. His asthmatic mother lives with him to look after his children.



Doctors and medical assistants at the special COVID-19 ward at a city hospital. • R.V. MOORTHY

pititals now?”

“The isolation breaks you mentally. Away from the family, with other staff under the same strain, living in below average living conditions takes a toll. Many nursing associations have complained and a few hospitals like Lok Nayak and Ram Manohar Lohia have taken immediate medical action,” she said.

The United Nurses’ Association, professional organisation of nurses, has maintained that physical security of nurses is now proving to be a major concern even in the Capital.

Senior resident at All India Institute of Medical Science, *Pratham starts by stating that getting in and out of a PPEs is not an easy business.

“After the name of our hospital was published stating that we are treating COVID-19 patients, several of my neighbours asked me if I could park my car elsewhere in an isolated spot and not bring it into the common parking lot. My children

aren’t politicians visiting hos-

lowing it. The Delhi government spokesperson also did not offer a response on the issue.

“Our union is for government workers and not contractual workers, but currently we are looking into contract workers also. Now giving stay for sanitation workers also, but they are not very educated and many of them are not aware about it. We are trying to reach out to contract workers too,” said Bawant Singh, general secretary of Lok Nayak Hospital, Svasthy Karamchari Union.

+ (name has been changed to protect identity)

'No accommodation, not enough protection for us'

At least 15 sanitation workers quit work dissatisfied with lack of facilities provided to them in hospital

NIKHIL M BABU
NEW DELHI

After 10 days, 24-year-old Vinod*, a sanitation worker, finished his night shift at a COVID-19 treatment ward at Lok Nayak Hospital and returned home to his 12-member family – the youngest member being his elder brother’s two-year-old son, Harshu.

“I was scared that I would infect my family with the virus. So, I went straight to the terrace and bathed in hot water and washed my clothes and then only I met anyone in the house,” the sanitation worker said.

The government did not

provide him with any accommodation, he said. The Delhi government has provided accommodation for doctors and nurses who are on COVID-19 duty, but he said that there were no such facilities for sanitation workers.

“About 15 people who were working with me left the job after we were given duty in COVID-19 wards. Sabko apni jaan pyaari hai na?” said Vinod.

“In between, I was unwell and took medicines. I got really scared and spoke to my parents. They advised me not to work for a while,” he said, who earns ₹3,000 a month.

The sanitation worker said

he was given PPE (Personal Protection Equipment) to clean the wards, rooms, toilets used by COVID-19 patients, but not while washing bedsheets used by patients.

COVID-19

He said that the PPE given to them was very thin and sometimes would tear or the zip won’t work. “We should also be given better facilities,” Vinod, hailing from Uttar Pradesh, said.

On March 30, Chief Minister Arvind Kejriwal had announced that the government had arranged 100

individual rooms in The Lalit, a five-star hotel, for the doctors who are treating in COVID-19 wards.

Following multiple complaints by nurses, the government announced better accommodation for nurses on Thursday. The worker, said,

“We do not get any facilities and no one complains, because if we complain, the company will sack us.”

No response

When reached out for a comment, J.C. Passey, medical director of Lok Nayak Hospital, said, “I am at a meeting”.

He did not respond to multiple calls and messages fol-

smarten our approach to deal with it.

Begin by acknowledging that these are unprecedented times, unlike what we have seen before, hence, it is quite normal to feel anxious and lonely. It is important to know that the whole world is in the same state as us, and we are all in this together. Use this time to establish forgotten connections via technology and catch up with friends and family whom you may have been putting on the back burner because of your busy schedule. Most importantly, put the focus back on your self-care, eat well, exercise regularly, find ways to calm and focus yourself.

(Saher Mehdhi and chief scientist at wellowise, India’s first precision health startup focusing on chronic diseases)

Don’t let the ‘social recession’ ruin your mental and physical health

Research suggests that social isolation can trigger increased heart rate, muscle tension, and lead to chronic conditions such as hypertension



that produce well-orchestrated physiological changes like increased heart rate, increased muscle tension and thickening of blood. Together these physiological changes are called the fight-or-flight response, because it has evolved as a survival mechanism enabling us to cope with physical and psychological threats.

The health risks

The uncertainty, fear of infection and lack of social interactions all can be perceived by our brains as a threat and can inadvertently switch our bodies to fight-or-flight mode. A recent meta-analysis published in *Neuroscience and Biobehavioral Reviews* revealed that people who are more socially isolated have higher levels of C-reactive protein (CRP) and fi-

brinogen (a soluble protein that helps blood to clot), both of which are associated with chronic inflammation and poor physical and mental health.

Another oft-cited study in *Perspectives on Psychological Science* indicated that lack of

social connection and living alone can be detrimental to a person’s health, respectively increasing mortality risk by 29% and 32%. They also pointed out that social isolation can lead to several chronic conditions like hypertension, increased heart

rate, increased levels of stress hormones and even accelerated ageing.

Feelings are so idiosyncratic that it is often hard to gauge how one is feeling at a particular time. We don’t have to be physically alone to feel lonely, sometimes just

to feelings of anxiousness.

Good news is, these signs disappear as soon as and diversity of our social interaction improve.

Coping with isolation

Usually when things get tough, we tend to lean towards our personal relationships to seek their advice and support. Ironically, that is the very thing we cannot do in the current crisis. While there are no quick fix solutions to deal with increasing anxiety due to social isolation, there are ways we can

smart our approach to deal with it.

Begin by acknowledging that these are unprecedented times, unlike what we have seen before, hence, it is quite

IN BRIEF

Delhi govt. launches initiative for students

NEW DELHI
The Delhi government on Saturday launched 'Every Home a School, Every Parent a Teacher' initiative and said eight lakh students would join special classes on 'Happiness Curriculum' and 'Mission Bunyaad' at their homes. "Starting tomorrow, parents of students studying in Classes up to VIII will receive audio calls [VR] from the Education Department to guide them through as to how to take on the role of teachers at home. Step-by-step activities will be shared through pre-recorded audio messages," said Deputy Chief Minister Manish Sisodia.

Two more disinfection tunnels installed

GREATER NOIDA
With the intention to ensure the protection of on-duty police personnel from the COVID-19 pandemic, Noida Police Commissioner Alok Singh has inaugurated a disinfection tunnel at the Greater Noida police lines. Another disinfection tunnel was installed at the Noida Authority office in Noida and inaugurated by Noida authority CEO Ritu Maheshwari. Both the said tunnels have been sponsored by the ACE group.

Govt. to give financial assistance to drivers

SPECIAL CORRESPONDENT
NEW DELHI
The Delhi government will provide one-time financial assistance of ₹5,000 to drivers of passenger-carrying vehicles engaged in providing transportation services that have been stopped from plying on roads to prevent the spread of COVID-19.

"In order to mitigate the sufferings of these people,

Gautam Buddha Nagar complexes become part of COVID-19 war zone

Residents grapple with sight of firemen spraying disinfectant on high-rises

SPECIAL CORRESPONDENT
GREATER NOIDA

As Noida and Greater Noida in Delhi's neighbourhood turn into major COVID-19 hotspots, life has changed for the residents of the high-rise multi-storey apartment complexes.

With the district administration of Gautam Buddha Nagar (official name for the district where the twin cities are located) sealing yet another upscale residential complex late on Thursday evening, after a resident tested positive for COVID-19, the number of hotspots went up to 23.

For the residents of the twin cities and those societies that have been sealed in particular, any such announcement has often been accompanied by panic, if not chaos.

The sight of fire brigade personnel wearing personal protective equipment (PPE) and spraying disinfectant on tall buildings multiple times conveyed a sense that the housing complex was now part of the India's COVID-19



People standing in a queue outside a dairy shop in Noida. ■ PTI

war zone.

A message from the head of the Resident Welfare Association (RWA) of an affected complex tells the story. "Dear Residents, the Society has been sealed by the district administration. No resident, pets allowed outside house. Police is already inside society. No one would be allowed to move inside/outside without authorization from police (sic)," wrote the RWA president in the WhatsApp group meant for the residents late on Thursday.

"Next details would be shared once received. Details for essential services would be provided. Please don't panic. This is for our safety," the RWA president added.

On Friday morning, the state of confusion even among RWA office-bearers was evident from contradictory messages. First, the RWA informed the residents that they were allowed to buy groceries, fruits, vegetables and milk from the shops located within the complex by following protocols.

"Dear residents, fresh vegetables and fruits are available at vegetable shop. Fresh breads are available. Please maintain social distancing,

be in queue and stay in the circles marked. Don't rush and go to the shops one by one," the RWA told residents on Friday morning.

However, within minutes, it informed that the administration had closed the shop.

As residents ordered essentials from outside, the RWA appealed to young residents to assist senior citizens.

COVID-19

Not just essential commodities, even the stigma of being identified as a hotspot is also affecting essential services such as housekeeping and sanitation.

"Dear residents, we have been informed that our housekeeping staff are unable to come as they are not being allowed by the villagers and their landlords. So everyone is hereby requested to dump their garbage once a day in the dustbins on ground floors. Please cooperate. Any garbage on floor is health hazard for all," the residents were also told.



People queue up to buy cigarettes in front of a 24-hour retail store in Delhi. ■ JATIN ANAND

Promila Sarkar (name changed), who lives in one of the prominent sectors in Noida that has been sealed, said she had to recently undertake what would normally seem like a "dubious transaction."

"It's good in a way; we are smoking less. But the way it has been done is just promoting black marketing. I started asking my roommate for help after I finished my own pack which I bought for ₹50 extra," his roommate Ojas Kharri (name changed) said.

Omkar Nagar, a resident of Beta I, complained he had no problems reacquainting himself with bidis but his decision has brought with it its own issues. "I started with bidis when growing up in my village nearby. Then I switched to e-cigarettes but these were recently banned. I was smoking those light, narrow kinds before the lockdown. I've tried everywhere but can't find them so it is back to bidis for me," she asked.

Whether or not he chose

to smoke, Kishore Gupta (name changed), a resident of a prominent housing society in Noida said, was personal one and he was exercising it around half a cigarette at a time.

"This is not a decision that the government will make for me. I can't understand why cigarettes have been left in the grey area. I'm smoking half a cigarette every time I smoke. A store, which is part of a major chain, used to sell cigarettes in my society before the lockdown. The other day, policemen came and threatened to shut the store if they retailed cigarettes. They didn't have any order or anything. All this is just bizarre," he complained.

Social distancing is slowly becoming the new normal

Shop owners say they no longer have to tell customers to not hoard essentials, keep a safe distance

STAFF REPORTER
NEW DELHI

Almost three weeks into the lockdown, grocery shop owners and others who sell essential commodities said people have been following norms of social distancing, while their customers complained that the MRPs of commodities have gone up.

In south Delhi, customers lining up outside grocery stores said that social dis-

tancing had now become a "part of life" and was being followed by all.

South Delhi resident Kanishk Sharma said, "By now people are well aware of the fact that social distancing needs to be maintained. In the first few days the shopkeepers were having to ask customers to maintain distance. But now it's become a part of life and a matter of habit."

Grocery store owners said that panic buying which the city witnessed when the lockdown was announced last month had reduced.

"Initially, people were buying essentials in large quantities fearing that the stock would run out. However, now they are buying items in limited quantities, enough to last them a couple of days, so that they are not required to visit the market every

day," said Subir Pramanik, who works at a south Delhi grocery store.

In west Delhi, the owner of a bakery selling bread and other essential edibles, identified as Niraj Kumar, said that people maintain distance irrespective of whether circles are marked or not.

Residents of Rajouri Garden said that they don't face any problem while buying essentials items, but com-

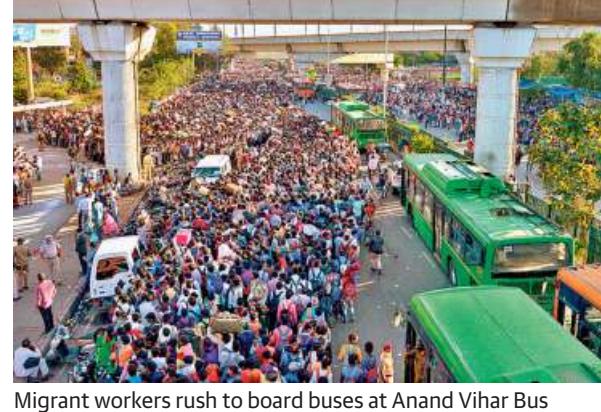
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Lockdown: where do they draw their Lakshman Rekha?



Migrant workers rush to board buses at Anand Vihar Bus Terminal in New Delhi. ■ FILE PHOTO

While the state could not foresee the exodus, the battle against COVID-19 has to be fought both in cities and villages

SUJATHA SINGH

Shortly after retiring, I volunteered to teach little children at a Corporation school in east Delhi. It was just for a few hours every week, but it was enough to understand just how closely their lives were bound up with their villages.

Nearly all of them were the first in their families to be receiving an education. Attending school was clearly an important part of their lives. There would, however, be long periods of absence when they would suddenly disappear. We understood, as their teachers, that most of them would not and could not be regular. That they would come back after month-long absences, because of a death in the family, or a marriage, or a harvest to help out with.

School was never allowed to come in the way of their obligations to their larger families back home in their villages. It was clear that they were here, in the big city, only because their fathers were plying a rickshaw or a pushcart, and their mothers cooking or sweeping in other people's households. The government-funded mid-day meal was often their first meal of the day. It was a precarious existence, a fragile toehold.

And yet it was their parents who were critical in making our megapolis function, just as the daily wagers were, in construction and other service sectors.

No anticipatory planning
The question that troubles me, is how and why they went so completely under the radar of the Establishment when the lockdown

was announced. Were they so invisible that their migration in thousands could not have been foreseen? Did we take them so much for granted that the thought never even crossed our minds?

Why was there no anticipatory planning or any steps taken and communicated before the lockdown was announced, to reassure them that yes, the state would feed them, house them and provide support and medical services? Not till several days after those gut-wrenching images flashed onto our screens of pregnant mothers, and little children riding piggyback on their fathers' shoulders, all heading home on empty highways and deserted streets. Walking back, with no social distancing and no soap and water to wash their hands.

We always knew that ours was a world of haves and have-nots. But did we ever realise how closely our lives were intertwined? Each one of us who lives in privilege in this country is dependent, to some degree or the other, on someone who doesn't. On someone who goes home to a cramped space that he or she shares with several family members.

Apart from the possible human toll and the socio-economic consequences of what might follow, the battle against COVID-19 has to be fought both in the cities and in the villages. We cannot leave anyone out. Indeed, we cannot afford to.

If this is to be a battle, then it has to include all of India, and within India, urban as

well as rural populations. There can be no accentuation of fault lines, of affluent over poor, of urban over rural, if only for the reason that this is mercifully a virus that neither respects such differences nor differentiates. Disregarding boundaries, it can, and will travel from our cities to our villages and then back again.

Life in the urban bubble
But as of now, here in an affluent part of the city, in the middle of the lockdown, life continues in the urban bubble. We have roofs over our heads, and doors to draw a Lakshman Rekha in front of, even if far too many of us step across it, as Sita once did.

We share, on social media, poems and music that we love, and images of gardens that we tend. New WhatsApp groups spring up, where we discover long-lost friends and promise to meet after the lockdown lifts, for a game of tennis, or a drink at the club. We exchange hilarious forwards and display a quirky sense of dark humour.

Those of us who otherwise follow important developments barely noticed when the Shaheen Bagh sit-in against the Citizenship (Amendment) Act ended after 101 days. The virus has overtaken us all.

Yes, I have my fears. That irrespective of how often I wash my hands for 20 seconds in something bordering WHO-prescribed OCD, irrespective of how many surfaces I disinfect, there are still too many undisinfected surfaces and too many novel coronaviruses out there for me to keep my 86-year-old mother safe. Deep down, there is a primeval fear that it is purely an act of God, or a roll of the dice, if you like, that will determine who gets the virus and who doesn't. And who lives or who dies.

We sit and wait in our cooped-up and socially distanced homes. And we know the waiting will be long.

Sujatha Singh is a former Foreign Secretary, Government of India.



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'Tests done in all 30 districts of Odisha'

SPECIAL CORRESPONDENT
BHUBANESWAR
The State government has covered all 30 districts of the State in conducting COVID-19 test, Odisha Mission Director of National Health Mission Shalini Pandit said here on Saturday.

Since about 80% of total 50 positive cases in the State so far were asymptomatic, special teams were holding camps at the gram panchayat level and collecting samples on a random basis to detect infections, said Ms. Pandit.

Observing that detection of more cases was not a bad sign, Ms. Pandit said testing of more samples will lead to ruling out of infections at the grassroots level. Stating that only 8% of the total COVID-19 patients in the State were found to be aged 60 years and above, Ms. Pandit said lockdown and social distancing had helped save the aged people who were at risk.

Gehlot suggests 'food for work' plan

Punjab CM seeks relief measures for people, concessions for industry and agriculture

MOHAMMED IQBAL
VIKAS VASUDEVA
JAIPUR/CHANDIGARH



COVID-19

Rajasthan Chief Minister Ashok Gehlot on Saturday suggested during a videoconference of Chief Ministers with Prime Minister Narendra Modi that the Centre launch a "food for work" programme, on the pattern of a similar initiative taken by the then Prime Minister Atal Bihari Vajpayee during the 2001-02 drought, to help out those whose livelihood was under threat during the nationwide lockdown. He said the Union government had a sufficient stock of foodgrains for such a scheme. During the interaction, Punjab Chief Minister Amarinder Singh also came up with suggestions for several health and relief measures for the people and special concessions for the industry and agriculture sectors on an urgent basis.

Mr. Gehlot said people like ragpickers, rickshaw and cart pullers, daily wage earners, nomadic workers and destitute persons were unable to earn their livelihood during the present crisis. "This food-for-work programme should be brought in a new form to give relief to such people," he said.

The Rajasthan government had compensated such vulnerable population by providing a cash amount of ₹2,500 each to more than 31 lakh families which were not covered by any other scheme, said Mr. Gehlot.

Mr. Gehlot reiterated his demand for a grant of ₹1 lakh crore to the States to enable them to deal with the pandemic. "The payment of first instalment should be made based on the population and the subsequent instalments given as per the prescribed formulas of the GST Council or the Inter-State Council," he said. He asked for an increase in the borrowing limit for the States as well as in the treasury deficit limit to 5% of the GDP.

The Punjab CM underlined the need to increase the number of tests being done and go for rapid testing, at least in the State's hotspots such as Nawanshahr, Dera Bassi and Mohali.

Capt. Amarinder further requested ₹500 crore for quick upgrade of infrastruc-

ture of government hospitals in Punjab. On the relief measures, he urged the Centre to defer recovery and waive interest and penalties on industrial loans for six months. He also asked the Centre to think of some innovative solutions for relief to daily wage workers and industrial labour either through ESIC funds or under Mahatma Gandhi National Rural Employment Guarantee Act.

Referring to the harvesting and procurement operations set to begin in Punjab next week, Capt. Amarinder reiterated his demand for bonus to farmers to incentivise staggered procurement of wheat.

He also called for quicker movement of foodgrains lying in FCI godowns in Punjab, along with waiver of three months' interest on crop loans and deferment of recovery of crop loans by commercial banks.

Four charged under NSA in Meerut for obstruction

They were arrested after a crowd prevented officials from sealing the area

SPECIAL CORRESPONDENT
GHAZIABAD

Four persons, including the imam of a mosque in Meerut, were arrested on Saturday, after a crowd allegedly stopped police from sealing the Jali Koti area of the city, police said.

Three persons from the area had tested positive on Friday night. "The area was to be sealed on Saturday morning. But when the city magistrate and the police tried to carry out the orders of the District Magistrate, a crowd gathered near the Dara Wali Masjid area and stopped them from carrying out their duty. Some stones were hurled at officials. They were pushed and shoved, leading to a minor injury to

the city magistrate," said Meerut Senior Superintendent of Police Ajay Sahni. "Action has started against the four under the National Security Act. We are making announcements that strict action would be taken those who will interfere in the work of the district administration," Mr. Sahni said.

Attack condemned

Sheher Qazi Zainus Sajidin Siddiqui condemned the attack. "Three persons belonging to a religious group were taken to hospital last night [Friday] and the officials came to take some others today [Saturday]. There are unverified reports that the policemen used abusive language but throwing stones at officials cannot be justified. I have appealed to all to cooperate," he said.

Meerut has 51 COVID-19 positive cases so far.

In a related development, a 58-year-old Ayurvedic doctor in Bulandshahr died in

Delhi's Safdarjung Hospital on Saturday, after testing positive for COVID-19, a district information department release said. With this, the death toll in U.P. has reached 5.

SDM Vedpriya Arya told *The Hindu* that the person was admitted to a Bulandshahr hospital on April 7. "Later, he was referred to Delhi where he tested positive on April 10. His clinic has been sealed. His son and wife have been quarantined in Delhi while two others have been tested and put in home quarantine," he said. He added that the nurses have been sent to institutional quarantine. "We are trying to find all the patients who visited the hospital in the last 14 days. Their samples will be taken."

According to the release, the Bulandshahr hospital has also been sealed and the samples of the doctor and medical staff are being taken.

'Allow window for return before lockdown extension'

J&K regional parties demand special flights for those stranded across States

PEERZADA ASHIQ
SRINAGAR

Regional parties in Kashmir demanded that Prime Minister Narendra Modi should ensure the shifting of stranded J&K residents before rolling out any fresh lockdown programme to counter the COVID-19 outbreak.

According to the J&K official figures, over 800 students and 2,500 others from J&K are stranded in 18 States across India.

National Conference leader Sajjad Shaheen appealed to the Prime Minister to keep in mind the plight of thousands of stranded students, labourers and small traders from J&K stuck in different

parts of the country. "The government should provide a window for return of these stranded persons so that they could return home and join their families," said Mr. Shaheen. The NC leader said he has been receiving SOS calls from the stranded people and their families.

'Survival difficult'

CPI(M) leader M.Y. Tarigami said the lockdown has made survival of hundreds of locals from J&K, stranded across the country, difficult. "Women and children also among the stranded. Handicrafts, labourers and students from J&K are stranded in Delhi, Himachal Pradesh, Punjab, Haryana. They have exhausted their earnings and are facing difficulties," he said.

A group of Kashmir labourers, who were reportedly putting up in a tent in Himachal Pradesh, were told

by the police to vacate. Several patients from J&K who had gone to Delhi and Chandigarh for treatment are stuck there, Mr. Tarigami said.

Jammu & Kashmir Apni Party president Altaf Bukhari also expressed concern over the plight of J&K residents stranded in various parts of the country.

"A number of J&K students and pilgrims evacuated by the Government of India from Iran have been declared negative for COVID-19 after spending a mandatory quarantine period in Mumbai and Rajasthan. Ironically, it is the J&K authorities who have shown complete indifference towards them and have refused their return to their homeland," Mr. Bukhari said.

He demanded special domestic flights to facilitate the return of the stranded J&K residents.

Woman entrepreneur stitches face masks for villagers

Suman also supplies special masks for doctors at Rajasthan primary health centre

MOHAMMED IQBAL
JAIPUR

Taking an initiative to help poor villagers during the COVID-19 pandemic, a woman entrepreneur running a craft centre in Rajasthan's Bharatpur district has started stitching face masks for protection against the novel coronavirus and is distributing them for free in rural areas.

COVID-19

The craft centre, Kirti Craft, in the small and dusty Konrer village has been offering livelihood opportunities to the poor and needy women by honing their skills for tailoring and employing them for garment production. Before the nationwide lockdown started, about 55 women were working at the centre.

Suman Singh, 43, who runs the centre, has decided to utilise the closure period

to stitch face masks and distribute them among villagers. "I stitch 80 to 100 masks everyday, spending six hours on my sewing machine. We distribute the masks every evening to villagers who gather at our centre while adhering to social distancing norms," Ms. Singh told *The Hindu*.

Kirti Craft is the biggest tailoring centre in Deeg block of Bharatpur district, making an annual turnover

of ₹20 lakh. The garments manufactured at the centre are sold locally and exported to Argentina, Germany and Japan through a Jaipur-based export house.

Bharatpur-based Lupin Foundation helped Ms. Singh in starting the tailoring centre at her home in 2013 and assisted her in obtaining loan for purchasing the single-needle lockstitch sewing machines. Ms. Singh later acquired a five-thread interlocking machine as well, which helps workers in speedily sewing of garments.

'Small contribution'

Ms. Singh said she had decided to distribute free masks because it would be wrong to earn profit during the current pandemic.

"This is our small contribution to the efforts to contain the spread of virus," she said, adding that she was also supplying double layer face masks for the use of doctors

and paramedical staff at the Primary Health Centre in Konrer.

The cotton fabric for masks is available in sufficient quantity at the centre, while the string or elastic is attached as per the need. Ms. Singh and her two children wash the cloth with sanitiser before stitching masks and take care of hygiene until they are given to the villagers.

Besides Konrer, which has a population of 4,500, nearby villages such as Kasot, Jatoli and Deeg have also benefited from Ms. Singh's initiative. Her unit is known in the region for its regular experiments with new designs, fabric and colours for garments. Ms. Singh was facilitated by the Union Ministry of Micro, Small and Medium Enterprises at a workshop of the Consortium of Women Entrepreneurs of India in Jaipur in February this year.

Odd-even scheme started in Aligarh

SPECIAL CORRESPONDENT
GHAZIABAD

The Aligarh administration has drawn inspiration from Delhi government to enforce the lockdown effectively in the city. Like Delhi tried to curb pollution by using the odd-even scheme for vehicles, Senior Superintendent of Police, Aligarh, Muniraj P. has directed residents to use vehicles ending in an odd number on odd dates and even-numbered vehicles on even dates during the lockdown. "Together with the District Magistrate, I felt that it could effectively control the movement of people. We are seeing positive results," said Mr. Muniraj.

Both two-wheelers and cars have been covered under the scheme. Mr. Muniraj said the police were motivating people to buy essential supplies for three-four days in one go.

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All in a day's work



Slogging on: (Clockwise from top) Farmers transporting tobacco leaves for curing in Ongole, Andhra Pradesh; people who violated lockdown restrictions being made to clean the Deviramman Lake in Mandy, Karnataka; and a migrant worker engaged in construction of the Vyttila flyover in Kochi, Kerala, on Saturday. ■ KOMMURISIRINIVAS, SPECIAL ARRANGEMENT & THULASI KAKKAT

Southern States want to retain the curbs

But Jagan Mohan Reddy says the lockdown should be limited to 'red zone' in Andhra Pradesh

STAFF REPORTER

VIJAYAWADA/BENGALURU/
THIRUVANANTHAPURAM/
HYDERABAD

Andhra Pradesh Chief Minister Y.S. Jagan Mohan Reddy told Prime Minister Narendra Modi at a video-conference on Saturday that it would be better if the lockdown was restricted to 37 mandals declared as the red zone out of the total 676 mandals in the State.

He informed that 44 mandals were in the orange zone and 595 in the green zone, where there was no trace of

the novel coronavirus.

Karnataka announced the extension of the lockdown till April 30.

The announcement came soon after Mr. Modi's meeting with the Chief Ministers.

Chief Minister B.S. Yediyappa said at a press conference in Bengaluru that unlike the ongoing 21-day lockdown, the Centre suggested that norms be relaxed in the next phase for fishermen, farmers, industry and labour. However, public transport is likely to remain off

the road and schools and colleges continue to be shut. "The Centre stressed the need for relaxation of the lockdown in a graded manner," he said.

Kerala Chief Minister Pinarayi Vijayan said the State would not immediately ease the restrictions. Addressing journalists after the video-conference with the Prime Minister, he said the meeting felt there should be no ground for complacency.

The country could ill afford to relax guard. Physical dis-

tancing norms would remain in place. So would the regulations on the coming and going of people in public places. The ban on air, sea and road travel and inter-State and inter-district journeys would endure.

Kerala was particularly vulnerable to a resurgence of the infection given its high density of population. Moreover, it anticipated an influx of Malayali diaspora when the global lockdown ended. Mr. Vijayan said the Centre would finalise its strategy

soon and it would give the States the latitude to execute their withdrawal plans.

Telangana Chief Minister K. Chandrasekhar Rao urged Mr. Modi to extend the lockdown by two weeks. He said the lockdown had helped to contain the spread of the virus to a great extent. During the lockdown, he said, the government should ensure that farmers did not suffer losses, the supply of essentials was streamlined and the food processing industry was allowed to function.

Mr. Vijayan said while focusing on containing COVID-19, one should not lose sight of other diseases, and those patients should not

suffer. District Collectors had been asked to remove "disinfectant tunnels" set up in public places, he said.

Mysuru cluster

Mysuru in Karnataka had five fresh cases on Saturday, and added to another five from the day before, the city was seen as an emerging

cluster. The source of infection in the first case from a pharma company in the district was not identified.

Eight new cases were re-

COVID-19

ported in Karnataka on Saturday, taking the total number to 215, according to official data.

A 10-month-old baby, the youngest patient in Karnataka in Mangaluru was discharged.

Of Saturday's new cases, apart from the five in Mysuru, the others included a 32-year-old private doctor, who got the infection from a patient, and a 10-year-old boy.

Tamil Nadu tally

Chennai was at the top of the list of COVID-19 cases in Tamil Nadu. With 10 more persons testing positive on Saturday, the city's tally surged to 182.

The day's highest was from Tiruvallur, with 16 of 58 persons who tested positive from that district.

In the last two days, two doctors – a government and a private doctor – have tested positive for COVID-19 in the city, officials said.

A.P. appoints former Madras HC judge as poll panel chief

STAFF REPORTER

VIJAYAWADA

In a development that caught everyone by surprise, the Andhra Pradesh government appointed a retired Madras High Court judge V. Kanagaraj as the State Election Commissioner (SEC) in place of N. Ramesh Kumar, who it expelled through an overnight ordinance.

Justice Kanagaraj served as a Madras High Court judge for nine years and has several landmark judgments



Mr. Ramesh Kumar took charge as the SEC in April 2016. He was in the eye of a storm since his postponement of the local body elections, purportedly due to the coronavirus scare, and for requesting the Union Home Ministry to give him protection by Central police forces.

This followed a sharp attack by Chief Minister Y.S. Jagan Mohan Reddy, who attributed motives to his (Mr. Kumar) decision to defer the polls.

Woman cured of

COVID-19 gives birth

Caesarean section performed on her

STAFF REPORTER

KANNUR

A woman, cured of COVID-19, gave birth to a boy at the Kannur Government Medical College Hospital on Saturday, the first such case in Kerala and the third in the country, according to hospital sources. A Caesarean section was performed on the 29-year-old Kasaragod native.

The woman had contracted COVID-19 from her husband, who was found afflicted on his return from Dubai. The couple were hospitalised on March 27. They were declared cured after their two test results turned negative and were scheduled to be discharged two days ago.

However, since the woman was nearing her delivery date, she stayed back, said S. Ajith, head of gynaecology, who led the surgery

team. The surgery was done in a specially equipped operating theatre with extra security measures.

Baby under observation

The couple are now housed in the isolation ward. The child, weighing 3 kg, will be under observation for some days.

N. Roy, Principal, Kannur Government Medical College, said special arrangements were in place at the operation theatre since a Caesarean had been done earlier on a suspected COVID-19 patient there. The woman was discharged after her results were negative.

Dr. Roy said 15 COVID-19 cases were treated and discharged from the hospital. Fifteen patients were still undergoing treatment. Two COVID-19-afflicted pregnant women had been cured.

WEATHER WATCH

RAINFALL, TEMPERATURE & AIR QUALITY IN SELECT METROS YESTERDAY



TEMPERATURE DATA: IMD; POLLUTION DATA: CPCB; MAP: INSAT/IMD (TAKEN AT 19.00 hrs)

Forecast for Sunday: Thunderstorm accompanied with lightning and gust likely at Assam, Meghalaya, Maharashtra, Arunachal Pradesh, Karnataka, and Mizoram.

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Agartala	~37.6	24.0	20.4	Kozhikode	~37.0	26.4	26.4
Ahmedabad	~42.0	23.2	21.2	Kurnool	~35.0	25.3	25.3
Aizawl	~35.6	17.5	17.5	Lucknow	~38.1	20.2	20.2
Aligarh	~41.6	20.0	18.0	Madurai	~37.8	26.2	26.2
Bengaluru	~32.2	21.0	21.0	Mangaluru	~37.0	23.1	23.1
Bhopal	~24.2	24.2	24.2	Mumbai	~34.8	25.0	25.0
Bhubaneswar	~39.6	25.3	25.3	Mysuru	~33.4	22.4	22.4
Chandigarh	~34.8	17.4	17.4	New Delhi	~36.9	19.1	19.1
Chennai	~33.5	27.4	27.4	Patna	~36.7	21.8	21.8
Coimbatore	~34.8	24.8	24.8	Port Blair	~32.6	24.7	24.7
Dehradun	~33.7	16.0	16.0	Puducherry	~34.1	27.0	27.0
Gangtok	~25.7	14.0	14.0	Pune	~38.4	21.0	21.0
Goa	~34.0	23.9	23.9	Raipur	~36.8	20.2	20.2
Guwahati	~31.0	19.3	19.3	Ranchi	~36.2	20.9	20.9
Hubballi	~36.0	23.0	23.0	Shillong	~23.7	19.5	19.5
Hyderabad	~35.2	23.4	23.4	Shimla	~22.8	11.4	11.4
Imphal	~32.3	15.5	15.5	Srinagar	~24.4	6.4	6.4
Jaipur	~39.6	25.1	25.1	Thiruvananthapuram	~34.4	26.3	26.3
Kochi	~33.8	26.0	26.0	Tiruchi	~36.9	25.6	25.6
Kohima	~22.2	12.5	12.5	Vijayawada	~38.5	25.4	25.4
Kolkata	~36.3	26.2	26.2	Visakhapatnam	~27.2		

(Rainfall data in mm; temperature in Celsius)

Pollutants in the air you are breathing Yesterday

CITIES	SO ₂	NO ₂	CO	PM2.5	PM10	CODE
Ahmedabad	34	44	14	.51	.77	■
Bengaluru	14	08	65	.51	.47	■
Chennai	08	05	23	.21	.21	■
Delhi	53	40	71	.10	.130	■
Hyderabad	07	14	13	.26	.40	■
Kolkata	07	10	18	.33	.39	■
Lucknow	04	31	53	.224	.31	■
Mumbai	04	10	09	.58	.91	■
Pune	37	13	51	.47	.45	■
Visakhapatnam	08	34	06	.31	.46	■

In observation made at 7.00 p.m., Kalaburagi, Karnataka, recorded an overall air quality index (AQI) score of 50, indicating healthy level of pollution. In contrast, Ramanagara, Karnataka, recorded a healthy AQI score of 33.

AQI Quality Code: ■ Poor ■ Moderate ■ Good (Readings indicate average AQI)

SO₂: Sulphur Dioxide. Short-term exposure can harm the respiratory system, causing breathing difficult. It can affect visibility by reacting with other air particles to form haze and stain culturally important objects such as statues and monuments.

NO₂: Nitrogen Dioxide. Aggravates respiratory illness, causes acid rain, pollutes coastal waters.

CO: Carbon monoxide. High concentration in air reduces oxygen supply to critical organs like the heart and brain. At very high levels, it can cause dizziness, confusion, unconsciousness and even death.

PM2.5 & PM10: Particulate matter pollution can cause irritation of the eyes, nose and throat, coughing, chest tightness and shortness of breath, reduced lung function, irregular heartbeat, asthma attacks, heart attacks and premature death in people with heart or lung disease.

Captive elephants under watch in Karnataka



Safe distance: The mahouts have been advised to minimise physical contact with the animals. ■ M.A.SIRAM

R. KRISHNA KUMAR
MYSURU
The COVID-19 advisory to monitor the health of captive tigers has now been extended to captive elephants in Karnataka.

Manoj Kumar, Deputy Conservator of Forests (DCF), Nagarhole, told *The Hindu* that there is no specific advisory from the Directorate of Project Elephant. But a communiqué has been issued by the principal chief conservator of forests (wildlife) to ensure sanitary conditions in jungle camps and to reduce human contact with elephants, he said.

These elephants are captured from the wild on being marked as "troublesome"

and indulging in crop raiding. They are darted, tranquilized, chained, and led to the crawls and tamed before being declared fit to serve in combing operations or in capturing other elephants that stray into human land-

scape. Some are rescued from circuses or have been sold to temples. Karnataka has nearly 150 captive elephants including those under the Forest Department.

Each elephant is assigned to a mahout and his assistant or kavadi who bathe, provide water, fodder, and maintain a general watch over them. In the wake of the advisory, the authorities have conducted health camps for mahouts and their families in the jungle camps and instructed them to minimize socialising with the pugilist in their hamlet.

Mr. Kumar said the premises of the mahouts and kavadi have been disinfected and even the ration they re-

ceive through PDS is subject to screening.

FROM PAGE ONE

14-day extension of lockdown likely

He added, however, that his government was amenable to whatever decision was taken by the Central government.

Punjab Chief Minister Captain Amarinder Singh asked for more funds for the rapid upgradation of health services in his State and a one-time increase in the borrowing limit from 3% to 4% of the State's GDP by amending the Fiscal Responsibility and Budget Amendment Act, 2003. He

also demanded a bonus for farmers to incentivise staggered/delayed procurement of wheat and quicker movement of grains from the godowns of the FCI.

Prime Minister Modi expressed distress at the instances of attacks on doctors and medical staff and at incidents of misbehaviour with students from the northeast and Kashmir.

He underlined that such cases need to be dealt with firmly.

Chief Ministers raise funds crunch with Modi

Echoing the complaint, Andhra Pradesh Chief Minister Y.S. Jagan Mohan Reddy said 62% of the workforce in his State was engaged in agriculture, which was hit by the drastic fall in inter-State movement of farm goods. With less than 25% of the trucks plying the highways, there were no marketing avenues. "How much can we absorb locally? Many families will face destitution if this continues," he said. The industries could not be expected to pay wages while they were not working, he added.

Mr. Jagan Mohan Reddy said restrictions should be limited to zones with a high number of cases. "There are 676 mandals, of which only 37 are in the red zone and 44 in orange. So there are only 81 mandals affected by the coronavirus. In my opinion, the lockdown should be limited to the red zone," he said.

'No air transport'
Chhattisgarh Chief Minister Bhupesh Baghel said economic activities should be allowed within the States. He said international air transport and inter-State transport and train services should not be restarted. He also pitched for a special package for the micro, small and medium enterprises.

West Bengal Chief Minister Mamata Banerjee raised the issue of constant interference from the Governors and the Lieutenant-Governors. "She told the Prime Minister that during this period of crisis some of the Governors are interfering in the day-to-day working of the State governments, which is now taking menacing proportions," Mr. Narayanasamy said.

Kerala Chief Minister Pinarayi Vijayan asked the Mr. Modi to arrange for special trains to transport migrant workers home. He said the government should give them wages for the next three months.

Migrant workers' protest turns violent

"As per the inputs from the intelligence office, migrant workers are stubborn to return their homes," Mr. Jha said. He also flagged that social distancing is not being maintained in the shelter homes and camps where the migrant labourers have been housed.

The situation is very precarious in certain pockets of migrants in the city. They have been asked to stay put in their huts and slums against their wishes; without work as factories are already shut, they want to go back to their villages and be with their families," a factory owner from Surat said.

In Amroli area where thousands of migrant live, they are restless without even two meals a day and no money and work," said Aslam Cyclewala, a Municipal Councillor in Surat.

He added that he was deluged with requests and

calls by migrants to arrange for their return to U.P., Jharkhand, Bihar and Odisha.

"There are more than three lakh migrant workers in Surat city and district who are keen leave," a source from the industry said.

He explained that most of the powerloom and textiles factories are Small and Medium Enterprises (SMEs) in the region employing less than 100 workers, mostly daily wagers.

As the factories shut down due to lockdown, workers have been rendered jobless for weeks without any wages or other means of income.

"It is unreasonable expectation from the industry that we should pay workers even as our factories are shut; our cash flow has dried up as no production is happening," he said.

West Bengal pulled up for lockdown violations

Mentioning markets in Raja bazaar, Narkel Danga, Topsia, Metiaburz, Garden Reach, Ikbalpur and Maniktala in Kolkata, the letter says, "Significantly, areas such as Narkel Danga are reportedly witnessing more COVID-19 like cases."

The letter added, "It has been reported that police have been allowing religious congregations. Free ration has been distributed not through the institutional de-

'8.2 lakh cases if there was no lockdown'

Centre justifies steps taken to fight COVID-19

JACOB KOSHY
NEW DELHI

With India recording a first-time-ever three-digit rise in the confirmed cases of COVID-19 in the past 24 hours, the Health Ministry on Saturday said that had a lockdown not been imposed, the country would have been staring at at least 8,00,000 cases by April 15. The Ministry reported at least 7,529 cases on Saturday.

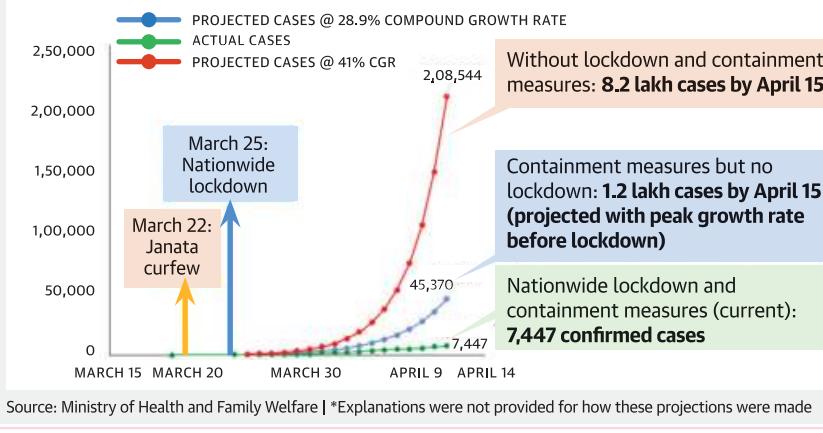
Reports from State Health Departments put the nationwide death toll at 287 with the number of active cases at 7,303. Maharashtra had 1,446 active cases with 17 more fatalities on Saturday, while Delhi recorded 1,024 active cases and five deaths.

The Indian Council of Medical Research (ICMR) – the technical arm of the Ministry that is overseeing testing and epidemiology – was not involved in preparing this estimate, Lav Agrawal, spokesperson of the Ministry, said at the daily media briefing.

He displayed a graph that showed three curves: One a

Different strokes

The Ministry of Health and Family Welfare's statistical analysis projected the growth rate of COVID-19 cases for the country. The various scenarios:



Source: Ministry of Health and Family Welfare | Explanations were not provided for how these projections were made

red curve, denoting neither lockdown nor containment in place, that steeply rose to 2,08,544 cases on April 9 (and with a note that it would extend to 8.2 lakh by April 15); a blue, gentler curve that rose to 45,370 by April 11 (and 1.2 lakh cases by April 15), the blue indicating the situation with "containment measures but no lockdown"; and the final green line indicating the 7,447 cases at present.

"Lockdown and containment measures are important to fight COVID-19. If we had not taken any measures,

we might have had 2 lakh cases at this time (April 11)," Mr. Agrawal added.

There were no further details available of how the projected figures were arrived at.

COVID-19

Determining the rate of spread of infectious disease is different from extrapolating a given number of cases at an initial point and assuming a particular rate of growth and plugging it into an exponential mathemati-

cal equation, experts told *The Hindu*.

"From just this graph alone, it isn't possible to work backward and figure out the assumption used by the modeller to arrive at the (2,00,000) figures. The curves assume a constant rate of growth, which is not what we've seen how the cases increase in India, or anywhere else in the world," Aritra Das, a medical doctor with a doctorate in epidemiology, who consults with IQVIA. "Estimating the growth in cases requires knowing an RO [reproduc-

States must evolve norms to help labourers return: Gadkari

Minister discusses economic revival once lockdown ends

NISTULA HEBBAR
NEW DELHI

The Enforcement Directorate has ordered the seizure of domestic assets worth ₹32.38 crore of Mumbai-based Jaya Patel for illegally acquiring properties overseas.

The order for seizure of two Mumbai properties has been issued under Section 37 A of the Foreign Exchange Management Act (FEMA).

The ED has also filed a complaint against Ms. Patel, daughter of the late Parmanand Tulsiadas Patel, before the competent authority, with a request to confirm the order.

According to the ED, Ms. Patel is associated with Ivory International Properties Limited, a company registered in the British Virgin Islands.

"She is only having a 1\$/ GBP share of Ivory International Properties. However, she is the beneficial owner of a flat at Chelsea Embankment, London valued at ₹15.25 lakh and another property at Central Park in the United States' New York, worth about ₹25.60 lakh, both acquired through Ivory International Properties," said an official. The agency has ordered seizure of assets in India.

agement Act now in place, the District Collector will be key. Whether factory owners can, with a letter from the Collector travel and speak to his employees who left etc, are issues that are on the table. We have conveyed this to various State governments to evolve guidelines to allow their return.

Speaking to *The Hindu* in a videoconference from his Nagpur residence (where he has been since the travel restrictions came into place), Mr. Gadkari said the plight of migrant labour was a deep concern going ahead.

"There are, according to some reports, nearly 20 lakh migrant labourers in shelters across the country; some have returned to their native villages, others are in between. It is a serious issue. Confidence-building measures will have to be undertaken by the government and the factory owners themselves in order that they may return," Mr. Gadkari said.

"As for the logistics of their return as and when the lockdown is eased, the guidelines will have to come from the State governments. Looking at the Disaster Man-

"We must reflect on the lessons from this crisis and one of the main ones is that we must manufacture much of what we need here, and also build an export market and replace other countries in those fields," the Minister said.

The MSME sector, he said, employs nearly 11 crore people and is labour intensive. The flight of labour has been a worry. "We are however, preparing bridge plans for the sector including encouraging rural craft and providing funding for village-based industry," he said.

Around 400 clusters with ₹2 crore corpus each have been identified for this project, titled Spoorit, he said.

Mr. Gadkari also made a case for strengthening domestic manufacture and indicated that going ahead, his Ministry at least would be emphasising on import substitution units within the country.

"When ever the lockdown lifts, it won't be business as usual. We will have to be COVID-19 ready in terms of shop floors etc and industry's culture has to respond to that," said Mr. Gadkari.

India wants to regain its position, ceded to China, in that field, he said.

The Ministry has already conveyed to the Finance Ministry its wishlist for the sector including a boost for the Credit Guarantee Trusts and working capital offered.

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"When ever the lockdown lifts, it won't be business as usual. We will have to be COVID-19 ready in terms of shop floors etc and industry's culture has to respond to that," said Mr. Gadkari.

INTERVIEW | S. IRUDAYA RAJAN & GINU ZACHARIA OOMEN

Indian labourers in GCC countries in dire need of help'

They are at the bottom of the pyramid and have little access to healthcare, say experts on migration

VARGHESE K GEORGE
NEW DELHI

Most Indian migrants in the GCC countries are at the bottom of the pyramid in their host countries. With limited access to healthcare, they are in need of urgent assistance, migration studies experts S. Irudaya Rajan and Gini Zacharia Oommen say in a joint e-mail interview. S. Irudaya Rajan is Professor at the Centre of Development Studies (CDS), Thiruvananthapuram and Member of the Kerala government expert committee on COVID-19. Gini Zacharia Oommen is a member of the Kerala Public Service Commission. Excerpts:

How are Indian migrants in GCC countries coping with the pandemic?

■ Their plight is no less desperate. Kerala CM Pinarayi Vijayan wrote to the PM on the issue. In the wake of the COVID-19 spread, the situation of Indian immigrants is very precarious.

Nurses, small businessmen, labourers have been infected in significant numbers and there is no care for them.

In Kuwait, Indian localities such as Jleeb Al Shuaikh and Mahboula have been quarantined; currently 530 of its 993 confirmed cas-

es are Indians. In Dubai, more than 500 Indians have been infected, particularly from Al Raz area. Similar situation in Qatar. These low and semi-skilled labourers have multiple ailments like diabetes, blood pressure, cholesterol and even kidney, liver problems and cancer.

Since medicines are expensive in Gulf countries, migrants often procure their medication from India and stockpile for three to four months.

Worryingly, there are reports these stocks have been used up and there is now an acute shortage. The Gulf countries lack broad-based

healthcare facilities to accommodate a high number of patients. Indian associations have appealed to the Indian missions, particularly in Dubai, to hire and convert Indian schools into isolation wards. Before the situation worsens, the Indian government should evacuate on a priority basis those immigrants without visa documents, dependants who are mostly elderly, women, children and unemployed persons.

Do their living conditions allow social distancing?
■ Most of them are single

men living in congested labour camps – using common toilets, rooms etc. One flat houses nearly 8 to 10 people using bunk beds, in what is commonly known as a "bed space".

Therefore, if anyone is infected, it will spread fast. At present, there are nearly 8 million Indian immigrants in GCC, of which nearly 2.1 million are from Kerala itself.

The immediate task is to chart out a strategy that will, initially, envisage a safe evacuation of emigrants back to India and their rehabilitation back in the home society.

Other States with high emigrant populations in the

region are Uttar Pradesh, Bihar, Bengal and Punjab.

Will the current pandemic change Kerala's approach to receiving labour from outside the State?

■ Some estimates put inter-State migrants in Kerala at about 30 lakhs while 21 lakh Malayalis work outside.

However, we call them replacement migrants – Kerala plumbbers in Dubai being replaced by plumbbers from Odisha, for instance.

The mass exodus of Keralites over the years has led to a situation where Kerala needs migrants from other parts of the country.

Kerala is doing a good job during the crisis in providing accommodation, medication and food for these migrants.

While the Kerala migrants are struggling for their safety and survival in Gulf, in sharp contrast, in Kerala the internal migrants have been protected and guarded in the most respectful manner –

Call for President's rule in M.P.

SPECIAL CORRESPONDENT
NEW DELHI

President's rule should be imposed in Madhya Pradesh if Chief Minister Shivraj Singh Chouhan is unable to form Cabinet, Rajya Sabha member from the State and senior advocate Vivek Tankha said on Saturday in a letter to President Ram Nath Kovind.

The Congress leader said the patience of the 7.5 crore people of the State was "wearing thin" as they face a grim situation with regard to the spread of the COVID-19.

He argued that an "illegally designed and poorly conceived one-man show" had been unconstitutional thrust upon the people amid a lockdown.

"If the Chief Minister is unable to form his Cabinet because of issues beyond his control, then a case of breakdown of constitutional machinery will be self-evident warranting the Union to consider the imposition of President's rule," Mr. Tankha said in the letter, copies of which were sent to the Prime Minister and the Home Minister.

tion number that denotes how many an infected person will further infect) and that can't be derived from what we now have."

Modelling study

A study in February, which was publicised on March 23, remains the only actual modelling study involving ICMR epidemiologists and international experts in the field. That study didn't estimate numbers but – based on the state of affairs in February – recommended that India should have focused on finding transmission in the community and quarantining instead of "border control" because of the large uncertainty in detecting asymptomatic travellers harbouring the infection and becoming spreaders.

Another ICMR study published this week found that 40% of those with severe respiratory illnesses sampled and detected with COVID-19 could not have their contact history established.

The ICMR said 1,71,718 samples were tested, including 16,564 in the last 24 hours. The government said it was containing the wide spread of the disease by establishing containment zones.

Kerala MP seeks Centre's nod for special flights

'Assist those stranded in GCC nations'

KRISHNADAS RAJAGOPAL
NEW DELHI

Kozhikode MP M.K. Raghavan on Saturday approached the Supreme Court highlighting the urgent need to establish a specialised team to identify Indian citizens stranded in the Gulf Cooperation Council (GCC) countries who need to be evacuated immediately in the wake of the COVID-19 pandemic.

He said the government needs to facilitate the evacuation of job seekers on visit visa, tourists stuck in the GCC nations – Saudi Arabia, Kuwait, the UAE, Qatar, Bahrain, and Oman – due to flight cancellations, children separated from their families, pregnant women, labourers and people who have lost their jobs due to the virus and migrants who cannot afford to travel back, etc, at public cost.

Mr. Raghavan, represented by advocate A. Karthik, urged the government to lift the ban on international flights and grant of specific approval for special flights to evacuate such people.

"However, this proved to be futile as the Indian airspace has been shut since the outbreak of COVID-19. Therefore, Indians continue to be stranded despite several gracious offers being made by airline operators to assist their return from



United fight: Women police personnel on patrol at Ghat Ki Guni in Jaipur; women maintaining physical distancing as they wait to collect masks, gloves and hand sanitisers being distributed by the Rapid Action Force (RAF) in Ahmedabad, Gujarat; people collecting foodgrains in Bhopal; and people wearing protective suits preparing to cremate a person who died of COVID-19 in Karad, Maharashtra. • PTI/A.M. FAROUQI



Maharashtra toll climbs to 127

Most COVID-19 cases from Mumbai; case-fatality rate stands at 7.2%

SPECIAL CORRESPONDENT
MUMBAI

Maharashtra recorded 187 new cases and 17 more fatalities from COVID-19 on Saturday, taking the total count to 1,761 cases and 127 deaths. Nearly 65% of the cases and 60% of the deaths have been reported from Mumbai.

State health officials said that of the Saturday's deaths, 12 were reported from Mumbai, two from Pune, and one each from Satara, Dhule and Malegaon.

"Six of the deceased were above 60 years, eight were in the age group of 40-60 years and three were below 40 years," said a State health official, adding that 16 out of these 17 patients had co-morbidities such as diabetes, hypertension, asthma and heart disease.

Increased testing

Maharashtra has conducted nearly 36,771 tests so far of which 34,094 have returned negative.

The State currently had 38,800 people under home quarantine and 4,964 people are in institutional quarantine. So far, 208 patients have recovered and been discharged from hospitals.

The number of fatalities in Pune district rose to 29 with three more deaths.

Maharashtra's case-fatality rate continued to rise to 7.2%, among the highest nationwide. Punjab's fatality rate stood at 8.3%, while in Madhya Pradesh it was 7.5%. However the number of cases and deaths recorded in these States were lower than



Virus scan: A doctor conducting temperature checks at Mukund Nagar, Dharavi. • PRASHANT NAKWANI

in Maharashtra.

Dr. Anup Yadav, head of Directorate of Health Services in Maharashtra said that the numbers of tests carried out in the State were much higher, resulting in more positive cases being detected.

"As far as the deaths are concerned, co-morbid conditions and age-related factors are the main reasons. We are carrying out detailed death audits to know the exact causes," said Dr. Yadav.

He flagged a worrying trend of many patients reaching isolation facilities at the last minute and succumbing before the doctors could do anything to save them. "The death audit will tell us if the virus is manifesting rapidly in some cases," he said.

Maharashtra to extend lockdown to April 30

SPECIAL CORRESPONDENT
MUMBAI

Maharashtra Chief Minister Uddhav Thackeray on Saturday announced that the lockdown in the State would continue till at least April 30.

On Saturday, Mr. Modi had chaired a video-conference with all the CMs.

"In today's video-conference, I got the first opportunity as Chief Minister of Maharashtra to voice my opinion," Mr. Thackeray said in an address to the State through social media.

"I said we will extend the lockdown beyond April 14 as

precautions are needed in Mumbai and Pune. We know the seriousness of the situation and we will do what needs to be done," he added.

Observing that the State government had not restricted agricultural activities and the transportation and supply of essentials, Mr. Thackeray appealed to the public to not get confused or panicky. He said the instructions about examinations in universities and schools, as well as norms for allowing industries to be operational, would be spelt out by April 14.

INTERVIEW | DR. SOUMYA SWAMINATHAN

Data is key to control of this pandemic'

Lockdowns alone can't be effective unless combined with other health measures'

ANANTH KRISHNAN

Dr. Soumya Swaminathan, Chief Scientist at the World Health Organisation, says in an interview that the fight against COVID-19 is likely to be long-term, and lockdowns alone cannot be effective unless combined with other health measures. Dr Swaminathan, who has worked in research on tuberculosis and HIV for 30 years, was Director General of the Indian Council of Medical Research from 2015 to 2017. Edited excerpts:

What do we know so far about how SARS-CoV-2 is spreading around the world?

■ Viral evolution and transmission dynamics can be studied by analysing genetic sequence data. There are over 4,500 viral sequences currently deposited in the GISAID platform, with around 10 Indian strains. What we see is, that over time, there is some variability in the strains. That is to be expected, as all viruses develop mutations as they transmit from person to person. What is not being observed so far is any mutation on any of the important sites of the virus, such as the spike protein or in the RNA polymerase or protease enzymes, which are relevant for drug targeting and vaccines. So we believe whatever strategies are now being used to develop both therapeutics or vaccines are not threatened by any changes in the virus.

What does the evidence tell us about the effectiveness of lockdowns as a strategy?

■ The WHO has laid out quite clearly that physical distancing, of which one extreme form is a lockdown, does help bring down the transmission of the virus in the population. What they saw in China [after locking down] was transmissions within households were still going on, so they then took an additional step that was basically testing everyone with symptoms, and taking those who were positive to a separate facility where they could be kept and treated, and the exposed persons to a separate quarantine facility.

We need to think about this in terms of the logic for doing that, which is if you are living in a crowded setting, chances are you are more likely to transmit to others.

Other public health interventions that are shown to be effective like hand-washing, disinfecting surfaces, covering the face and mouth when coughing, and usage of masks need to be all implemented together, to be effective. We also need to remember that we are going to be facing this infection for a long time, and will need to think of sustainable strategies, as we exit lockdowns eventually. People will need to change behaviour – continue to follow physical distancing, isolate if sick, improve personal hygiene, while the public health system will need to detect, iso-



late, treat and track cases.

Should everyone wear a mask?

■ Anybody who has symptoms should be wearing a mask. There is also no doubt that healthcare workers need to wear masks and proper Personal Protective Equipment (PPE) as they are the ones likely to see a lot of patients. When we are talking about the general population, the logic there is if you don't show symptoms but you still have the infection, you can still be spreading it. That is the logic for everybody wearing a mask.

Asymptomatic people spreading infection is not the bulk of transmission and whatever studies we have seen till now suggest it is not more than 10 to 15%. Wearing masks does not protect the wearer. You are wearing masks to protect others, so it's more of a social good.

Should India be testing more broadly?

■ Data is key to the control of this pandemic. We need to expand the number of people who are being tested.

The fact is, because of shortage of testing kits, we cannot simply test everybody. One way is looking at sentinel surveillance where you test a proportion of people with influenza-like illness (ILI) or Severe Acute Respiratory Infections (SARI), which the ICMR is already doing. Serological testing is also beginning to be used in many countries, from which you can get an idea of the extent of the population exposed and also the geographic spread of the virus.

Is there any evidence to suggest Hydroxychloroquine should be included in the treatment protocol?

■ The Solidarity trial launched 10 days ago is comparing Hydroxychloroquine, Remdesivir and Lopinavir/Ritonavir with and without interferon beta. The goal is to include more treatments as they come through and collaborate closely with groups around the world as they develop new therapies. The approaches are to find an antiviral drug, monoclonal antibody treatment or an adjunct therapy that helps modulate the body's response to the virus. There is currently no drug with proven efficacy against COVID-19. Some are being used on a compassionate-use basis, and not based on scientific evidence. Soon, we will get results from clinical trials which should inform us.

(Full text at bit.ly/SoumyaWHO)

IN BRIEF



Cancel summer vacation: lawyers urge SC judges

NEW DELHI

The Supreme Court Bar Association on Saturday unanimously resolved to press Chief Justice of India Sharad A. Bobde and other judges of the apex court to forego their nearly two-month-long summer vacation and make up for the time lost to the COVID-19 lockdown in the larger interest of litigants and justice. The resolution said lawyers were willing to work through the holidays, from May 16 to July 5.

Haryana to be divided into three zones

CHANDIGARH

Haryana Chief Minister Manohar Lal Khattar said on Saturday that amid the indication from PM Narendra Modi that the lockdown would be extended for two weeks, he directed that it be implemented in phases in the State. He said the State would be divided into three zones: red, orange and green. "The red zone will include the districts of Gurugram, Faridabad, Nuh and Palwal, which are the hotspots."

EPFO to credit its subscribers under PMGKY

NEW DELHI

The Employees' Provident Fund Organisation has put in place a mechanism to credit employers' and employees' contribution towards its social security schemes under the Pradhan Mantri Garib Kalyan Yojana (PMGKY). This will benefit 79 lakh subscribers and 3.8 lakh firms, with a outgo of ₹4,800 crore from government. PTI

Lockdown to continue with a human face, says Mamata

Markets to remain open; 6 more cases in the past 24 hours takes total to 95

SPECIAL CORRESPONDENT
KOLKATA

West Bengal Chief Minister Mamata Banerjee on Saturday emphasised that the lockdown in the State would continue with a "human face" and that markets would continue to remain open.

"The lock down will continue with a human face, markets will be open and shops selling essentials will remain



Asked about a letter from the Union Home ministry, which had reportedly raised questions about lockdown exemptions in the State, Ms. Banerjee consulted with

Chief Secretary Rajiva Sinha seated beside her before asserting that the ministry had only asked the State to remain more vigilant in certain areas. The ministry is reported to have flagged several concerns in its letter, contending that the police were allowing religious congregations and that there was no regulation in vegetable, fish and mutton markets where people had been thronging in complete violation of social distancing norms in Rababazar, Narkel Danga, Topsia, Metiabruz, Garden

Reach, Ikkalpur and Maniktala. The Home ministry is also said to have asserted that areas such as Narkel Danga were witnessing 'more COVID-19 like' cases.

Observing that the novel coronavirus "is not a communal virus", Ms. Banerjee added. "It is a human disease".

The Chief Minister said she had raised the issue during the videoconference with Prime Minister Narendra Modi earlier in the day that this "was not the time to indulge in politics".

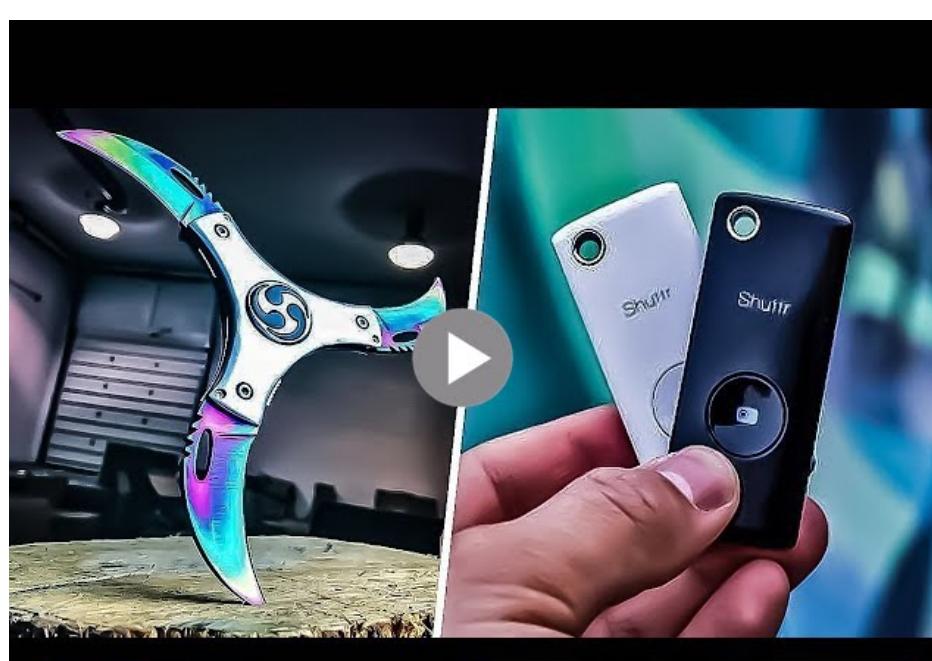
Ms. Banerjee also reacted

sharply to repeated questions about the hotspots in the State and countered: "Why are you interested in hotspots. There is nothing called hotspots. We are closely keeping a watch on areas where we have got patients". She said that a better term to use in the situation was "sensitive areas", where the State was engaged in "microplanning" its response.

No reason to panic'

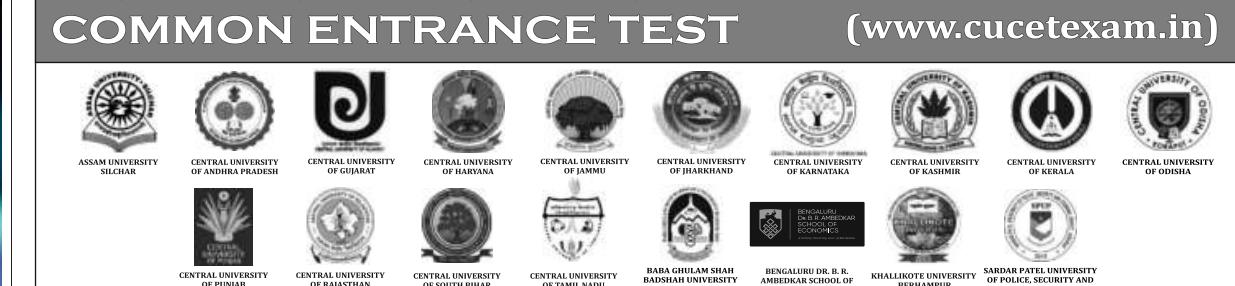
Six more cases of COVID-19 were detected in the State in the past 24 hours, taking the

number of active cases to 95. The CM said that there was no reason to panic as the numbers would increase. The State has tested 2,286 persons for COVID-19 infection. Asked if the number of tests was low, she said that the State had been following ICMR guidelines and testing only those with symptoms. "We had only two labs and 40 testing kits," she said. Ms. Banerjee said the State had asked the Centre for rapid testing kits and more tests would be conducted in the next few days.



SC urged to modify order on free COVID-19 testing by private labs

CENTRAL UNIVERSITIES COMMON ENTRANCE TEST



Central Universities Common Entrance Test (CUCET-2020) is scheduled during May - June, 2020 for admission to different Programmes of 14 Central Universities and 4 State Universities at different centres across the country

IMPORTANT DATES

Opening of Online Application Form	16 March, 2020
Closing of Online Application Form <small>Last Date Extended</small>	25 April, 2020
Issue of Admit Cards	18 May, 2020

GENERAL INFORMATION:

- * Detailed information about CUCET-2020 is available on CUCET website: www.cucetexam.in
- * Candidates are required to apply [online](#) through CUCET-2020 website
- * Candidates who are appearing in the final examination of the qualifying degree/certificate are also eligible to apply
- * Details of Programme of Studies, Eligibility Criteria, Programme Structure, Faculty Profile etc. are available at the respective website of Participating Universities (PU) and candidates are advised to check the eligibility criteria of each PU for a given programme before applying for CUCET-2020
- * All Research Programmes (RP) examination will be conducted in Computer Based Test (CBT) mode
- * All Integrated/ Under-Graduate (UI) and Post-Graduate (PG) examination will be conducted in Offline (OMR) mode
- * CUCET-2020 provides facilities for applying to admission to these universities by single examination process with nominal examination fees
- * Online admission counselling facility is available for some universities with additional fees

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ADMISSION QUERY : Mob.: 9560268076 Phone: (24X7 Help desk) 01463-238728(CURAJ) E-mail : enqcu2020@curaj.ac.in

Drug candidate, on trial, holds promise

Findings highlight that virus replication inhibitors could be effective: expert

RAMYA KANNAN
CHENNAI

A recent article published in the journal *Science* has shown that the already-promising drug candidate remdesivir, on trial now, exhibits promising activity against the COVID-19 causing virus and might work well in retarding virus replication.

The SARS-CoV-2 virus exists as a mere strand of RNA and it requires a host to replicate. Scientists have discovered that the active site of RDRP shows striking similarities with the Polio Virus and the Hepatitis C virus, and using that knowledge, they have tried to use known drug candidates that work in that RDRP environment and work back to see if they are effective with the novel coronavirus. They also showed exactly where on the RNA dependent RNA polymerase – the main machinery to

On the trail

After finding striking similarities between the RNA of the COVID-19 virus, the polio virus and the hepatitis C virus, scientists decided to employ the drugs that are known to work with the other viruses, going backward to establish the links



▪ Remdesivir binds well with nsp12, the main machinery to form strands of RNA

▪ The more easily the binding, the better will be the ability of the drug to deliver

▪ These drug candidates have already been through scientific trials, and their safety and efficacy have already been tested

▪ India is already manufacturing Sofosbuvir, also mentioned as a potential candidate in the study

Science Centre, Boston University.

"The RNA polymerase is what is used to replicate. Here, it began with the identification of similarities in viruses with which we are already familiar – Polio Virus and HCV. If the binding happens with the drug, virus proliferation can be reduced. Then, the stress on the immune system too will come down. This can reduce, to a large extent, the number of people slipping into a critical stage, having a positive impact on mortality

and survival rates," explains V. Dhanasekaran, a structural biologist, who also runs an education start up.

The good news is that these candidates that seem to work well have already been tested, the safety and efficacy has been proven for other usage. Dr. Dhanasekaran adds. The study indicates sofosbuvir, along with remdesivir as probable candidates. Sofosbuvir is already being made in India to treat Hepatitis C, he adds.

Currently, remdesivir, which is made by the Ameri-

can pharma company Gilead Sciences, is not available in India. With over 16 lakh cases of Corona-19 in 213 countries across the world, as per WHO statistics, and a record 99,690 confirmed deaths,

the race to pick a winning candidate for treating COVID-19 and reducing the mortality and morbidity from the disease. A couple of trials, are already ongoing to test remdesivir, which has already emerged as a promising candidate. This study further reinforces the viability of using the drug.

CM fund contributions to not qualify as CSR spend

Against principle of federalism, says CPI(M) leader

SPECIAL CORRESPONDENT
NEW DELHI

The Ministry of Commerce has clarified that the contributions to the Chief Minister's Relief Fund or the State relief fund will not qualify as Corporate Social Responsibility expenditure, while any donation to the PM CARES Fund will.

"The Chief Minister's Relief Fund or 'State Relief Fund for COVID-19' is not included in Schedule VII of the Companies Act, 2013, and therefore any contribution to such funds shall not qualify as admissible CSR expenditure," it has said in a circular.

The circular has said donations to the State Disaster Management Authority to combat COVID-19 can be counted as admissible CSR



Sitaram Yechury

expenditure.

CPI(M) general secretary Sitaram Yechury flagged the circular on Twitter and said it was discriminatory and went against the constitutional principle of federalism. "States are at the forefront of this battle to contain the spread of COVID-19, and they are being strangled away at the Centre in this fight," he said.

He sought an immediate amendment to Schedule VII of the Companies Act to permit the States to access these funds which could save millions of lives.

Veterans condemn 'red tape'

DINAKAR PERI
NEW DELHI

Veterans took to social media to express their outrage after the parents of a decorated officer, a Colonel from the Para Special Forces (SF) who died fighting cancer, were forced to travel by road from New Delhi to Bengaluru for the last rites due to confusion in rules between the Defence and Home Ministries. They reached Bengaluru by Saturday night.

Colonel Navjot Singh Bal, 39, who commanded the elite 2 Para SF of the Army, was fighting a rare form of cancer and passed away at a military hospital in Bengaluru on April 9. He was awarded the Shaurya Chakra, the country's third highest gallantry award, in 2008.

His father, Lt. Col. K.S. Bal, is a veteran from Garhwal Rifles and is based in Gurugram.

At the time of Col. Bal's passing, his parents were in Amritsar and were forced to make the long road journey after confusion between the Defence Ministry and the Home Ministry over approval for service aircraft.

"Deepest condolences! Have a safe journey. Sad GOI (Government of India) did not help. Rules are never written on stone. They are modified or changed in special circumstances," former Army chief Gen. V.P. Malik tweeted. There was a deluge of messages from the veteran community expressing their condolences to the grieving parents and condemning the red tape in not ensuring approval for use of aircraft in such an extraordinary circumstance.

The family was given the option to airlift the mortal remains to Delhi to perform the last rites. However, Col. Bal's wife and children were in Bengaluru; so his parents wanted to travel there instead, a defence official said.

Sangha, the apex body of plantation workers, said the gardens had been instructed to adhere to the guidelines of World Health Organisation and Assam's Health Department.

"Guidelines have been issued and each garden will be sealed with a ban on entry and exit during the lockdown," Sangha General Secretary Rupesh Gowala said.

Assam has 803 tea estates employing 7.21 lakh workers. At least 10 lakh other workers work with 1.8 lakh small tea gardens.

'Repatriate stranded seamen'

Associations appeal to Goa Chief Minister Pramod Sawant

SPECIAL CORRESPONDENT
MUMBAI

Seafarer groups on Saturday met Goa Chief Minister Pramod Sawant to seek his assistance in ensuring the repatriation of thousands of Indian seamen stranded on ships across the world.

The Goan Seamen Association of India (GSAI) President Frank Veigas said the government needed to come up with a contingency plan. "The plan's execution lies with the State. They have to convince the Prime Minister. Just the way we are repatriating foreign nationals, getting our own countrymen employed on various ships is also important," he added.

Estimating that about 15,000 Indians work on cruise ships and other merchant vessels, the GSAC emphasised that at least 8,000 of these seamen were from



In need of help: About 15,000 Indians work on cruise ships and other merchant vessels. ■ SPECIAL ARRANGEMENT

Goa. "It is the crew on cruise liners, that have been hit the most," said GSAC representative Dixon Vaz. "The crew have already been in quarantine for so many days. They can be flown back in batches of hundreds, which their companies will do. They could be easily accommodated in hotels in a green

zone," he added.

The GSAC said countries like the Philippines and Indonesia had evacuated hundreds of their crew from vessels off Portugal and Italy over the last few days.

"Indian seamen have been left in limbo by the country's ban on incoming flights," Mr. Vaz observed.

Sigh of relief



Battle won: A patient who recovered from COVID-19 leaving the district hospital in Palakkad on Saturday. ■ K. K. MUSTAFAH

AIDWA seeks interest-free loans for women in SHGs

'Banks apply compound interest rates that are exploitative'

SPECIAL CORRESPONDENT
NEW DELHI

A women's rights group has written to Finance Minister Nirmala Sitharaman, urging that bank loans to women self-help groups (SHGs) be made interest free to help those in the unorganised sector who have lost their jobs and are unable to repay their loans.

"Nearly six crore women are members of SHGs with bank linkages in both urban

and rural areas. They are utilising these loans for income generation activities, namely selling fruits and vegetables, groceries, dairy, agriculture and also for their children's education, health and other family expenses," the All India Democratic Women's Association (AIDWA) wrote, adding that banks apply exorbitant compound interest rates of 18-24%, which are exploitative considering that most wo-

men, who are part of SHGs, live in extreme poverty. Last month, in her announcement on the relief package for the country under lockdown, the Minister doubled the limit for collateral-free loans for SHGs from ₹10 lakh to ₹20 lakh. It is this loan amount that the AIDWA wants to be offered interest free. They also demanded that a moratorium on EMIs for three months be further extended.

Work resumes at Assam tea gardens after a fortnight

This follows Centre's green light with strict protocols, including working with 50% of the workforce

SPECIAL CORRESPONDENT
GUWAHATI

Work in some tea gardens in Assam resumed on Saturday after a fortnight due to the COVID-19 lockdown.

Plantation owners and members of the Indian Tea Association (ITA) said preliminary work had begun at some major estates and small tea gardens in Darjeeling, Dibrugarh and Jorhat districts.

ITA chairperson Vivek Goenka had on April 4 written to State Chief Secretary Kumar Sanjay Krishna seek-

ing reopening of the tea estates with 50% of the workforce as had been permitted by the Centre a day earlier. "We asked the Deputy Commissioners to take decisions as per the Government of India's direction, garden-wise, if the management and the workers want to resume operations after they assure the local administration that they will maintain all advisories," Mr. Krishna said.

Assam Tea Planters' Association chairperson Nazrana Ahmed said the workers will restrict their activities to



Step by step: The gardens were instructed to adhere to the guidelines of the Assam Health Department. ■ RITU RAJ KONWAR

plant protection, irrigation and sanitisation at workers' settlements. "The opera-

tions will be in a staggered manner," she said.

The Assam Chah Mazdoor

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DIFFICULTY RATING: ★★★★★

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CM YK

Groups hail ban on spitting in Rajasthan

'Measure will help check transmission'

SPECIAL CORRESPONDENT
JAIPUR

Voluntary organisations working for tobacco control on Saturday welcomed the Rajasthan government's decision to ban spitting in public places and institutions. They said the measure would help to prevent transmission of COVID-19.

The activists also demanded a complete ban on sale, distribution and advertisement of tobacco products as a part of the efforts to control the pandemic.

The State government has banned the spitting of betel leaf, any chewable tobacco or non-tobacco products or sputum in public places and institutions under the Rajasthan Epidemic Diseases Act, 1957. Any violation would invite penal action under Section 188 (disobedience to order duly promulgated by public servant) of the Indian Penal Code.

Additional Chief Secretary (Medical & Health) Rohit Kumar Singh said it was necessary to place restrictions on the "unhealthy habits" of people.

Groups that have undertaken a sustained campaign for tobacco control in the last four years said the ban on sale of tobacco and its products would not only help in containment of COVID-19 but would also strengthen the government's 'Nirogi Rajasthan' campaign which was launched in December 2019 to create awareness of diseases and their prevention.

Jayesh Joshi, secretary of the Banswara-based VAAGDHARA, a non-governmental organisation, said the smokers and tobacco users were at a higher risk of infection. The World Health Organization (WHO) has also warned of virus transmission from hand to mouth while smoking.

U.S. reports highest daily death toll

2,108 people die in America in one day as global toll surges past 103,000; Trump says the peak is near

AGENCE FRANCE-PRESSE
ROME

The U.S. became the first country to report more than 2,000 coronavirus deaths in a single day, marking a grim milestone as billions around the world celebrated the Easter holiday weekend under lockdown from home.

The global death toll from the virus surged past 103,000 on Friday, with the U.S. quickly becoming the epicentre of the pandemic that first emerged in China late last year. Europe has so far shouldered the majority of all deaths and infections – though there were signs of hope the curve could be starting to flatten in some of



Front-line warriors: Nurses and healthcare workers in Manhattan, New York, on Friday mourning and remembering their colleagues who died due to the outbreak. ■ AFP

COVID-19

the hardest-hit countries.

In France, nearly 1,000 new deaths were confirmed on Friday but the country reported a drop in the number of intensive care patients for a second day running. Italy, meanwhile, said the number of daily deaths was starting to level off – though the government resisted pressure to lift its lockdown, extending confinement measures until May 3.

Most deaths in Italy

With 18,849 dead, Italy has the highest global death toll, but it is likely soon to be surpassed by the U.S. where fatalities continued to mount this week. On Friday, the U.S. reported 2,108 new deaths, the highest daily toll out of any country since the outbreak was first reported in the central Chinese city of Wuhan in December.

With more than half a million reported infections, the U.S. already has more coronavirus cases than anywhere

else in the world. The global infection rate now stands at more than 1.7 million, though with many countries only testing the most serious cases, the numbers are likely far higher. But President Donald Trump said that with the U.S. infection trajectory “near the peak” and social distancing working well, he was considering ways to reopen the world’s biggest economy as soon as possible. He acknowledged the risk of higher death tolls if businesses restart too soon – after the World Health Organization on Friday cautioned countries against lifting lockdown measures too quickly.

“But you know what? Staying at home leads to death also,” Mr. Trump added, pointing to the economic suffering for millions of Americans. It is unclear when that will be possible, with New York Governor Andrew Cuomo saying millions in the State will have to be tested before it can reopen. “We can’t say that there is no such potential risk,” said

REUTERS
WUHAN

China reported on Saturday a rise in new coronavirus infections, mostly in travellers arriving from abroad, as doctors in the central city of Wuhan, where the virus initially emerged, warned its behaviour was still not well-understood.

Tough curbs imposed in China since January have reined in infections sharply since the height of the pandemic in February, although it has spread worldwide to infect 1.6 million people with 1,00,000 deaths. But Chinese authorities fear the possibility of a second wave triggered by arrivals from overseas or asymptomatic patients.

“We can’t say that there is no such potential risk,” said



A passenger at the Tianhe Airport in Wuhan. ■ AFP

Wang Xinghuan, president of Wuhan’s Leishenshan hospital, its second built especially for virus patients.

While some experts do not expect a big second wave, thanks to China’s stringent controls, the possibility could not be ignored, he told reporters.

Spain's daily toll falls again

AGENCE FRANCE-PRESSE
MADRID

Spain registered a fall in its daily death toll from the new coronavirus for a third consecutive day on Saturday with 510 people dying, the government said. It was the smallest daily increase since March 23 in Spain, which is suffering one of the worst COVID-19 outbreaks in the world.

The update for the last 24 hours raised the country’s overall number of fatalities to 16,353 and the number of confirmed cases to 161,852.

China reports rise in imported cases

REUTERS
WUHAN

China reported on Saturday a rise in new coronavirus infections, mostly in travellers arriving from abroad, as doctors in the central city of Wuhan, where the virus initially emerged, warned its behaviour was still not well-understood.

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“We can’t say that there is no such potential risk,” said

“At present, from the hospital perspective, our understanding of the virus is still very insufficient,” Mr. Wang said, during a hospital tour organised by Wuhan officials.

For instance, it was not immediately clear how infectious asymptomatic people were, he added. The National Health Commission said 46 new cases were reported on Friday, including 42 from abroad, up from 42 a day earlier, as Hubei province, whose capital is Wuhan, reported no new cases for a seventh successive day.

Of the new imported cases, 22 were in the northeastern province of Heilongjiang, where Chinese nationals crossing over the border from Russia figured in a recent spike in cases.

U.S. announces visa sanctions on nations refusing to accept citizens

Order comes in the wake of COVID-19 pandemic

SRI RAM LAKSHMAN
CHENNAI

President Donald Trump has ordered the relevant departments of his administration to impose visa sanctions on countries that do not accept their citizens who are currently in the U.S., if the U.S. seeks to repatriate them to their home countries.

The order is motivated by the COVID-19 pandemic, according to a memorandum issued by the White House on Friday night.

“Countries that deny or unreasonably delay the acceptance of their citizens, subjects, nationals, or residents from the United States during the ongoing pandemic caused by SARS-CoV-2 create unacceptable public health risks for Americans. The United States must be

able to effectuate the repatriation of foreign nationals who violate the laws of the United States,” the order says.

Scope of the order

As it is worded, the scope of the order is unclear. While the clause above says it is motivated by the U.S. wanting to repatriate foreigners violating U.S. laws, there is another clause that says the sanctions process could be initiated if a foreign country delays accepting its nationals and such an action hampers the U.S.’s response to the ongoing pandemic.

The Secretary of Homeland Security shall inform the Secretary of State, “... if any government of a foreign country denies or unreasonably delays the acceptance

of aliens who are citizens, subjects, nationals, or residents of that country after being asked to accept those aliens, and if such denial or delay is impeding operations of the Department of Homeland Security necessary to respond to the ongoing pandemic caused by SARS-CoV-2.”

Within seven days of receiving such a notice from the Department of Homeland Security, the Secretary of State is required to initiate a plan to impose visa sanctions.

Sanctions shall end when the Secretary of Homeland Security certifies that the host countries are accepting their nationals.

The memorandum expires on December 31 this year unless extended.

Apple, Google plan software to slow spread of virus

REUTERS

San Francisco Apple Inc and Alphabet Inc’s Google said on Friday that they will work together to create contact tracing technology that aims to slow the spread of the coronavirus by allowing users to opt into logging other phones they have been near.

The rare collaboration between the two Silicon Valley companies could accelerate usage of apps that aim to get potentially infected individuals into testing or quarantine more quickly and reliably than existing systems in much of the world. Such tracing will play a vital role in managing the virus once lockdown orders end, health experts say.

To be effective, the Silicon Valley system would require millions of people to opt in to the system, trusting the technology companies’ safeguards, as well as smooth oversight by public health systems. Under the plan, users’ phones with the technology will emit unique Bluetooth signals.

People who test positive for the virus can opt to send an encrypted list of phones they came near to Apple and Google, which will trigger alerts to potentially exposed users to seek more information. Public health authorities would need to sign off that an individual has tested positive before they can send on the data. The logs will be scrambled to keep infected individuals’ data anonymous, even to Apple, Google and contact tracing app makers, the companies said. Apple and Google said their system will not track GPS location.

Virus kills Brazil tribal boy

AGENCE FRANCE-PRESSE
BRASILIA

A Yanomami indigenous boy has died after contracting COVID-19, authorities in Brazil said on Friday, raising fears for the Amazon tribe, which is known for its vulnerability to disease. The 15-year-old boy, the first Yanomami to be diagnosed with the virus, was hospitalized a week ago at an intensive care unit in Boa Vista, the capital of the northern State of Roraima, officials said.

He died of severe respiratory complications on Thursday night, said the Brazilian Health Ministry.

A Yanomami rights group said the boy had come in to contact with “many” other indigenous people after he began showing symptoms.

The Hutukara Associa-



A Yanomami settlement in Venezuela, near its border with Brazil. ■ REUTERS

tion blamed “inadequate medical care” for the boy’s death, saying he went more than two weeks without a diagnosis from the time he first went to the hospital with symptoms. It called on the authorities to help them undergo testing and self-isolation.

It also urged the government to crack down on illegal gold miners on indigenous lands, believed to be the source of the contagion.

Taiwan, WHO clash over ‘early warning’ claim

Health body accused of ignoring alert on human-to-human transmission



Taiwan's Minister of Health Chen Shih-chung. ■ AFP

samples are still under examination, and cases have been isolated for treatment. I would greatly appreciate if you have relevant information to share with us.”

The email did not mention human-to-human transmissions, but Taiwan’s Foreign Ministry, in a tweet, said, “treated in isolation means human-to-human transmission”.

Both Taiwan and the U.S. had accused the WHO of ignoring a December 31 warning of “human-to-human transmissions” from what was then an unknown pneumonia.

On Saturday, Taiwan’s Health Minister Chen Shih-chung quoted the text of the December 31 email, which read: “News resources today indicate that at least seven atypical pneumonia cases were reported in Wuhan, China. Their health authorities replied to the media that the cases were believed not to be SARS, however, the

deal requires the Afghan government – which was not a signatory to the accord – to free up to 5,000 Taliban prisoners, and for the militants to release 1,000 pro-government captives in return.

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LIC extends deadline for premium

SPECIAL CORRESPONDENT
HYDERABAD

The Life Insurance Corporation of India (LIC) on Saturday said the grace period to remit premium is being extended by one month in respect of all policies whose premium due date is either March or this month.

This is to mitigate the hardships being faced by policyholders in payment of the premium in the wake of the COVID-19 pandemic, the insurance major said.

LIC is also extending the grace period till April 15 for customers who were unable to pay premium that was due in February even within the March 22 grace period.

Death claims arising due to COVID-19 shall be treated on a par with other causes of death and payments shall be made on an urgent basis. COVID-19 has already claimed many lives and efforts are being made by LIC officials to locate the virus victims on the basis of lists provided by government authorities to help the families. Already, under death claims due to COVID-19 16 policies have been settled without losing any time, a release from LIC said. LIC offices were operating with skeletal staff. All other employees are working from home to ensure customer services are provided normally to the extent possible under current circumstances, the release said.

TRAI wants set top boxes to be made interoperable

Asks I&B Ministry to make changes in licensing norms

SPECIAL CORRESPONDENT
NEW DELHI

The Telecom Regulatory Authority of India has recommended that all set top boxes (STBs) in the country must be interoperable, meaning that consumers should be able to use the same STB across different DTH or cable TV providers.

The regulator also suggested that the Ministry of Information and Broadcasting make the required amendments in licensing and registration conditions to make interoperability mandatory.

"The lack of interoperability of set top boxes between different service providers not only deprives the customer of the freedom to change her/his service provider, but also creates a hindrance to technological innovation, improvement in service quality, and the overall sector growth," the TRAI said.

It noted that while the STBs deployed in the cable TV networks are non-interoperable, those by direct-



The lack of interoperability affects improvement in service quality, TRAI observed. ■ P.V. SIVAKUMAR

to-home (DTH) players complied with licence conditions to support common interface module based interoperability. However, in practice, even in the DTH segment the STBs are not readily interoperable.

Noting that there are technical and commercial constraints to the universal STB, it added that the interoperability should be platform-specific, i.e., STBs are interoperable within the cable TV segment and similarly within the DTH segment. TRAI also recommended that a coordination commit-

tee be set up by the I&B Ministry to steer implementation of revised STB standards for both the DTH and the cable TV segments.

"Further, the committee may maintain continuous oversight for setting up of the digital TV standards by BIS to provide for Digital Video Broadcasting Common Interface Plus (DVB CI+) 2.0 port based on ETSI (European Telecommunications Standards Institute) TS 103 605 standards and to have provision for reception of both DTH and cable TV signals," it said.

Over 30 crore poor get ₹28,256 cr. under PM Garib Kalyan Yojana

₹13,855 cr. gone towards PM-KISAN first instalment payment

PRESS TRUST OF INDIA
NEW DELHI

More than 30 crore poor people have received financial assistance of ₹28,256 crore under the Pradhan Mantri Garib Kalyan Yojana announced by Finance Minister Nirmala Sitharaman last month to protect them from the impact of the lockdown.

As part of the ₹70 lakh crore relief package, the government announced free foodgrains and cash doles to

women and poor senior citizens and farmers.

"More than 30 cr. beneficiaries have been directly given support through Direct Benefit Transfer amounting to ₹28,256 cr. under #PradhanMantriGribKalyanPack," a tweet from the Finance Ministry said. Of the total disbursement, ₹13,855 crore has gone towards payment of the first instalment of PM-KISAN. Under the scheme, nearly 6.93 crore

out of the 8 crore identified beneficiaries got ₹2,000 directly in their account. As many as 19.86 crore women Jan Dhan account holders received ₹500 each in their account. The total disbursement under the head was ₹9,930 crore, it said.

The National Social Assistance Programme (NSAP) disbursed about ₹1,400 crore to about 2.82 crore old age persons, widows and disabled persons, it added.

Holdings in gold-backed exchange traded funds at all-time high in March

A record-breaking quarter as holdings, assets added \$23 bn in net inflows: WGC

SPECIAL CORRESPONDENT
MUMBAI

At a time when stocks globally witnessed huge sell-offs and volatility, holdings in gold-backed exchange traded funds (ETFs) reached an all-time high in March.

According to the World Gold Council, March capped a record-breaking quarter as gold ETF holdings and assets added \$23 billion in net inflows – the largest quarterly gain in history.

"Global gold-backed ETFs and similar products added 298 tonnes, or net inflows of \$23 billion, across all regions in the first quarter of 2020 – the highest quarterly amount ever in absolute dollar terms and the largest tonnage additions since 2016," the World Gold Council said in a report.

Further, trading volumes



Trading volumes reached record highs as gold volatility went up to levels last seen during the financial crisis. ■ REUTERS

and assets under management (AUM) reached record highs as gold volatility increased to levels last seen during the financial crisis, even as gold price performance was mostly flat in dollar terms for the month.

The global body has highlighted the fact that uncertainty around the short-and long-term economic impacts

of COVID-19 continues to drive sharp volatility across many assets, leaving global equities in the bear market territory, while encouraging inflows into safe havens like treasuries and gold.

Strong inflows

"Against this backdrop, gold ETFs listed in all regions experienced strong inflows

during the month. European funds led regional inflows, growing by 84 tonnes (\$4.4 billion, 5.8% AUM), while North American funds added 57 tonnes (\$3.2bn, 4%).

Asian funds – primarily in China – also finished the month with strong inflows, adding 4.9 tonnes," stated the report. Going ahead, the World Gold Council expects the recent drivers of investment demand to continue. The drivers are primarily widespread market uncertainty and the improved opportunity cost of holding gold as yields move lower.

"We have found that lower rates have a positive impact on gold prices and offer the opportunity for additional gold exposure [potentially replacing bonds] in a low-rate environment," said the report.

Most large-cap equity funds underperform

Mid-cap, small-cap funds do better

SPECIAL CORRESPONDENT
MUMBAI

Most of the actively managed large-cap equity funds and equity-linked savings schemes (ELSS) have underperformed their respective benchmarks in the last five-year period as mid-cap and small-cap funds performed comparatively better.

According to the latest S&P Indices Versus Active India Scorecard analysis, over the five-year period ending December 2019, 82.29% of large-cap equity funds, 78.38% of ELSS funds and 40.91% of mid/small cap equity funds underperformed their respective indices. While the S&P BSE 100 surged 10.92% in the

Lockdown: Oil dealers seek stimulus package

Expenditure remains the same: CIPD

SPECIAL CORRESPONDENT
CHENNAI

The Consortium of Indian Petroleum Dealers (CIPD), a national body representing over 60,000 fuel outlets, has written to the Centre appealing for a stimulus package to tide over declining sales following the lockdown.

"The dealer network would be put to severe financial stress otherwise," CIPD president M. Narayan Prasad said in a communication addressed to the three national oil marketing companies. "Though sales volume is less than 10% of our usual sale, our expenditure to run the retail outlets remains the same. We have

been asked to pay full salary to employees and have to bear electricity charges, water charges, evaporation losses and also ensure payment of bank interest to keep the pumps open during the lockdown," he said.

National general secretary, CIPD, K. Suresh Kumar said the dealer margin should be calculated based on the average sale during December 2019 to February 2020. In other words, pay the dealers based on their immediate past performance rather than on the truncated sales ever since the lockdown and the related restrictions on movement came into force in March.

INTERVIEW | MALLIKA SRINIVASAN

'We are at crucial point in agriculture, demand for inputs may see pick-up'

Critical support will be in terms of government procurement, says TAFE CMD

N. ANAND

Due to the COVID-19 lockdown, companies will take a hit in the first half. However, industries could look forward to some growth in the second half, Mallika Srinivasan, chairman and managing director, Tractors and Farm Equipment Ltd., said in an interview to The Hindu. Edited excerpts



Postponement of GST payments by a month and prompt settlement of tax refunds due to all corporates would provide much relief

tinued for six months is indeed welcome and our request would be to extend it for a year or more at least to maintain our competitive position in this crisis.

What would be the impact of COVID-19 on the tractor industry?

■ During 2019-20, we saw an industry drop of 10%. The last two weeks of March were the beginning of a new season and we were expecting a good season.

Good monsoons, and water storage had augured well for the Rabi crop and a buoyancy in demand was expected when the shutdown had to happen.

April to June is a peak season for the industry and if our customers, the farmers, are affected, the industry is being affected too and we anticipate a 10-12% drop during 2020-21. Efforts are on by the government and industry to enable farmers to get their price for his crop.

The one real issue that we face with agricultural operations is with respect to migrant labour, especially in some of the northern states.

Migrant labour is critical for timely agricultural operations and we need to see how we can slowly increase the confidence of migrant labourers to return to their farm lands after the lifting of the lockdown, as that is the key to keep things going smoothly. With appropriate policy measures and close oversight, the issues in agriculture arising from the lockdown can be effectively addressed.

MSMEs face the challenges of working capital and cash. A moratorium has been given and if this can be extended, including interest, it will provide relief to this sector. Cash flow is a pro-

citation by government we can ensure timely completion of agricultural operations, MSMEs in particular and the economy in general?

■ No doubt, there will be an economic impact with a close to 0% growth. Let me begin with the manufacturing sector. In our sector, for example, it would take us at least two weeks to ramp up with some loss in productivity, given the health precautions, including social distancing, that would have to be undertaken.

We predict the demand for capital goods, automobiles and trucks all being initially soft after the lifting of the lockdown. The retail sector, FMCGs in particular, can be expected to pick up more quickly given the somewhat suppressed demand over the last few weeks.

In terms of agriculture, we are at a very crucial point in terms of the agricultural cycle. The harvesting of the Rabi crop is on and the timely preparation of the land for the Kharif crop would be critical to agricultural GDP.

The government has been very conscious of this and support is being extended at all levels to try and facilitate smooth agricultural operations through availability of inputs and equipment. I do believe that demand for agri inputs will pick up and if with close monitoring and fa-

ble irrespective of the size of the industry. Postponement of GST payments by a month and prompt settlement of tax refunds due to all corporates will provide good relief.

How long do you think it will take for the Indian economy to bounce back?

■ We have lost April. It will take us a few weeks of May to really ramp back and then to overcome the sentiment and get all the wheels of the economy churning again.

From the third quarter, we can look forward to growth. We will take a knock in the first half, with each industry sector ramping up at a different pace. But, I think we can look forward to some growth in the second half. We welcome the measures announced aimed to alleviate the suffering of the most vulnerable sections of our society. We now look forward to a strong economic package aimed at boosting demand and providing relief to businesses.

What is the exports scenario?

■ In exports, we have both supply side and demand side uncertainty and is challenging. Different countries are in different stages of lockdown and customers face varying degrees of market uncertainty.

The announcement that export incentives will be con-

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COVID-19: younger patients develop fewer neutralising antibodies, study finds

But older patients who had more neutralising antibodies did not recover faster

R. PRASAD

Analysis of blood samples from 175 patients with mild COVID-19 disease who were discharged from the Shanghai Public Health Clinical Centre as on February 26 revealed that about 30% of patients had unexpectedly low levels of antibodies against novel coronavirus (SARS-CoV-2). Ten patients had such low levels of neutralising antibodies that these could not be detected, while two patients showed very high levels.

The study threw up another surprise – the plasma of elderly and middle-age patients had significantly higher amount of neutralising antibodies and spike-binding antibodies than young patients. The median age of the patients was 50 years and the median length of hospital stay was 16 days and median disease duration was 21 days.

The study was posted on medRxiv preprint server on April 6. Preprints are yet to be peer-reviewed and published in scientific journals.

Disease duration

Though about 30% of patients failed to develop high amounts of



Age factor: The higher amounts of antibodies found in older patients may be due to a "strong immune response" in aged people. ■ GETTY IMAGES

neutralising antibodies even after recovering from COVID-19 disease, the disease duration was not longer than older patients. Likewise, older patients who had more neutralising antibodies did not recover faster. So immaterial of the amount of neutralising antibodies found, both young and old patients took the same time to recover.

The amount of neutralising antibodies generated in response to vaccination determines the efficacy of the vaccine in protecting

against the virus. In this case, if infection with actual virus has not resulted in eliciting strong antibody response and hence elevated neutralising antibodies, it is not clear if the vaccine which had killed or weakened viruses would be able to produce high amounts of antibodies.

But the researchers were not able to detect viral DNA in the blood samples collected, and information about viral load was not available for all the patients. So it is

not known if the young patients had lower viral load thus resulting in lower amount of neutralising antibodies. "This study is preliminary," the authors caution.

The team led by Jinghe Huang was able to detect coronavirus-specific neutralising antibodies 10–15 days after onset of the disease, and the level remained stable thereafter.

Mild symptoms

All the 175 patients included in the study had only mild symptoms. The researchers excluded patients who had been admitted to intensive care units because many of them already had antibodies from donated blood plasma.

The efficacy of passive antibody therapy, otherwise called as convalescent plasma therapy, relies on the concentration of neutralising antibodies in the plasma. The low levels of neutralising antibodies in younger patients who have recovered from the disease strongly suggest that convalescent plasma should be titrated before being used for therapy.

The authors wonder if the low levels of neutralising antibodies in about 30% of patients would put

them at risk of infection rebound or reinfection and suggest that further studies are undertaken to understand this.

Immune response

The higher amounts of neutralising antibodies found in older patients may be due to "strong immune response" in aged people, the study suggests. But whether the elevated neutralising antibodies found in older people protect them from progression to severe and critical conditions is not known. But the world over, it has become clear that older COVID-19 patients are at higher risk of adverse disease outcomes. Studies carried out earlier using the SARS virus infection in aged macaques resulted in elevated immune responses, resulting in more severe pathology than younger adult macaques.

The researchers also found that antibodies generated in response to novel coronavirus (SARS-CoV-2) could bind with 2003 SARS strains. However, the binding was not able to stop the SARS virus from replicating. This raises the possibility of developing a vaccine that might be effective against both novel coronavirus and the 2003 SARS virus.

Study indicates sex-specific differences in immune system

SHUBASHREE DESIKAN

A study led by researchers from Australia finds crucial differences in the way the immune system acting in the body fat of male and female mice operates. Studying the visceral adipose tissue (VAT) in the mice, they find key differences. Visceral adipose tissue is fat tissue that is found in the abdominal region, surrounding various organs. This includes perigonadal VAT which surrounds the ovaries in females and testes in males, which is what the researchers studied.

Controlling immune response
The perigonadal VAT taken from male mice had many more regulatory T cells (Treg) than that of female mice. These cells play a role in controlling immune response to the self and external cells, thereby protecting the body from autoimmune diseases such as rheumatoid arthritis or lupus. The Treg cells in the male VAT also showed a distinct phenotype, functional parameters and gene expression pattern compared to Treg cells in female VAT. "We found elevated expression of inflammatory genes in male VAT. A special population of stromal cells that made the cytokine IL-33 was exclusive to male VAT," says Ajith Vasanthakumar, from Department of Microbiology and Immunology, Peter Doherty Institute for Infection and Immunity, University of Melbourne, Australia. He is the first author of the paper published in *Nature*. "Historically, visceral adipose tissue was simply regarded as

an energy storage [organ]. Many studies, however, have highlighted its endocrine function. Visceral adipose tissue has an endocrine function, meaning it secretes adipokines and hormones that play key roles in energy balance and metabolism," says Dr. Vasanthakumar.

It is known that men (in a similar manner to male mice) are more susceptible to metabolic diseases such as type 2 diabetes. "This is linked to higher adipose tissue inflammation in men compared to women, again similar to mice," says Dr. Vasanthakumar. "Finally, we have previously shown that human adipose tissue (omentum) harbours Treg cells of a phenotype similar to the one found in mice." Thus, it is likely that the difference in Treg cell distribution seen in the visceral adipose tissue of male and female mice would hold true in humans.

The study has implications for the way trials are conducted with animal models when carrying out research on diseases. For instance when studying metabolic disease, mostly male mice are used. This study implies that findings of such a test will not hold equally good for males and females.

"Until the recent past, for clinical trials mostly men were recruited although it is clear that disease susceptibility and response to drugs are different," he says. "In this context tailoring drugs to gender is a possibility in the future. We will continue to explore the role of sex hormones in metabolism and other inflammatory and autoimmune diseases."

Coronavirus: two vaccines enter human trials, 60 in pre-clinical stage

Include non-replicating viral vector and messenger RNA vaccines

ASWATHI PACHA

With the genetic information of the novel coronavirus (SARS-CoV-2) available online, governments across the globe, top private players, academics and not-for-profit organisations are working at a breakneck pace to find a COVID-19 vaccine.

According to the "DRAFT landscape of COVID-19 candidate vaccines" released by the World Health Organization (WHO) on April 4, two vaccines are currently being tested on humans.

This includes a non-replicating viral vector vaccine developed by CanSino Biological Inc. along with the Beijing Institute of Biotechnology. A non-replicating vector vaccine can be developed either using a virus that is killed or a part of the virus. Since it is not a complete virus, it cannot replicate inside the host; but the antigens trigger our immune system to produce antibodies, which help fight the disease in case we contract it in the future.

RNA vaccine

According to the Chinese Clinical Trial Registry, men and women between the ages of 18 and 60 were recruited and tests are being conducted on three groups of 36 participants each. Three dosages are being tested – low, medium and high.

The second is a messenger



Clinical trials: Forty-five subjects, 18 to 55 years of age, of both sexes, will enrol in tests. ■ AP

RNA vaccine developed by Moderna and National Institute of Allergy and Infectious Diseases. In RNA vaccines, the messenger RNA from the pathogen is used. The messenger RNA gets translated into antigenic protein recognised by our immune cells and antibodies are produced. But mRNA is a highly unstable molecule making it difficult to handle. So the mRNA is encapsulated in a small ball of fat or lipid nanoparticle (LNP). This LNP acts as a delivery vehicle that helps the mRNA cross the host cell membrane and once inside the mRNA is released.

According to the website clinicaltrials.gov, forty-five subjects (18 to 55 years of age of both sexes) will be enrolled and divided into three groups. They will receive an intramuscular injection on days 1 and 29 in the deltoid muscle.

An analysis published on April 9 in *Nature Reviews Drug Discov-*

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by the Coalition for Epidemic Preparedness Innovations (CEPI) notes that "the global COVID-19 vaccine R&D landscape includes 115 vaccine candidates, of which 78 are confirmed as active and 37 are unconfirmed (development status cannot be determined from publicly available or proprietary information sources)." Along with the two vaccines mentioned by WHO, the list includes one vaccine developed by Inovio Pharmaceuticals and two from Shenzhen Geno-Immune Medical Institute.

Vaccines from India

The WHO draft adds that 60 candidate vaccines are in preclinical trials. This list contains the DNA plasmid vaccine developed by Gujarat-based Zydus Cadila and Live Attenuated Virus vaccine developed by the Serum Institute of India.

DNA vaccines are made by taking genes from the pathogen and inserting it into the host's body with a vector. The host cells produce the protein of the viral gene and this is recognised as a foreign antigenic protein by the host's immune system.

DNA vaccines are comparatively easy to make, transport, store and are cheaper. Live attenuated virus vaccine is created by reducing the virulence of a pathogen or weakening it, but still keeping it alive.

When should we blow the shofar?

With COVID-19, we are fighting an invisible enemy

PARTHA P. MAJUMDER

The novel coronavirus (SARS-CoV-2) has already left a large footprint; it has spread itself far and wide. And it is spreading even further. It has killed in thousands. A wartime situation prevails. Strangely, we are fighting an invisible enemy. And yet our ability to return victorious is not obvious. Especially, when we may be able to blow the shofar.

An infected person can transmit the virus directly to many uninfected persons. The larger this number – called the Basic Reproductive Ratio, R_0 , pronounced R-nought – the more contagious is the disease caused by the virus. The faster it will spread in the community. R-nought can be viewed as the product of three numbers: (1) the number of days an infected person remains infective (that is, can infect others), (2) the number of susceptible persons available to infect and (3) the chance that a susceptible person gets infected. The easiest way to keep R-nought low is to keep ourselves distanced from every other person. That way, the chance that a susceptible person gets infected remains low. It is not sufficient to distance ourselves only from those who show symptoms of infection. We have to continue to distance ourselves from every other person. Many apparently normal persons may actually be infected without showing symptoms of infection. Therefore, just as R-nought influences the spread of COVID-19, our behaviour also influences R-nought.

A person infected with SARS-CoV-2 can remain infective for 10 to 14 days. During the initial phases of spread, there will be a large number of uninfected persons to infect. For SARS-CoV-2, R-nought has been estimated to be between 2 and 3. Let us take the best case scenario. Assume R-nought to be 2 and the infective period to be 10 days. Then, the first person will infect two others, each of whom will infect two others (22), each of these four persons will infect two others (23) and so on. In 10 days, this one infected person will have infected 2,046 persons. A person who is infected or has recovered cannot be infected again. At least not in the next several months or even years. An infection activates the immune system which learns to recognize the virus and remembers it. The next time the virus tries to infect him, his immune defenses are able to recognise and protect him against further infection. Therefore, as the infection spreads, there will be less and less number of uninfected persons to infect. An increasing number of persons in the community will have gained immunity from having been infected earlier. This is called herd immunity. (If there was a vaccine for SARS-CoV-2, it would have helped achieve herd immunity without a large number of persons being infected. A vaccine simulates the effect of an infection and builds immune resistance to the virus. We have eradicated polio in this way.) As herd immunity increases in the community, many infected persons will not find another person to infect during the entire infective period. R-nought will then be less than one, on average. Consequently, there will be few new cases arising and existing cases will recover or die. Spread of the disease will slow down and the pandemic will end.

COVID-19 may be long-lasting

There is also a related issue to consider. When there is an outbreak, persons in the community get symptomatically infected one after another. The length of time between appearance of two successive persons with symptoms of infection is called the Series Interval. This interval informs us about the spreadability of the virus. The shorter this interval, the greater the speed of spread through the community. For SARS-CoV-2, the Series Interval is between 5 and 7 days. For influenza, this interval is 1.3 days. Therefore, influenza spreads four to six times faster than COVID-19. Is this good news for us? The answer is no. COVID-19 is spreading through the community slowly. Herd immunity will therefore arise slowly. This means that the COVID-19 pandemic is going to last for a long time.

The current lockdown cannot go on forever. Is there a scientific basis to determine when the lockdown may be lifted? Will the lockdown be lifted only after everyone in the country becomes immune to the virus? No; we can never be sure that everyone has gained immunity. However, if the chance that an infected person finds a person to infect is sufficiently low, then the virus will stop spreading. Then the lockdown can safely be lifted. This will happen if a certain proportion of individuals in the country is immune. This proportion is called the "herd immunity threshold." It is calculated as $1/(1/R_0)$. For SARS-CoV-2, the R_0 is 2 or 3. An R_0 of 2 would mean a herd immunity threshold of 1-(1/2) or 50%. An R_0 of 3 would mean a herd immunity threshold of 1-(1/3) or 67%. We should play safe. Therefore, lockdown can be safely lifted if about two-thirds of our population attains immunity to the virus. But how would we know that two-third of our citizens has gained immunity. We need to estimate this proportion by testing our citizens selected randomly and in large numbers. Surveillance testing in communities has now been initiated in India. We hope that the results of these tests will be used to determine when to blow the shofar.

A policy is immediately required

Daily wage earners are now unable to earn their daily bread. Families are going hungry. Enforcement of the lockdown is leading to clashes – of citizens with the police, between groups of villagers and so on. Yet lifting the lockdown before herd immunity threshold is achieved will be disastrous. However, a hungry person does not have the luxury of being mindful about personal and public health arising from this virus. Either food has to be provided by the Government and by those of us who can afford, or we will have to soften the lockdown and allow them to work. Certainly, all large gatherings – including religious and political gatherings – must continue to be banned. If distancing can be maintained and the net of symptom-monitoring and community-testing can be cast more widely, then allowing a minority of our citizens to work even during the period of lockdown may be a socially viable option. A policy is immediately required.

A compromise

It may be extremely difficult for us to ensure, as science dictates, that two-third of all our citizens have gained immunity. We may identify geographical regions where COVID-19 appears to be affecting people in large numbers. In these regions, lockdown may be extended, surveillance-testing intensified and spread of the infection more strictly monitored. Infected persons should be isolated. Further, contract tracing – identification and listing of persons in close contact with an infected person, testing to identify infected persons among contacts and isolating them or, if testing of all contacts is infeasible, isolating all contacts and following them up for signs of infection – will serve to reduce the likelihood of infection. Thereby R-nought will be reduced in that region. If the spread of the infection from these high-intensity regions can be arrested, then there will be an overall reduction of infection in the country. Of course, surveillance-testing and deep monitoring should continue at some level throughout our country to identify new pockets of high-intensity that may arise whether or not the general lockdown is lifted on April 14th.

(The writer is currently an emeritus professor at the Indian Statistical Institute, Kolkata.)

Why hospitals are hotbeds of coronavirus transmission

Once in contact with the virus on objects and surfaces, there is high risk of infection

R. PRASAD

Across the world, hospitals have become hotspots for novel coronavirus (SARS-CoV-2) infection. And hundreds of healthcare workers have been infected in many countries, and some have died too. While the availability and quality of personal protective equipment (PPE) and the duration of exposure with severe and critical patients have been a factor in determining if healthcare workers were safe or not, a study posted on March 16 in a preprint repository medRxiv, a team of researchers collected 626 samples from 13 hospital function zones, five major objects, and three major PPE from the Zhongnan Hospital of Wuhan University during the period February 7-27, 2020. Preprints are yet to be peer-reviewed and published in scientific journals.

In another study posted on March 16 in a preprint repository medRxiv, a team of researchers collected 1,688 healthcare workers had become infected with novel coronavirus in China, including 1,080 healthcare workers in Wuhan, the epicentre of the epidemic in China. Widespread hospital contamination could have resulted in occupational exposure for healthcare workers in the hospital on a daily basis.



Paradox: At 31.9%, the intensive care unit specialised for taking care of COVID-19 patients was the most contaminated in the hospital, the study found. ■ GETTY IMAGES

and objects contaminated with the virus. Once in contact with the virus on objects and surfaces, there is high risk of infection.

The study led by Xing-huan Wang from the Zhongnan Hospital of Wuhan University found at 31.9%, the intensive care unit specialised for taking care of COVID-19 patients was the most contaminated in the hospital followed by obstetric isolation ward for COVID-19 pregnant women (28.1%), and isolation ward for COVID-19 patients (19.6%).

They found nearly 14%

all commonly used hospital objects and medical equipment had the virus on them. Among the most contaminated objects in the hospital were the self-service printers (20.0%), desktop/keyboard (16.8%), doorknob (16.0%), telephones (12.5%) and medical equipment (12.5%). In China, the self-service printers are commonly used by patients themselves to print out examination or test reports in a hospital.

At 20.3%, hand sanitiser dispensers were the most contaminated objects followed by hand gloves (15.4%).

Survival duration
Earlier, a team led by Vincent J. Munster from the National Institute of Allergy and Infectious Diseases found that the novel coronavirus survived up to one day on cardboard and three days on plastic. Now, another team of researchers led by Leo L. M. Poon from The University of Hong Kong found shorter survival time of the virus on different surfaces. Dr. Poon's team did not find any virus on printing and tissue papers

after three hours, while infectious virus could be found on treated wood and cloth on the second day.

Both the teams published their results in a letter. While Dr. Munster's team published the results on March 17 in *The New England Journal of Medicine*, Dr. Poon's team published it in *The Lancet* on April 2.

Much like the NIAID team, the researchers from The University of Hong Kong found that the virus could persist longer on smooth surfaces – infectious virus could be found on glass and banknotes even on day three, while they could find viable, infectious virus on stainless steel and plastic up to day six.

The NIAID team had found that the virus survived the least time – four hours – on copper, while they could find virus for relatively longer time on plastic (three days) and stainless steel (two days).

The virus survived for a day on cardboard.

The most interesting but disturbing finding published by Dr. Poon's team is the presence of infectious virus on

the outer layer of the surgical mask even on day seven. But the amount of virus found on mask on day seven was only 0.1% of the original number.

Temperature and pH
The University of Hong Kong researchers also found that at room temperature, the virus could survive in a broad range of pH conditions – pH 3-1



COVID-19 and immunity

Who are most vulnerable and why are men, women and children reacting differently?

JACOB KOSHY

The story so far: COVID-19, which has affected over 1.5 million globally and killed more than 100,000 people, is not different from how influenza viruses, or even the coronaviruses responsible for the common cold, attack the body. Therefore, the immune system has a predictable response. It is the degree to which this response is tolerated by the body that determines mortality rates.

How does the immune system respond to a coronavirus attack?

A cascade of viral particles enters the body through the nose, eyes or mouth. Breathing carries some of these particles to the lower respiratory tract where the spike proteins of the coronavirus, acting like a key, lock into epithelial cells that line the respiratory tract as well as those in the air sacs in the lungs. SARS-CoV-2 is able to stay undetected longer than many flu or coronaviruses and its spike proteins are able to gain entry by unlocking the ACE2 protein on the lung cells. Once in, they hijack the cell's machinery, replicate and multiply and infect adjoining cells. Like the defining ACE2 proteins on the epithelial cells, viruses too have a tell-tale signature on their surface called antigens and spotting these is what kicks the immune system into action by producing antibodies.

The signals they generate trigger another class of chemicals – cytokines and chemokines – and they alert the immune system to send an array of different kinds of cells that specialise in destroying viral particles. However, these cytokines and chemokines trigger inflammation in the cells. In the nose and upper regions of the respiratory system, this inflammation produces mucus and a runny nose to trap viral particles and prevent their ingress. This also triggers sneezes to expel them. When the sinuses are inflamed we get a headache and the general stuffiness that we associate with a cold. When a gland called the hypothalamus is inflamed, it results in a fever.

However, in the case of SARS-CoV-2, the virus seems better at penetrating deeper. The inflammation triggers a fluid build-up in the lungs. The fluids also contain the residue of a host of specialised cells – including T cells – that carpet bomb and damage many of the body's own cells as well as the viral particles. It is in expelling this fluid that a dry cough, characteristic of the coronavirus infection, begins. As more air sacs are infected, the lungs find it harder to perform their core job of extracting oxygen from the air, and eventually, this aggravates breathlessness.

Mortality statistics show men are twice more likely than women to succumb to a COVID-19 infection. Studies show women, on an average, have a better-regulated immune response than men in pathogenic infections

Why are some infections mild and others life-threatening?

Depending on the degree of infection in the lungs, the inflammation and the fluid build-up can lead to pneumonia. A patient will require hospitalisation to treat the breathlessness and ventilator support to artificially provide oxygen if the condition worsens. However, massive levels of cytokines can cause extensive lung damage and a condition called Acute Respiratory Distress Syndrome. The unsustainable cytokine storm can cause organ damage far beyond the lungs and spread to the kidneys as well as the heart. If the infection is acute, it can also lead to a depletion of the frontline white blood corpuscles tasked with fighting the infection and making the body vulnerable to other secondary infections, which may lead to death.

How have the elderly reacted to the virus?

The elderly, especially those with existing conditions such as diabetes and cardiovascular disease, already have an inherent malfunctioning in the immune system. In many ways, it is the reaction of the body in trying to combat the virus that ends up being suicidal. The different kinds of drugs, whether it is hydroxychloroquine or anti-HIV drugs, deployed to treat serious COVID-19 infection, also work in some way to moderate the immune-system's aggressive defence.

Mortality statistics globally suggest that men are twice more likely than women to succumb to a COVID-19 infection. This follows from studies that show women, on average, have a better-regulated immune response than men in pathogenic infections. Estrogen is said to be an immune-system modulator and the ability to deal with a pregnancy – which also begins as a foreign body growing within – primes women to better deal with infections, say experts.

What about children?

The response of the immune system is in many ways a mystery. For instance, so far, there have been few deaths reported in children from COVID-19. Given that children's immunity systems are still maturing and learning to adapt to a galaxy of infectious agents, why they seem to be relatively better protected from severe COVID-19 disease is not known.

Will a vaccine help?

There are several vaccine candidates but it will be months before we know if any of them will be viable. The bulk are aimed at developing a molecular construct, in some cases a weakened version of the coronavirus, that mimics the antigens of the virus and triggers an appropriate antibody response. There are complications – such as an antibody-dependent enhancement – in which insufficient levels of antibodies can actually end up aggravating an infection as in the case of dengue. However, in the case of COVID-19, that's a problem for another day.

To ease lockdown, what are the options?

What are the health measures that must be in place before lifting the shutdown across States?

RAMYA KANNAN

The story so far: From March 24, the country went into a 21-day lockdown period as an emergency measure to combat the COVID-19 pandemic. Several States now want it extended; some have gone ahead. With the available evidence, it was believed that physical distancing was the best weapon to combat this little-known virus, transmitted through respiratory droplets. The government announced a shutdown believing that it would stagger the progress of the epidemic, allowing health systems to manage the crisis that would inevitably unfold. An extension is perhaps the best way to go but some basic public health parameters must be put in place to guide the eventual lifting of the lockdown.

How may we safely emerge from the lockdown? Being an unprecedented situation, there is a stark absence of too many examples from the past of a lockdown of this scale. But there are a number of recommendations as to the period of withdrawal, and pretty much everyone is in agreement over what should be done from a public health standpoint, within that period.

As America's face of epidemic control, Anthony S. Fauci, who heads the National Institute of Allergy and Infectious Diseases, said in a podcast with *The Wall Street Journal*: "It's not a light switch, on and off. It's going to be gradual, not all or none."

He went on to say that getting back to normal must be preceded by a "really clear indication that those areas with big outbreaks, with peaks, have not only stabilised and are starting to turn the corner, and the number of cases are coming down. I don't think you need to get down to zero, though before you contemplate pulling back".

While he was speaking in an American context, the medical science indubitably strikes a chord with nations seeking to safely emerge out of the lockdown. "If you are going to consider a relaxation you have to have the capability for rapid identification, isolation and testing. People are also going to have to continue to be careful. We should never shake hands again."

Consider Wuhan, which just reopened its borders after a long 76-day shutdown: Reports from the Chinese city indicate that local health authorities remain vigilant to prevent fresh imports and resurgence of local transmission. Healthy residents and visitors are allowed to move out, but eternal vigil is clearly the price a connected world, where epidemics loom large, has to pay.

Not surprisingly, the hints from what happened over a 100 years ago are strikingly similar. The Spanish flu of 1918 spread across the globe causing similar havoc, though the world was a vastly different place then. Retrospective studies that are being recirculated today indicate that putting distance between people did help retard the spread of the 1918 flu and reduce the mortality rate overall.

As German Lopez wrote in vox.com, one of the key lessons was that it was important not to give up early. In American cities that gave up on physical distancing



measures early consistently caused a recurrence of flu cases and deaths, in 1918.

Even States in India have recommended a minimum of two months' extension, in order they may be sure that they can progress to the next phase.

What are the phases to follow?

The American Enterprise Initiative (AEI), in its document, "National Coronavirus Response: A road map to reopening" (<https://bit.ly/3a2qZ6b>), has outlined four phases in the epidemic. While recording slowing the spread of the epidemic is taken as phase 1, state-by-state (America) reopening is outlined as phase 2.

Individual states can move to phase 2 when they are able to safely diagnose, treat, and isolate COVID-19 cases and their contacts. Caitlin Rivers, one of the authors of the report, explained during a conference with the Johns Hopkins Bloomberg School of Public Health, that progress towards phase 2 should be capability-based, rather than time line-based. Schools and businesses can reopen, and much of normal life can begin to resume in a phased approach.

However, some physical distancing measures and limitations on gatherings will still need to be in place. For vulnerable populations, continuing to limit time in the community will be important.

Experts say 'if you are going to consider a relaxation you have to have the capability for rapid identification, isolation and testing. People are also going to have to continue to be careful.'

Public hygiene has to be improved, and deep cleaning of shared spaces should become more routine. People may initially be asked to wear face masks while in the community to reduce their risk of

asymptomatic spread. Those who are sick will be asked to stay home and seek testing for COVID-19. Testing should become more widespread and routine, the report suggests.

Multiple experts, in India and abroad, are urging a consultation with local communities on both the hotspot zones and areas that have not had too many cases, before deciding anything further on the lockdown.

As per the AEI report during phase 3, physical distancing restrictions may be lifted, after establishing immune protection.

This means safe and effective tools for mitigating the risk of COVID-19 are available, including broad surveillance, therapeutics that can rescue patients with significant disease or prevent serious illness in those most at risk, or a safe and effective vaccine. This, along with sufficient data, improvement in health-care system capabilities (both in the private and public sectors), will help ensure that reliance by nations on physical distance as a primary tool to control the epidemic is reduced.

Phase 4 – rebuild readiness for the next pandemic – might seem too far in the future, but the AEI report cautions that it is an important part of the plan. Nations will need to be prepared to face any new infectious diseases threat, and governments will have to invest in research and development, expansion of public and private health-care infrastructure and workforce.

What is the future?

The world post-COVID-19 might well turn out to be a vastly different place to what it was before the SARS-CoV-2 virus swept across the globe, leaving mass casualties in its path. But the lessons from this epidemic – hand and surface hygiene, physical distancing – must never be forgotten. They are valuable in ensuring that if the next virulent pathogen were to strike, the world would be able to tackle it head on.

What are the dos and don'ts on wearing masks?

According to the World Health Organization, how should we use, remove and dispose of face covers?

SERENA JOSEPHINE M.

The story so far: From the start of the coronavirus disease (COVID-19), recommendations on use of masks have kept varying, country by country, depending on the virus's trajectories. With SARS-CoV-2 growing exponentially in many parts of the world, countries such as India have begun to include newer recommendations on use of masks, including home-made face covers. The one point that remains unchanged is that medical masks should be reserved for health-care providers, persons with symptoms of COVID-19 or confirmed COVID-19, and their caregivers. Wearing a mask alone is never enough, but it is very important to wear one, all the same. Whether a mask gives complete protection from COVID-19 is still debatable. But top health authorities have always maintained that a mask alone does not suffice. Rather, it complements hand hygiene and physical distancing, both critical to prevent transmission of human-to-human COVID-19.

What is the stand of the World Health Organization (WHO)?

WHO, in its April 6-interim guidance on "Advice on the use of masks in the context of COVID-19" (<https://bit.ly/2RumQ5>), notes that wide use of masks by healthy people in the community setting is not supported by current evidence and carries uncertainties and critical risks.

It says: "In some countries, masks are worn in accordance with local customs or in accordance with advice by national authorities in the context of COVID-19. In these situations, best practices should be followed about how to wear, remove and dispose of them, and for hand hygiene after removal."

WHO goes a step further and outlines factors for decision makers. They should consider the rationale and reason for mask use, vulnerability of person/population to develop severe disease, the setting in which the population lives in terms of population density, feasibility and type of mask.

Who should wear medical masks?

Almost all health authorities agree that medical masks – surgical masks and N95 respirators – should be reserved for health-care workers. WHO notes that the use of medical masks in the community may create a false sense of security, with a neglect of other essential measures (hand hygiene practices and physical distancing). The Union Ministry of Health and Family Welfare (MoHFW) has been maintaining that apart from health-care providers, persons with symptoms of cough, fever and difficulty in breathing and caregivers of persons with suspected symptoms of COVID-19 or confirmed COVID-19 should wear masks.

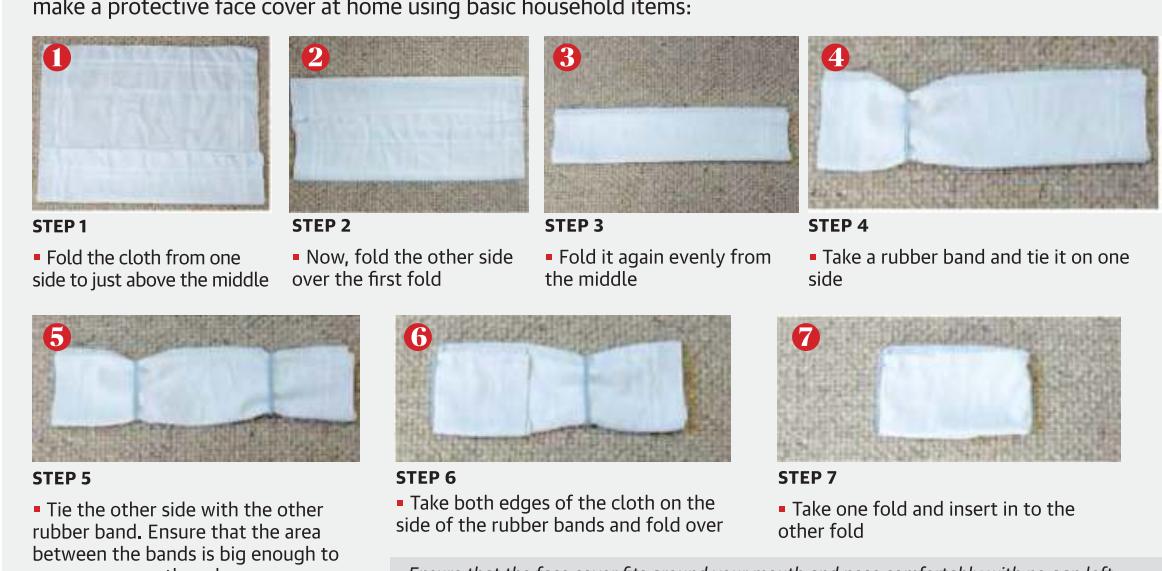
While patients should wear a medical mask as much as possible, changing it at least once a day, caregivers should wear the mask when in the same room as the affected person is.

Is it fine to wear homemade masks?

Do-it-yourself face covers is the latest buzz. Interestingly, the Office of the Principal Scientific Adviser to the

Seven steps to a no-sew DIY mask

The Office of the Principal Scientific Adviser to the Government of India has released an advisory on how to make a protective face cover at home using basic household items:



Ensure that the face cover fits around your mouth and nose comfortably with no gap left between the face cover and the mouth. To wear, wrap each rubber band around the ears

SOURCE: OFFICE OF THE PRINCIPAL SCIENTIFIC ADVISER TO THE GOVERNMENT OF INDIA

Government of India has come out with a manual on homemade protective covers for face and mouth (<https://bit.ly/3b4njIM>). The do-it-yourself face cover is recommended for people living in densely populated areas across India.

The Atlanta-based Centers for Disease Control and Prevention has put out a recommendation too on the use of cloth face coverings (<https://bit.ly/2Xw0eUX>) especially in areas of significant community-based transmission. Citing recent studies that a significant portion of individuals with coronavirus lack symptoms and that even those who eventually develop symptoms can transmit the virus to others before showing symptoms, the CDC noted that this meant the virus can spread between people interacting in close proximity – speaking, coughing or sneezing. It has recommended cloth face coverings in public settings where other physical distancing measures are difficult to maintain.

The CDC, while emphasising the point that maintaining six-feet social distancing is critical to slow the spread of the virus, has additionally advised the use of simple cloth face coverings fashioned from household items or made at home from common materials at low cost.

Experts say staying at home is the best thing to do now. But if you have to step out, there is nothing wrong in wearing masks. The reason: one can never know if a person has symptoms. All that is needed in this situation is a cloth mask that could be made at home.

Specialists including V. Ramasubramanian, senior consultant, Infectious Diseases, Apollo Hospitals, are of the view that though there is no scientific rationale, it may probably help in both stopping transmission from infected people who are coughing as well as to protect ourselves to a certain extent. While these are not

scientific recommendations, because of the evolution of the epidemic, we are looking at anything which may help and masks seem to be one of the visible factors which may help.

How should a mask be worn?

There are dos and don'ts for wearing masks too. Always wash your hands before wearing a mask. Do not touch the outer surface of the mask as much as possible. Once you wear a mask, do not adjust. If you do so, wash your hands.

If the mask is soiled or wet, or its integrity is broken, do not reuse it. Generally, you can wear a mask for up to three to four hours on an average.

The MoHFW has clear-cut dos and don'ts: Unfold the pleats of the masks and ensure that they are facing down. Place the mask over your nose, mouth and chin, and ensure there are no gaps on either side of the mask.

Cloth covers should be washed after every use. Never reuse disposable masks, and used masks should be disposed of into closed bins after disinfecting them. Avoid touching the mask while using it.

WHO notes that use of medical masks in the community may create a false sense of security, with neglect of other essential measures such as hand hygiene practices and physical distancing. Remove it only with strings, always untie the string below and then the string above. After removing the mask, clean your hands with soap and water or use alcohol-based hand rub. Every member in a family should have a separate mask.

The lame-duck President

The Army-backed Health Ministry and States are leading the virus battle, isolating Jair Bolsonaro

SAO PAULO



With cameras in tow, Jair Bolsonaro drove to a hospital on Friday. When asked about the visit, Mr. Bolsonaro told reporters that he was there to "have an ice cream". Pressed further, Mr. Bolsonaro said he was doing a "pregnancy test". Then he walked into a pharmacy and grabbed a cold drink in a bakery. Returning home, Mr. Bolsonaro, who has tested "negative" thrice for COVID-19 but never released the results, wiped his nose with the back of his wrist and shook hands with an old woman. It was just another day in office for the President of Brazil, a country of 210 million people.

Around the globe, governments are fighting the virus. But Brazil is

busy fighting itself as the virus roams freely, infecting about 20,000 people and killing over 1,000 so far. Experts suspect the real figure to be five to 10 times the official numbers. But Mr. Bolsonaro couldn't care less. As workers dig fresh graves in cemeteries, hospitals run out of test kits, clinics turn away patients with symptoms and the virus reaches tribes in the Amazon, Mr. Bolsonaro is pushing for "ending the quarantine" and "opening the economy".

Since the virus reached Brazil in February, Mr. Bolsonaro has been attacking his own Health Minister, Luiz Mandetta, who has tried to follow the World Health Organization guidelines on combating COVID-19. Things came to a head on Monday as Mr. Bolsonaro threatened to fire Dr. Mandetta unless he fell in line. After several tense hours, during which people banged pots and shouted

against Mr. Bolsonaro, the Health Minister appeared on television. "I am a doctor and doctors never abandon their patient. I will not abandon Brazil," said Dr. Mandetta.

In his 15 months in power, Mr. Bolsonaro has not been so openly rebuffed by a Minister as done by Dr. Mandetta, a surgeon with an approval rating of 76%. As Dr. Mandetta's press conference happened after a Cabinet meeting headed by Mr. Bolsonaro, his tough posture had tongues wagging about if the President had been "isolated". What fuelled the rumours further was the appearance of General Walter Braga Netto, the President's Chief of Staff, at the presser.

Just a day earlier, veteran Argentinian journalist Horacio Verbitsky had reported that Brazilian Generals had told their Argentine counterparts that Gen. Netto was now the "acting-President" of Brazil as Mr. Bolsonaro was not able to "handle the pandemic". As several media outlets in Brazil picked the story and



social media became hyperactive with stories of a "silent coup", there was complete radio silence in Brazil as Mr. Bolsonaro cancelled all his public engagements and kept quiet on Twitter. "Bolsonaro is a former captain. The Army will never depose

him. Some Generals, who do not agree with him, seem to have taken control of the situation to save the government and save their faces too," said a Ministry of Health official, on condition of anonymity. "The President has been openly sabotaging all our efforts against the spread of the virus."

Attacking China

As if locking horns with his own team was not enough, the Bolsonaro camp has taken the fight to China, the country's biggest trading partner (\$105 billion in 2019). The President's youngest son, Eduardo, has repeatedly called the coronavirus a "Chinese virus" and the Culture Minister sent out a racist tweet last week, accusing "communist" China of deploying the virus to "destroy capitalism". Chinese diplomats in Brazil reacted with ferocity, demanding an apology from the Minister and accusing Mr. Eduardo of being an "ignorant person".

China has also decided to ignore

Mr. Bolsonaro's leadership. Since the diplomatic spat between the two governments, China's Ambassador to Brazil has been dealing directly with Dr. Mandetta and Rodrigo Maia, the President of the Lower House of Congress. Heavily dependent on China for medical equipment, several State Governors are talking with China directly. "The State Governors are leading the fight against the virus. They have popular support. Bolsonaro is completely isolated and he can't do anything against China," said the Health Ministry official.

Isolated he may be, but the President hasn't stopped firing up his far-right base with dubious information. Following U.S. President Donald Trump's lead, Mr. Bolsonaro has been promoting hydroxychloroquine (HCQ) as a "wonder drug" against COVID-19. On Thursday, he appeared on social media to prescribe HCQ and take a potshot at Dr. Mandetta. "A doctor never leaves the patient, but a patient can always change the doctor."

Lockdown with Japanese characteristics

Under the state of emergency, prefectures will 'request' the public to comply with restrictions

TOKYO



The terms 'lockdown' and 'draconian' are somewhat synonymous in the popular imagination. Images of forced quarantining, punitive fines and violators being manhandled by police spring to mind. But a lockdown Japanese-style is a different cup of matcha.

Earlier in the week, Prime Minister Shinzo Abe declared a state of emergency in seven of Japan's prefectures, including Tokyo. The declaration, however, is not backed by any legal means of coercion. It merely authorises the Governors of the concerned prefectures to request people and businesses to comply with social distancing guidelines, relying on peer pressure and a culture of

conformism to succeed. The police in the Japanese prefectures under "lockdown" will not be out on the streets handing out fines or beatings, but safely ensconced in their work booths dealing with the lost and found cases that are their staple.

What exactly does this "voluntary lockdown" entail? Primarily, residents are urged to stay at home and avoid socialising. Working from home is strongly encouraged, but not mandatory. Schools, universities, childcare facilities, movie theatres and music venues are requested to temporarily close. If this proves inadequate, they can then be "ordered" to comply, but the difference is semantic. The order will still not be backed up with any penalties. In the worst case, the violators can be named and shamed, which in Japan carries a huge stigma.

There are, however, some punish-



ments specified for a small number of offences, including hiding supplies that have been requisitioned by local authorities. The emergency declaration further permits governmental control of the prices of daily essentials. In the event of a surge in

patients, prefectural governments will also be able to requisition land to build temporary medical facilities and could do so forcefully were a landowner to refuse.

Civil liberties

The reason for the Japanese reticence in using punitive measures against citizens lies in the historical memories of rights abuses by the authorities during the Second World War. Japan's U.S.-drafted post-War Constitution enshrined civil liberties and denuded the power of the state. In the past, Mr. Abe's Liberal Democratic Party has lobbied for a revision of the Constitution to give more teeth to the state, but these attempts have met with strong opposition.

The million-yen question is whether the Japanese people will rise to the occasion and respond to the government's requests with enough compliance to contain the spread of COVID-19.

In fact, the government had already been requesting people to curtail

their regular behaviour, long before the formal emergency declaration. Schools were closed in late February. Sporting events and concerts were cancelled through most of March. Many companies instituted work from home measures weeks ago. Museums and theme parks like Disneyland and Universal Studios shut their doors in early March. For a while, it seemed like these "voluntary" efforts were proving adequate as Japan's infection rate remained low.

But then the cherry blossoms bloomed and despite the warnings of the authorities, large groups of people gathered to picnic under the flowering trees. Trains continued to be packed with commuters as many workplaces found it difficult to adapt to teleworking, given a work culture that values face time. In addition, Tokyo's notorious nightlife continued apace with karaoke parlours and "hostess" bars buzzing with customers.

The sex trade has since emerged as one the main vectors of spreading

the coronavirus. In the lead up to the formal emergency declaration, Japan's infection rate had spiked. And it remains uncertain whether the emergency, which is in place until May 6, will merely duplicate the status quo of the last several weeks or lead to stricter adherence to the guidelines.

Michiko Sasaki, a 39-year-old Tokyo resident, is confident that the emergency declaration will have a strong psychological impact. "It doesn't matter if there are no fines, we understand that this is serious," she said.

In recent years, Japan has often been derided for its ostensible inability to develop out-of-the-box thinking. But while conformism and respect for hierarchy might not be the most prized characteristics in the contemporary economic paradigm, these old-fashioned traits might just be what the doctor ordered to fight a pandemic. The world will be watching to see if a "voluntary lockdown" is not an oxymoron after all.

Between pandemic and poverty

With the shutdown lingering on, more people are going to bed hungry than in the pre-virus period

DHAKA



Imam Hossain, a construction worker in southern Bangladesh, is marooned at home for most of the day due to the coronavirus shutdown. With no significant work on hand, he worries about his family of four as his small savings are fast depleting. Mr. Hossain, 50, sometimes ventures out for work, beyond the prying eyes of law enforcement, when he receives a call from his neighbours.

Local authorities have blocked the major roads and bridges through the area with logs or fences, disrupting the supply chain for home-building materials. "I'm just waiting for the shutdown to end," Mr. Hossain told this reporter by phone from a remote, impoverished village in the

southern district of Pirojpur. "I didn't receive any government relief, nor did I ask for it. I don't even know who to ask."

The power of the coronavirus to create an upheaval in people's lives depends largely on their income in a country with about one out of four people still living in poverty. Mr. Hossain's condition illustrates quiet, anonymous moments of near-starvation among a large swathe of the working poor.

In an effort to limit the spread of the virus, Bangladesh has extended the shutdown to April 25. The country has so far reported over 480 infections and 30 deaths. The shutdown caused economic pain for the daily wage-earners. Before the restrictions came into force in late March, many workers left Dhaka, moving away from the potential hotspot into seemingly safer zones.

Last week, the workers, mostly employed in the garment industry, rushed back to workplaces to save their jobs amid a fog of information over factory shutdown. The images of desperate workers continuing their long journey on foot or on crowded river ferries came as a shock at a time when social distancing is being enforced by the government.

Workers now face the grim prospect of employment drought in the garment industry that counted \$3.11 billion in cancelled or suspended orders as the coronavirus roiled demand in the U.S. and Europe.

Empathy in times of crisis

While details of hardship abound, there is more to the story: community efforts have started to trickle in.

Mohammad Baharul Alam, a Dhaka resident, stepped in with food parcels for the poor by mobilising family, friends and colleagues behind his initiative. He started off with 50 parcels a day in the immediate aftermath of the virus outbreak and then

steadily increased the number to 70. "My wife was a bit sceptical about it and asked me what will happen if the supply of food dries up. I assured her that we'll be fine and I pressed on. My friends stood by me."

It's not just the poor who are suffering during the shutdown. There are some "middle-class" families suffering in silence. Mr. Alam devised a way out for those families and assigned a group of night-time volunteers to carry food to their doorstep. "They can't express the problems they are facing due to the lockdown," Mr. Alam, who works at the World Bank's Dhaka office, wrote in a Facebook post. His community effort stems from Tripto Foundation, a non-profit organisation he founded for destitute girls in 2018.

Meanwhile, the government rolled out a 727.5-billion-taka stimulus package, equivalent to 2.5% of Bangladesh's gross domestic product, to cushion the impact of the coronavirus. In a media briefing on April 5, Prime Minister Sheikh Hasina

effort to limit the economic fallout. Social safety net programmes will be expanded to ensure the basic needs of people living below the poverty line, said Ms. Hasina. But questions loom over whether the amount of government aid is enough to offset the colossal damage wrought by the disease. In a report, Fitch Solutions said government aid in the form of cheap loans would do little to alleviate depressed economic activity in Bangladesh.

As the fallout of the shutdown pans out, more people are going to bed hungry than in the pre-virus period.

Social distancing is a luxury not everyone can afford. Mr. Hossain will probably be forced to go out looking for work in his neighbourhood if the shutdown lingers. In parts of the country, many scramble for relief distributed by the government, but people like Mr. Hossain will suffer in silence. For them, one hope is the community effort, as espoused by Mr. Alam, who sends packets of food to their homes after dark.

Meanwhile, the government has warned of deepening economic costs in the days to come. Fiscal packages and low-cost loans for businesses, including small and medium enterprises, will be prioritised in an

Portraits of the victims

An artist is paying tribute to victims of the Easter terror bombings through her illustrations

COLOMBO



Just after the Easter Sunday bombings in Sri Lanka on April 21 last year, Ramesh Raju featured in a few media reports.

From eyewitness accounts, it appears that the father of two had sensed some danger that Sunday morning. He tried to intercept the backpack-wearing young man at the Zion Church in Batticaloa in Sri Lanka's Eastern Province. Except that he couldn't. As the young man – later identified as a suicide bomber – blew himself up, Raju, along with the dozens gathered there on Easter Sunday, including at least 14 children, died.

In the desperate clamour for information on who was behind the

ghastly terror attacks that shook Sri Lanka's relative peace after its civil war, the story's focus soon shifted away from the victims. It turned to the nine suicide bombers, their murderous mission targeting churches and plush hotels in Colombo, nearby Negombo and Batticaloa, and their likely motives. Those who died were all clamped together in a number, reportedly over 270 now, after a few seriously injured succumbed months later.

The thought terrified Tahira Rifath, a 28-year-old illustrator based in Colombo. "I've lost a couple of people very close to my heart in the past few years. I knew that these families who lost their loved ones wouldn't want people to remember them as just a statistic or a number," she told *The Hindu*, speaking of her ongoing initiative that began soon after the tragedy.

She began illustrating each of the victims on her Mac, using a software application for sketching. Sourcing images from their families and friends, she decided to draw each of them. While everyone knows how they died, few know how they lived until then. Who were they? What sort of clothes did they wear? What did they do? What did they dream?

Ms. Rifath's illustrations, which are portraits of the victims, are in bright colours and backgrounds. Many are in their professional attire and smiling as they would on a good day. For instance, in the portrait of Shantha Mayadunne, a celebrity chef, you see in the background light strokes of vegetables and spices that had a key presence in Mayadunne's world.

Toddler Seth's portrait has colourful dinosaurs in the background, indicating he must have loved them. Kieran dreamt of becoming a neuroscientist, so Ms. Rifath shows him attired in a white lab coat, against a backdrop of an image of a brain and neural circuits.

So far, Ms. Rifath has completed 51 portraits. The tributes are taking longer than she expected. It was easier to get some information soon after the serial blasts but accessing perso-

nal details of several people proved harder with time. "During the first few months, I started off reading news articles online, and browsing through social media to see if I find something. Once I got some information about a person, I messaged individuals who knew them and double-checked if the details are correct. But this worked only for some of the victims. In other cases, individuals came forward with details of their loved ones," she said, speaking about the process involved.

Big dreams

Depending on how much she has been able to find out and verify, Ms. Rifath decides on the kind of detail she would include in a portrait. It is important for her to see each of them as people who had "lived full lives, had big dreams and did amazing things".

"The victims had big dreams for themselves and others, but because of an act by a group of very selfish individuals, they no longer can fulfil

them. I just want to say don't waste your life or take it for granted. Yes, living can be exhausting, but push through, dream big, work hard, do good and be kind," she said.

While looking at each victim as a person, getting to know more about the life he or she lived, Ms. Rifath had to connect with their families. She felt she must try and help them heal "even in the smallest way" she said.

"To the people who lost their loved ones, these victims would have meant the whole world... I want to try to understand the pain of these families. Perhaps that is what is driving me to keep telling their stories." Ms. Rifath is considering making a documentary interviewing survivors and crowdsourcing funds to provide them psychosocial support. Eventually, Ms. Rifath wants to create a book and an online platform compiling her tributes. "I want to point out how ugly racism and extremism can be and the price we all have to pay for it."



Meera Srinivasan is *The Hindu's* Colombo correspondent

Reliving Eden while relaxing with family

Laxman says it's a different feeling to watch the innings now as the kids have grown up

V.V. SUBRAHMANYAM
HYDERABAD

The genius is at work, but in a different sport. Cricketing great V.V.S. Laxman, who is trying his hand at table tennis, is hosting the 'VVS Cup' at home, featuring his family members.

"It is good to be with the kids in what is obviously the longest break of my career, though for an unfortunate reason as the whole world is battling COVID-19," said the 45-year-old Laxman in a chat with *The Hindu* on Saturday.

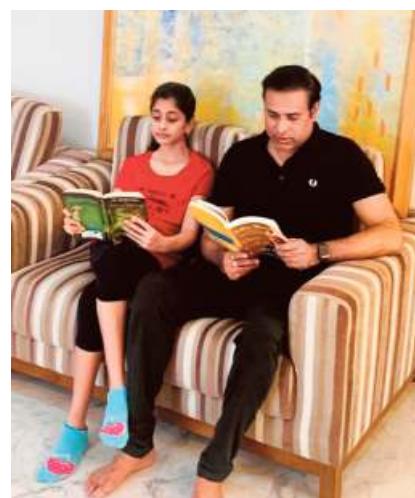
Being active

Asked how he was spending time during the lockdown, he said: "we are playing table tennis, carrom and chess. It is important to be active, especially when you are confined indoors."

"I am making the most of this break by reading books, watching films and some cricketing moments, including my own. The whole family saw the Kolkata Test innings – 281 against Australia



Game on! V.V.S. Laxman battles with son Sarvajit for the 'VVS Cup'. ■ SPECIAL ARRANGEMENT



Bookworms: Laxman and Achinthya are avid readers.

in 2001 – again. It is a different feeling to watch it now as the kids have grown up," said the stylish batsman.

"We also enjoyed watching my ODI hundred in Lahore (2004) and the 2007 Johannesburg Test victory (where he scored a crucial 73 in the second innings.)"

Cricket runs in the family

as Laxman's son Sarvajit has shown talent, scoring two half-centuries in the Hyderabad Cricket Association (HCA) league recently.

A Warner fan
"My son is a left-hander and a fan of David Warner. He seems to be enjoying his game. I am trying to teach him a few things on the art of batting," said Laxman. "Obviously, he cannot have a better mentor than his father!"

About bringing up his children, he said: "We are trying to inculcate values, teaching them not to take things for granted and also be good human beings."

"This is the most enjoya-

ble phase. When I was in town earlier, I was either busy with my commitments, or my wife Sailaja was busy with her schedule at the 1st Innings Play School started by us."

Laxman is also involved in various awareness campaigns, appealing to the citizens to stay indoors.

Don't push Dhoni into retirement: Hussain

Says he still has a lot to offer

PRESS TRUST OF INDIA
MUMBAI

Doubting Thomases should be careful about what they wish for as there will be no second coming for a once-in-a-generation player like M.S. Dhoni if people "push him into retirement", former England captain Nasser Hussain said on Saturday.

Hussain, one of the most respected voices in world cricket, feels the soon-to-be 39 former captain still has a lot to offer to Indian cricket.

"Once Dhoni is gone, there is no getting him back. There are some legends of the game, they are once-in-a-generation cricketers, don't push him into retiremen-



Dhoni. ■ FILE PHOTO

semifinal against New Zealand in July.

"Is MS Dhoni still good enough to get into the Indian side? It's as simple as that."

"That should apply for anyone across the board. What I have seen, I think MS has a huge amount to offer for Indian cricket," said Hussain.

Lockdown blues for Chahal

PRESS TRUST OF INDIA
NEW DELHI

Yuzvendra Chahal says he can stay away from home for three years once the lockdown is lifted.

"I will get lock-downed from my home, I will not come back to my home. I can't take this anymore, can't stay at home for longer now. These days of staying at home will suffice for the next three years now," Chahal said in a chat with a TV presenter.

"I will live in a nearby hotel but will not stay at home, that's it for me now, can't bear anymore lockdown days."



Chahal. ■ FILE PHOTO

India served wake-up call: Langer

Home series loss was defining moment, says Aussie coach

PRESS TRUST OF INDIA
SYDNEY



Australia's unprecedented home Test series defeat to India in 2018-19 served as a "wake-up call" for Justin Langer, who reckons the series will prove as the defining moment of his coaching career.

Langer was appointed Australia coach in May 2018, following the infamous ball-tampering scandal that saw skipper Steve Smith and his deputy David Warner slapped with year-long bans. Without their star batsmen, the Australians struggled.

And, Australia tasted its first Test series loss to India

ger was quoted as saying by the Australian Associated Press on a podcast.

"In 10 years' time, I will look back on that period and it will be the making of my coaching career," he said.

Langer compared it to another difficult phase of his life, when he was dropped as player at the start of 2001 Ashes.

"In 2001 when I was dropped from the Australian team at 31 years of age, I thought that was the end. That was the making of me as a cricketer and a person. It was amazing what lessons you can learn in adversity," he said.

AGENCE FRANCE-PRESSE
LAUSANNE

Thousands of fans planning to travel to the postponed Olympics face uncertainty over flight refunds and reimbursements from hotels and fear they may become victims of greed.

The International Olympic Committee has said that tickets for sporting events will be refunded if people cannot attend in 2021, but admitted that it could "not comment on hotel or flight bookings which were done through third parties".

Lisa Delpy Neirotti, a professor of sport management at the University of Washington



Impasse: Tourist boats in Tokyo may not find takers if foreign fans don't make it because of travel and lodging issues. ■ AFP

ton had reserved 31 rooms for her students for 26 days at a cost of \$90,000. She says that if she does not ask for

the ticket reimbursement, hoping that her students can make the new dates from July 23 to August 8 next year,

was counting on 600,000 foreign spectators attending the Games, providing a significant economic windfall.

"We are still waiting on both the hotel and the airline. They said it would take a while to let us know."

Need to step in

"I truly believe that if hoteliers and airlines start to be greedy and not work with Olympic fans or organisations, the government will need to step in, as it will not look good for Japan tourism, but for Japan as a country," said Lisa.

In 2018, the Japanese ministry of tourism said that it

Hoteliers affected

The delay will also affect the Japanese hotel industry, which had already seen hotel bookings fall in March compared to last year.

An official with the Tokyo organising committee said the issue surrounding hotel reservations was "under consideration".

Gallant Narayanan falls in semifinals

His conqueror Firouzja will meet Carlsen in summit clash

RAKESH RAO
NEW DELHI

After an incredible run, S.L. Narayanan fell on the threshold of a title-clash against Magnus Carlsen in the Bantam Blitz Cup late on Friday night.

Narayanan, who gatecrashed into the semifinals with wins over some better-known names, lost to Iranian Alireza Firouzja 9-6, while Carlsen reached the final beating Russia's Sanan Sjugirov 9-0.

'Horrible' blunder

"I think it (the margin) should have been much closer," said Narayanan, who saw the checkmate coming in the final game, even before his rival could make the rook-move. "Horrible," was how the country's 10th-ranked player described his blunder in the final game where he was clearly better.



Classy show: S.L. Narayanan gained the respect of the chess world by pulling off some sensational victories.

■ FILE PHOTO: RAKESH RAO

ing of 2618, Narayanan defeated Spain's Ivan Salgado Lopez (2584) 8.5-0.5, Egypt's Bassem Amin (2686) 8.5-4.5, Carlsen's 'second' Norway's Jon Ludvig Hammer (2608) 8.5-2.5 and Germany's Alexander Donchenko (2646) 8.5-6.5 to reach the quarterfinals.

He beat Venezuela's Eduardo Hurzaga Bonelli (2607) 8.5-6.5 in a tough quarterfinal before facing the formidable Firouzja, rated 2728.

The online event began on September 25 with no fixed schedule as matches were played at times convenient for both players.

The other Indians in the fray were Nihal Sarin (lost in the third round), Vaibhav Suri, R. Praggnanandhaa (second round), S.P. Sethuraman, Abhijit Gupta and Surya Shekhar Ganguly (first round).

against some of the best." Indeed, Narayanan gained the respect of the chess world by pulling off some sensational victories in the 128-player \$50,000 knockout tournament, that offers \$14,000 to the winner.

In ensuring \$4,000 by performing beyond his rat-

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Liverpool legend Dalglish tests positive

IANS
LONDON

Liverpool legend Sir Kenny Dalglish has tested positive for COVID-19 but is asymptomatic, his family has announced. The Dalglish family released a statement on Friday saying the 69-year-old was admitted to hospital on Wednesday for treatment of an infection and received a routine test for coronavirus.

"Unexpectedly, the test result was positive but he remains asymptomatic," the statement read.

been at the helm of affairs since 2008, when then chief Priya Ranjan Dasgupta fell ill. He was elected president in 2012 and again in 2016, and is unlikely to be eligible this year under the Sports Code.

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Saqlain live!

Catch Pakistan spin legend Saqlain Mushtaq in a live chat on Sportstar's Instagram handle (@Sportstarweb) on April 12 (Sunday) at 2.30 p.m. IST.

IN BRIEF



Kipchoge's 'warning' to fellow athletes

NAIROBI World marathon record-holder Eliud Kipchoge has warned fellow athletes not to switch off training during these times, saying if they push their bodies too much whenever the situation around the world improves, they will be prone to injuries. IANS

Will consider leading AIFF, says Bhutia

PRESS TRUST OF INDIA
NEW DELHI

Former India captain Bhaichung Bhutia has said he will consider contesting for the post of All India Football Federation (AIFF) president in future. Bhutia retired in 2011, after being Indian football's posterboy for more than a decade.

"That is definitely something to be considered in future," he said when asked if he wants to become AIFF president one day, while answering questions on Facebook.

"At the moment I am focusing on grassroots football with the Bhaichung Bhutia Football School and United Sikkim Club and also at district level (in Sikkim)," said Bhutia.

Current AIFF president Praful Patel has effectively



Bhaichung Bhutia.
■ FILE PHOTO

been at the helm of affairs since 2008, when then chief Priya Ranjan Dasgupta fell ill. He was elected president in 2012 and again in 2016, and is unlikely to be eligible this year under the Sports Code.

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