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Southern DAILY

Make Today Different

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‘Like an eternal flame’: Americans honor the fallen on 20th anniversary

NEW YORK, Sept 11 (Reuters) - Twenty years after hijackers slammed airplanes into New York City’s World Trade Center and the Pentagon outside Washington, Americans came together on Saturday to remember the nearly 3,000 killed on Sept. 11, 2001, and reflect on how the attacks reshaped society and tipped the country into an intractable war.

As a first responder struck a silver bell, the ceremony at the Sept. 11 Memorial in lower Manhattan began with a moment of silence at 8:46 a.m. EDT (1246 GMT), the exact time the first of two planes flew into the World Trade Center’s twin towers. President Joe Biden was on hand, his head bowed.

Mike Low, the first speaker of the day, described the “unbearable sorrow” caused by the death of his daughter, Sara, a flight attendant on the airliner that hit the North Tower.

“My memory goes back to that terrible day when it felt like an evil specter had descended on our world, but it was also a time when many people acted above and beyond the ordinary,” he said. “A legacy from Sara, that burns like an eternal flame.” Relatives then began to read aloud the names of 2,977 victims to the thousands who had gathered on the cool, clear morning, among them former President Barack Obama and Hillary Clinton, New York’s junior senator at the time of the attacks.

Bruce Springsteen sang “I’ll See You in My Dreams”. Uptown at the Lincoln Center dancers performed in silver and white robes, signifying the ashes and purity of the fallen.

After leaving ground zero, Biden headed to Shanksville, Pennsylvania, where Flight 93 was downed after passengers fought to regain control of the hijacked plane. His final visit will be to the Pentagon, headquarters of the U.S. Defense Department in Arlington, Virginia, to pay tribute to the 184 people who died there in the crash of Flight 77.

The remembrances have become an annual tradition but Saturday has special significance, coming 20 years after the morning that many view as a turning point in U.S. history, a day that gave Americans a sense of vulnerability that has deeply influenced



the country’s political life since then.

In a painful reminder of those changes, only weeks ago U.S. and allied forces completed a chaotic withdrawal from the war the United States started in Afghanistan in retaliation for the attacks - which became the longest war in U.S. history. And the COVID-19 pandemic, which so far has claimed more than 655,000 lives in the United States, continues.

In a ceremony at the Pentagon, Chairman of the Joint Chiefs of Staff General Mark Milley talked about the 2,461 U.S. service members killed in Afghanistan, including 13 during last month’s disorderly exit, and the closing of “this terrible chapter in our nation’s history. Speaking in Shanksville, former President George W. Bush, who took office eight months before Sept. 11 altered the trajectory of his presidency, said the unity shown after the attacks seemed a far cry from the rifts now dividing Americans.

“Malign force seems at work in our common life,” he said. “So much of our politics has become a naked appeal to anger, fear and resentment.”

At sunset, 88 powerful lightbulbs will project twin beams four miles (6.4 km) into the sky to mirror the fallen towers.

This year, buildings across Manhattan, including the Empire State Building and the Metropolitan Opera, will join the commemoration by illuminating their facades in blue.

Also marking the anniversary, the New York Mets and New York Yankees baseball teams will play each other on Saturday evening as part of a special Subway Series, their first game on Sept. 11 since the attacks. The players will wear caps bearing logos for the New York City Fire Department and other first responders.

The 20-year milestone arrives as political leaders and educators fret over the thinning collective memory of that day. Some 75 million Americans - nearly a quarter of the estimated U.S. population - have been born since Sept. 11, 2001.

At her home on Long Island, Danielle Salerno, 50, and her children dug a hole in the backyard and planted a weeping cherry blossom tree in a tribute to her late husband, a broker at Cantor Fitzgerald who was on the North Tower’s 104th floor.

She had their son Jack, now 19, baptized on the first anniversary and wanted to honor John “Pepe” Salerno with “something that grows and blossoms” for the 20-year milestone. Once the tree was in the ground, she poured champagne on the soil in a toast to John, with friends and family on hand.

For some, the tumultuous events in Afghanistan have compounded the psychological toll of the day, raising questions about whether the U.S. military’s mission there was in vain.

Alain Michnick, a finance professional who lived a couple miles north of the World Trade Center 20 years ago, said he has mixed feelings about some of the actions taken by the U.S. military since then and how society has changed.

“I think it changed the world in a lot of ways in a bad way because it turned people to be kind of paranoid and violent to some degree,” said Michnick, who came to commemorate the moment outside the ceremony at ground zero



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WEA LEE'S GLOBAL NOTES

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New Vaccine Mandate Are Coming

President Biden will push for new vaccine mandates and testing as part of an approach to end the pandemic. He has received a new briefing from his public health team in the Oval Office.

President Biden will make a new push toward mandating vaccines including to federal employees and private businesses to mandate shots for their employees.

According to a new survey, President Biden's poll numbers have dropped 10 % since last year from 62% to 52%. At the same time, his overall approval rate has slipped into negative territory since the chaotic withdrawal from Afghanistan and the slow economic recovery.

As schools opened and the students came back to class, battles over masks and vaccine requirements for older students have erupted in schools all over the country.

Health officials predict that it will be at least several months before vaccines will be authorized for children under 12.


The White House said there won't be a mandated vaccine passport, but it has

been pushing other ways to increase the vaccination rate.

According to hospital records, most people got COVID-19 because they didn't get vaccinated. We really don't understand why so many people still don't believe the scientific evidence and refuse

to get vaccinated.

Today our community is already facing so many problems. If the pandemic still continues here, how can we survive and ever return to our normal life?



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Editor's Choice



Little Amal, a 3.5 metre tall puppet of a young Syrian refugee girl, embraces the Angels Unawares sculpture in St. Peter's Square as she travels across Europe from Turkey to Britain as part of an 8,000 kilometre walk to raise awareness for the plight of young refugees, Vatican. REUTERS/Remo Casilli



Jeremy Provancher, who served in Afghanistan with the Army 275 Ranger Regiment, carries a U.S. flag that was used in Afghanistan, as he visits the 9/11 Memorial ahead of the 20th anniversary of the September 11 attacks in New York City....
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U.S. Vice President Dick Cheney speaks to President George W. Bush by phone inside the operations center at the White House. REUTERS/David Bohrer/White House photo



Jeremy Provancher, who served in Afghanistan with the Army 275 Ranger Regiment, carries a U.S. flag that was used in Afghanistan, as he visits the 9/11 Memorial ahead of the 20th anniversary of the September 11 attacks in New York City....
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People look out of the burning North Tower of the World Trade Center. REUTERS/Jeff Christensen



Pedestrians react while watching the World Trade Center. REUTERS/Stringer

Can Vaccines Win The Race Against COVID-19 Variants? Yes, They Can.

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



Vaccines are delivered to Tanzania as part of the COVAX program. (Photo/ UNICEF/Msirikale.)

Key Points COVID-19 Variants Threaten To Undermine Global Vaccine Programs Unless We Accelerate The Pace Of Delivery.

- Just over 1% of people in low-income countries have received at least one dose of a COVID-19 vaccine.
- In order to control the spread of COVID-19, we need a global effort to ensure no one is left behind in immunization campaigns.

A new wave of COVID-19 is engulfing many countries around the world primarily due to the increasingly prevalent and more transmissible Delta variant of the new coronavirus. With only a few regional exceptions, Delta is mounting a successful global attack. In Indonesia and other Asian countries, health systems are overwhelmed and running out of oxygen. Across Africa – from Tunisia in the north to South Africa – the virus is surging; recently, recorded deaths on the continent jumped 40% in one week alone. In Europe, plans to lift or relax lockdowns are being delayed or modified. And in countries like the US and the UK, a number of key COVID-19 metrics have started to increase after months of decline. The Delta variant (first discovered in India), and other variants of concern including Beta (South Africa) and Gamma (Brazil), are confirming the critical need to vaccinate billions of people around the world – fast. In the race between variants and vaccines, we are falling behind. Failure to pick up the pace now will enable this virus to multiply and mutate to the point where future variants could outsmart our vaccines.



In the quest to vaccinate every citizen of the world against COVID-19, speed and strategy are key.

It's essential to think smartly about the impressive armamentarium of vaccines at our disposal and ensure we don't squander any of these lifesaving assets. No single vaccine can conquer COVID-19 – we need many. Each vaccine should be deployed to the frontlines, targeted to where they can make the greatest impact so that no population is left behind. Above all, we need to follow through on vaccine delivery all the way from the supply depot to the last mile, turning every available vaccine dose into a vaccination in someone's arm.

At Johnson & Johnson, it was precisely this kind of pandemic scenario that informed our selection of a single-dose vaccine that could be easily transported without the need for ultra-cold refrigeration. Of course, no vaccine developer could have predicted how the original Wuhan strain of coronavirus would evolve, and whether their vaccines would hold up against emerging variants.

Recent research published in the New England Journal of Medicine, along with a large real-world study of health workers in South Africa, suggests that the vaccine generates strong immune responses against Delta and other variants of concern. We now await results on protective efficacy from our large-scale clinical studies.



While getting vaccine science right is never easy, vaccine deployment on a global scale – in the middle of a pandemic – presents other challenges. Underscoring this, only slightly more than 1% of people in low-income countries have received at least one dose of a COVID-19 vaccine. This has to change, not just for reasons of global equity, but because if we don't get COVID-19 under control everywhere, we will not be able to end this pandemic anywhere.

How do we crack the challenge of global deployment?

- **Intensify international cooperation and cross-sector partnerships** between industry, governments, health systems and civil society. Turning COVID-19 vaccines into vaccinations involves executing countless legal agreements, establishing no-fault compensation coverage for vaccine recipients, streamlining regulatory

processes, overseeing technology transfers with production partners, setting up pharmacovigilance systems, and coordinating closely with many global partners. This complex, multistep process, which normally takes years to complete, must be compressed into weeks.

- **The global community needs to get behind COVAX**, the unprecedented initiative working to ensure that the world's pandemic response includes concrete plans to enable access for lower-income countries, and vulnerable populations including those in conflict and crisis environments. Governments with surplus vaccines should immediately ramp up their dose sharing via COVAX. Stockpiling vaccine supplies will only prolong the pandemic. An example to emulate is the United States government, which recently embarked on the largest vaccine donation programme undertaken by any country in history.



- It involves the deployment of three COVID-19 vaccines from different manufacturers, and we're proud to be part of it.

So far, nearly 30 million doses of our vaccine have been donated to more than 30 countries across four continents – many through COVAX. This is just a start: millions more doses to many more countries will follow.

- **Maintain the free flow of the global vaccine supply chain.** Many of today's vaccines (not just for COVID-19) take shape in a multistep process involving suppliers and manufacturers located across multiple countries and continents. From the raw materials (like bio-bags to make biologics), to large batches of vaccine drug substance, to the finished vials, we are working with world-class manufacturers from the US to Europe, India and South Africa to supply our vaccine to the global community. It is important for governments to resist protectionist policies such as export controls and restrictions, which ultimately only serve to delay vaccine shipments and other lifesaving medicines reaching their own citizens. We must work together to ensure equitable supply.



• Build on decades of innovation and science.

When the coronavirus crisis started, Johnson & Johnson leveraged more than a decade of research and development investments in our vaccine platform technology. We leveraged this

platform to develop our COVID-19 vaccine in just one year. We stand by our proprietary technology and believe in leveraging it for the global good. Expanding and accelerating voluntary technology transfers between vaccine developers and manufacturers, as we have done in India, South Africa and elsewhere, is the way forward.

- Short term actions that undermine the value of intellectual property will only discourage the innovation we need to combat the next pandemic. Ultimately, what we do now in the race against the variants will help to define not just how quickly the global community conquers COVID-19, but whether we are adequately prepared for the next pandemic. The principles of multilateral partnership, global equity, and unfettered rapid response must be at the heart of any pandemic preparedness blueprint for the future.

Here's what global progress on COVID-19 vaccination looks like

Several COVID-19 vaccines have been approved or authorized, but rollout has been hindered.



A health worker and a military police officer carry the AstraZeneca/Oxford vaccine to an Indigenous hut in Manaus, Brazil, February 9, 2021. (Photo/REUTERS/Bruno Kelly)

- The World Economic Forum has created a visualization tracking country-by-country progress made on vaccination to date.

Countries around the world are racing to vaccinate their populations against COVID-19. In order to reach herd immunity, it's estimated that at least 60% of a population (and as much as 90%) must become immune thanks either to prior infection or vaccination. But as of 10 February nearly 130 countries, with a collective population of 2.5 billion, had yet to administer a single vaccine dose.

While some 10 different COVID-19 vaccines have been approved or authorized for emergency or limited use, the practical business of administering jabs has been hindered by staffing and supply shortages, procurement hiccups, and geopolitics. Concerns have also been raised about equitable access for poorer countries and historically-marginalized communities.

But there have also been positive signs, including Israel's relatively swift rollout, an upwardly revised daily vaccination target in the US, and India's distribution of free doses to countries including Myanmar and Bangladesh.

The Convidecia vaccine developed in China may just require just one dose, for example, but the Pfizer-BioNTech version already approved for use in several countries and the Sputnik V vaccine developed in Russia are among those that call for two.



The second waypoint in the visualization provides a fuller picture of progress made so far, as each country with available data turns a darker shade of green as the percentage of people receiving all doses prescribed by a vaccination protocol increases over time:

The discovery of new, potentially more deadly coronavirus mutations has added a sense of urgency to efforts to contain the pandemic – while prompting the exploration of ways to redesign existing vaccines.

For more context, here are links to further reading from the World Economic Forum's Strategic Intelligence platform:

- China and India are using the inoculation drive against COVID-19 as part of diplomatic efforts to shore up global and regional ties, according to this analysis – which has led to a tussle playing out online and in the media. (Australian Strategic Policy Institute)

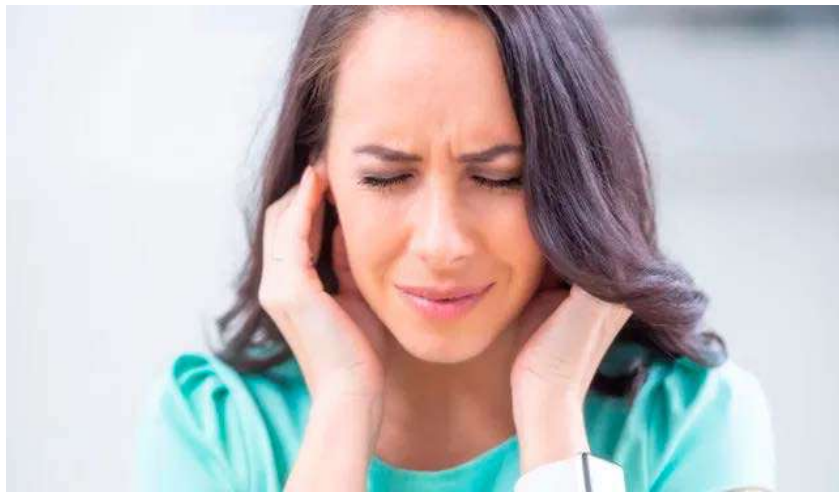
- In the US, tailored messaging efforts are underway encouraging people particularly vulnerable to COVID-19 to get vaccinated – from communities of colour to migrant farmworkers. Among the aims, according to this report: giving people an empowering sense that they're helping others. (Kaiser Health News)

- Is it safe to delay a second vaccine dose? According to this report, there's some evidence that short waits are safe, but partial immunization may help risky new coronavirus variants to develop. (Scientific American)



- A number of wealthy countries have purchased far more vaccines than necessary (the UK, for example, has ordered 219 million full vaccinations for 54 million adults). This analysis suggests a way for excess doses to be re-distributed to those in need. (The Conversation)
- Will your ability to travel depend on your vaccination status? According to this report, Israel and Greece have agreed on a tourism pact enabling people already vaccinated against COVID-19 to travel freely between the countries. (Courtesy weforum.org)

From The CDC: Nine Signs Of A Delta Variant Infection



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

The new variant of COVID-19 is different from previous versions. It's "more dangerous than other variants of the virus," says the CDC. "The Delta variant is highly contagious, more than 2x as contagious as previous variants," not to mention, "some data suggest the Delta variant might cause more severe illness than previous variants in unvaccinated people." How do you know if you have it? Read on for 9 symptoms, get vaccinated if you haven't been yet, and ensure your own health and the health of others.

1. You May Have Bad Cold-Like Symptoms



The CDC lists congestion or runny nose and sore throat as symptoms of COVID-19. Some studies, as well as anecdotal evidence, indicate that these nose-and-throat symptoms are more prevalent with Delta than with other strains. Professor Tim Spector, who runs the Zoe Covid Symptom study, has said that Delta can feel "more like a bad cold" for younger people. That's why it's essential to stay on top of any symptoms and get tested.

2. You May Have Fever or Chills



Temperature dysregulation is very common with COVID but you can still have COVID without a fever. Most doctors don't worry until your temperature is above 100.4 degrees—that's when it's considered significant. By the way, a fever isn't a bad thing. Dr. Anthony Fauci, the chief medical advisor to the President and the director of the National Institute of Allergy and Infectious Diseases, has said it's a sign your immune response is working. But it is a worrying sign if you have one during a pandemic.

3. You May Have a Cough



A COVID cough "is usually a dry (un-

productive) cough, unless you have an underlying lung condition that normally makes you cough up phlegm or mucus," says the Zoe Symptom Study. "However, if you have COVID-19 and start coughing up yellow or green phlegm ('gunk') then this may be a sign of an additional bacterial infection in the lungs that needs treatment."

4. You May Have Shortness of Breath or Difficulty Breathing



If you have a hard time breathing, call a medical professional and the CDC says "look for emergency warning signs for COVID-19. If someone is showing any of these signs, seek emergency medical care immediately: Trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake, pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone."

5. You May Have Fatigue



Fatigue—as if you have, well, a virus—is a common symptom if you get COVID. It can also last longer than a year, according to one big new study in the Lancet. More than half of those studied had at least one symptom that did not go away after a COVID infection, at least after a year of study. An estimated 30% of people who get COVID may have this problem. The authors found that these "long haulers" suffer "fatigue or muscle weakness, problems with mobility, pain or discomfort, and anxiety or depression" among other debilitating problems.

6. You May Have Muscle or Body Aches



Dr. Fauci has warned that "long haulers" can develop "myalgia"—or body aches—and they can be caused by an initial infection. These might feel like a heart attack or just a pain in the neck, but are unusual in their appearance, in that you may not know how they happened. If it feels really weird, suspect COVID.

7. You May Have a Headache



When COVID first hit these shores, the symptoms were said to be a dry cough or shortness of breath. Little did the experts know at the time, there were many more—including crushing headaches, described by one patient as "an alien feeling inside of my body and a vise grip on my head but nothing that sounded like the typical description of COVID." Others have called it a "jackhammer."

8. You May Have a New Loss of Taste or Smell



The original keystone symptoms of a COVID infection, a loss of taste or smell are anecdotally less common than they were before, but can still happen and are a telltale sign of COVID.

9. You Have Have Gastrointestinal Issues



Nausea or vomiting and diarrhea are symptoms the CDC says to watch for. Originally thought of as a "respiratory illness," COVID has proven to disrupt all systems, including gastrointestinal. The CDC notes that "this list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19. Older adults and people who have severe underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing more serious complications from COVID-19 illness."

How to Stay Safe Out There



"From the standpoint of illness, hospitalization, suffering, and death, the unvaccinated are much more vulnerable," Fauci says. "When you look at the country as a whole in getting us back to normal, the unvaccinated — by not being vaccinated — are allowing the propagation and the spread of the outbreak, which ultimately impacts everyone." Get tested if you feel you have any of the symptoms mentioned here. And says the CDC: "Get vaccinated as soon as you can. If you're in an area of substantial or high transmission, wear a mask indoors in public, even if you're fully vaccinated," says the CDC. (Courtesy <https://www.eatthis.com/>)