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Southern DAILY

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U.S. Capitol siege emboldens motley crew of extremists



WASHINGTON (Reuters) - As most Americans recoiled in horror at scenes of rioting and chaos in the U.S. Capitol on Wednesday, some right-wing and anti-government extremists saw the violence as the fulfillment of a patriotic duty or opportunity to advance their agenda.

Among the inspired was Mike Dunn, a 20-year-old follower of the "boogaloo" anti-government movement, whose adherents anticipate a revolution toppling the federal government or a second U.S. civil war.

Dunn, who lives in Virginia, said three or four groups of loyalists under his command helped storm the Capitol this week amid a motley mix of rioters who supported President Donald Trump's attempts to overturn the results of the November presidential election. While most "boogaloos" are libertarians who largely oppose Trump, Dunn said the group embraced the moment to strike against the government.

The mob swarmed the home of the U.S. House of Representatives and Senate, succeeding in temporarily interrupting a formal vote to confirm

Democratic President-elect Joe Biden's victory.

Dunn's hope is that the incident - which resulted in five deaths - will trigger more actions in the months ahead. He said his group would seek to advance its own agenda by participating at protests and other events with those angry over Trump's loss, even if they held other beliefs.

Dunn said boogaloos would be "working overtime" to advance their cause. When asked whether boogaloos had planned to attack the Capitol, he responded: "Just know there is more to come."

While Dunn said he did not participate in the Capitol siege himself, he shared footage on social media that purported to show boogaloo members tussling with police and forcing their way through barriers outside the building.

The assault - one of the most destructive breaches of the Capitol since invading British forces set it ablaze in 1814 - marks a critical moment for extremists who have seized on false claims, spread by Trump, that the U.S. election system is fraudulent and rigged. Some say they

will keep fighting in support of the Republican president's baseless allegations of a stolen election. Others said they would put immediate activities on hold but threatened to re-emerge later.

Pundit Nick Fuentes, who was permanently suspended from YouTube last year for hate speech, praised the storming of the Capitol in his livestream video on Thursday, calling it "glorious" and "awe inspiring."

Reuters photographer Jim Bourg, who was photographing protesters trying to break down doors to the Capitol building, said he heard three older white men in red "Make America Great Again" caps talking about finding Vice President Mike Pence to hang him from a tree as a "traitor."

Bourg said shouts of "traitor" were common among other demonstrators as well. Pence was presiding over the electoral vote count, a largely ceremonial duty to confirm Biden's victory. Trump had falsely suggested to his followers that Pence could ignore the official count and hand Trump a second term. Security agents rushed Pence from the Senate chamber after protesters breach

Capitol building.

The assault on the building led to the shooting death of a protester and the death of a U.S. Capitol Police officer from injuries sustained during the melee. Three more people died from medical emergencies, dozens of police officers were injured and congressional offices ransacked as law enforcement failed to control the mob. U.S. Capitol Police and the Metropolitan Police Department said on Thursday they had arrested a combined 82 people during the unrest.

The attack generated widespread backlash among U.S. officials of both parties and America's allies worldwide. Fifty-seven percent of Americans want Trump removed from office immediately, according to a Reuters/Ipsos poll conducted on Thursday and Friday. And seven out of 10 of those who voted for Trump in November opposed the actions of hard-core supporters who broke into the Capitol, the national opinion survey showed.

But the mob's strike at the symbol-

heart of the U.S. government suggests that Trump's baseless claims of election fraud may have unified a broader coalition of extremists who could pose a threat again when Biden takes office on Jan. 20 and into his four-year term in office, experts said.

Far-right groups have praised the siege in encrypted chat rooms and defended the participants as "patriots" on social media. Experts tracking protests expected actions in Texas and the Pacific Northwest in coming weeks, as well as around the inauguration in Washington. But turnout for those events remains unclear as Trump on Thursday finally conceded defeat and said he will be leaving office.

"Tempers must be cooled and calm restored," Trump later said in a brief video posted to Twitter.

U.S. Department of Homeland Security issued memos last year warning that threats by domestic extremists would likely increase around the election.

新年伊始，馬上行動，為學業和生涯重新啟航

疫情阻止不了您追夢，讓休斯頓社區大學HCC成為您翹昇美好未來的發射台！

師資雄厚、學費低廉的HCC有百餘項優質科目供您選擇，線上教學或校園安全上課靈活可變，最快數月就能獲取文憑證書，快速在科技、健康、高級製造、工程及商貿等熱門行業覓得高薪火熱的職位。學習兩年可獲副學士學位 (A.A.S./A.S.)，學分可轉入四年制大學，只需再讀兩年就能取得學士學位，在職場更勝一籌。

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WEA LEE'S GLOBAL NOTES

01/10/2021

CORONAVIRUS DIARY

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Outstanding Overseas Chinese Shining In Their History

Shirley Young, a Chinese American who broke the barriers at a major U.S. corporation and became a top executive with General Motors, died on December 26, 2020. She was 85.

In 1959, Shirley became an executive with Grey Advertising which only employed a few Asian women with the firm. After she left GM, she opened her own consulting firm, but her real passion was



@人民日报

music. For over twenty years she became an important force by expanding western music into China and other Asian countries. Shirley was born on May, 25, 1935. In Shanghai, her father was a Chinese diplomat, but he was executed by the Japanese army in the Philippines during World War II.

In London, world famous Chinese born pianist Fou Ts' ong died in London because of the coronavirus. He was 86.

Mr. Fou became one of the first Chinese pianists to achieve global prominence when he won third place in the International Chopin Piano Competition in Warsaw in 1955. Mr. Fou once recalled what his father said, "First you must be a person, then an artist and then a musician, and only then can you be a pianist. Even now, I believe in this order—that it should be this way and that I am this way."

Under the strict supervision of his parents, Mr. Fou was educated in the Classical Chinese tradition and culture influence. In his later years, Mr. Fou became a renowned concert pianist on the international stage.

We feel very sad that both of these outstanding Chinese have passed away. This also represents the last chapter of



WWWNEWS.CN

that generation. Because of the political situation, they had to leave their native land. We are also so proud of what they did for our society. And also the world.

Southern News Group 40th Anniversary 1979-2019. Southern News Group Chairman / CEO, Chairman of International Trade & Culture Center, Chairman of International District Houston Texas.

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Stay Home!

BUSINESS

Wear Mask!

Getting COVID-19 Vaccines To Rural Americans Is Not Easy – But Barriers Are Being Lifted



The first COVID-19 vaccines arrive packed in dry ice and need special freezers that can keep them extremely cold. (Photo/David Goldman/AP)

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

The enormous job of vaccinating the nation is underway, but for rural Americans, getting a COVID-19 vaccine becomes harder the farther they are from urban centers. The current vaccines' cold storage requirements and shipping rules mean many rural hospitals can't serve as vaccination distribution hubs. That can leave rural residents – about 20% of the U.S. population – traveling long distances, if they're able to travel at all. Getting the word to rural residents about when they can be vaccinated isn't easy either, and the extraordinary amount of misinformation downplaying the risk of the coronavirus this past year has had an impact on rural residents' willingness to get the vaccine.

The problem with big batches and cold storage

The first two authorized vaccines – one made by Pfizer and BioNTech and the other by Moderna – are mRNA vaccines. It's a new type of vaccine that uses the molecular instructions for building virus proteins rather than injecting parts of the weakened virus itself. Both must be kept in very cold temperatures. To ensure stability, the vaccine doses are shipped in special containers with dry ice, and for now, vaccines are being delivered only in large batches.

The Pfizer vaccine is shipped in increments of 975 doses, which creates a challenge for small hospitals. Urban areas will be able to quickly distribute those doses, but finding enough patients to vaccinate quickly in rural areas may prove more difficult.

Moderna's vaccine is somewhat more manageable, with a minimum order of 100 doses. Both vaccines also require two doses per person, with the second dose of Pfizer's vaccine given 21 days later and Moderna's 28 days later.

As a result, the vaccine distribution efforts will favor hubs that cater to more populated areas to avoid wasting any vaccine or leaving patients unable to get their second dose.



The Pfizer vaccine ships in batches of 975 doses and must be used within five days. (Photo/David Ryder/Getty Images)

Cold storage is another challenge, since small hospitals are less likely to have expensive freezers. The Pfizer vaccine must be stored at minus 94 degrees Fahrenheit (minus 70 Celsius) and Moderna's at minus 4 Fahrenheit. There are limits on how many times the vaccine shipping containers can be opened and how quickly the vaccines must be distributed. Once thawed and prepared, the Pfizer vaccine must be used within five days and Moderna's within 30 days.

Each patient must receive both doses of the vaccine from the same manufacturer to ensure safety and effectiveness, adding to the challenge. Manufacturers have included personal dosing cards for patients to carry with them to help.

Rural America's take on COVID-19 and vaccines

Rural America already has difficult barriers to health care access.

It has fewer health care providers serving a more geographically diverse population than in metropolitan communities. And in many of these areas, rural hospitals have been closing at an alarming rate, leaving people to travel farther for care. The population is also older. Public transportation that could help poor or elderly residents reach hospitals is rare, and distance and geography, such as mountain roads, can mean driving to those sites takes time.

Getting accurate information about the vaccine and how to receive it into rural areas has also proved difficult. Many rural counties still have limited access to broadband internet connections, smartphone service and other technologies. That often means residents rely on television, newspapers and radio for news, which can limit the depth and scope of information.

While some rural counties have started getting the word out, many don't seem to have specific plans on how to inform their residents about how and when each person can get the vaccine, let alone specific plans for actually giving it. They often rely just on local press releases that many residents never see.

Rural nonprofit health care organizations have tried to bridge that gap and improve rural communications about vaccines and the pandemic. Care Compass Network, which coordinates organizations across southern New York, has offered educational webinars with the latest information about the virus and the vaccines, for example. But there is still much work to do.



Where COVID-19 cases are highest for the population size

COVID-19 has hit states in the Midwest, South and Great Plains hard. Several predominantly rural counties stand out when comparing all known cases of COVID-19 per 100 residents.

Rural Americans' views on vaccines are influenced by media and word of mouth, politics and religion, as well as previous experience with vaccinations and, perhaps most importantly, the difficulty of accessing health care. In a survey conducted by the Kaiser Family Foundation in December, about 35% of rural Americans said they probably or definitely would not get the vaccine, higher than the 27% nationwide.

Small batches, new vaccines and pharmacies

Getting enough of the U.S. vaccinated to eventually end the pandemic will require more work in all of these areas. That includes improving shipping and storage processes so orders can be broken up and distributed to smaller hospitals, distributing more vaccine doses, and improving communication. With Moderna's vaccine arriving in smaller batches and not requiring such low temperatures for stability, it may prove to be more accessible for rural areas. Utah has already taken advantage of those characteristics to get initial doses to smaller hospitals and has started vaccinating health care providers. Pfizer has said it may be able to offer smaller batches by April.

Other vaccines on the horizon are also expected to have less stringent storage requirements and may potentially be delivered in one shot. The British government on Dec. 30 authorized one of them, a two-dose vaccine developed by the University of Oxford and AstraZeneca that can be stored in a normal refrigerator for six months. U.S. officials are awaiting more testing on it, however, and don't expect authorization for U.S. use until April.

The falling number of rural hospitals also remains a challenge for getting vaccines to patients. Allowing community pharmacies to offer the vaccine – particularly if independent pharmacies are included – could eventually help expand the distribution network in rural

areas. (Courtesy https://theconversation.com/)

The Cold Supply Chain Can't Reach Everywhere—That's A Big Problem For Equitable COVID-19 Vaccination

To mitigate health inequities and promote social justice, coronavirus vaccines need to get to underserved populations and hard-to-reach communities.

There are few places in the U.S. that are unreachable by road, but other factors – many rural hospitals can't afford ultralow-temperature freezers or might not have reliable electricity, for example – present challenges. However, with government will and resources, these could be overcome.



A freeze-dried smallpox vaccine called Dryvax was the first temperature-stable vaccine. (Photo/James Gathany/CDC via Wikimedia Commons)

The Pfizer and Moderna vaccines are a great start that should be celebrated, but they rely on a complicated supply chain of freezers and temperature-controlled shipping methods called the "cold chain." That reliance on the cold chain raises equity and social justice concerns, since many parts of the world cannot support one. Researchers are working hard on vaccines that can avoid the logistical and economic nightmare of cold chain delivery.

Where the cold chain doesn't go

In poorer areas, more remote parts of the world and in places where the mean daytime temperature is high and electricity is unavailable or spotty, there are no mechanisms to keep vaccines at low temperatures. There may in fact be no roads – let alone airports – in many of these places either. And even if roads exist, they may be impassable at certain times of the year or inaccessible for political reasons or because of civil unrest.

Both the Moderna and Pfizer vaccines need to be kept frozen and must rely on the cold chain to get anywhere. Only large wealthy countries have the resources to implement a well-developed cold chain, and that means huge parts of the world currently can't get a COVID-19 vaccine.

This is bad for public health and fails to be equitable and just.

Editor's Choice



Confetti flies in the air as Jeanne Peters, 95, a rehab patient at The Reservoir, a nursing facility, gestures after she was given the first coronavirus vaccination as Mary Lou Galushko, left, looks on, in West Hartford, Connecticut, December 18, 2020. Stephen Dunn/Pool via REUTERS



A gravedigger works at the Parque Taruma cemetery amid the coronavirus in Manaus, Brazil, December 31, 2020. REUTERS/Bruno Kelly



Tanna Ingraham places a sheet over the body of a patient who died inside the coronavirus unit at United Memorial Medical Center in Houston, Texas, December 30, 2020. REUTERS/Callaghan O'Hare



A cemetery worker prepares a grave ahead of a burial at the Westpark Cemetery in Johannesburg, South Africa, December 24, 2020. REUTERS/Siphiwe Sibeko



Family members and loved ones of Jose Garcia, who died from coronavirus, cry as he is laid to rest at the San Jose Cemetery in La Mesa, New Mexico, December 22, 2020. Justin Hamel/Handout via REUTERS



Greek Orthodox priest Father Efstathios wears a protective face mask as he stands next to newly-opened graves, in a designated cemetery area for patients who died from the coronavirus, in Thessaloniki, Greece, December 4, 2020. REUTERS/Alexandros... MORE

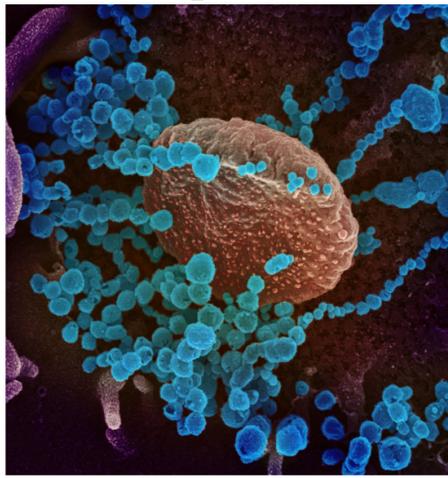


Medical personnel prepare in the emergency room of the Maggiore di Lodi hospital as a second wave of the coronavirus hits the country, in Lodi, Italy, November 13, 2020. REUTERS/Flavio Lo Scalzo



Wreaths are placed next to newly-opened graves, in a designated cemetery area for patients who died from the coronavirus, in Thessaloniki, Greece, December 3, 2020. REUTERS/Alexandros Avramidis

A New Type Of Vaccine Using RNA Could Help Defeat COVID-19



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

A century ago, on July 26, 1916, a viral disease swept through New York. Within 24 hours, new cases of polio increased by more than 68%. The outbreak killed more than 2,000 people in New York City alone. Across the United States, polio took the lives of about 6,000 people in 1916, leaving thousands more paralyzed.

Although scientists had already identified the polio virus, it took 50 more years to develop a vaccine. That vaccine eradicated polio in the U.S. in less than a decade. Vaccines are one of the most effective modern disease-fighting tools.

As of this writing, the fast-spreading COVID-19 has already infected almost half a million worldwide, and has killed over 22,000 patients. There is an urgent need for a vaccine to prevent it from infecting and killing millions more. But traditional vaccine development takes, on average, 16 years.

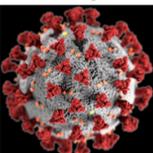
How can scientists quickly develop a vaccine for SARS-CoV-2?

Immunologists are currently trying to expedite development of vaccines and antibody therapeutics. Currently novel vaccine candidates are being developed for Zika and a potential protective antibody-based treatment has been successfully developed – in 90 days – to stop that viral disease. Fast-track “sprints” like these are part of the Pandemic Protection Platform Program run by the

Defense Advanced Research Agency of the U.S. Department of Defense to help us identify and deploy protective antibody treatments against viral outbreaks, such as SARS-CoV-2. Now other scientists are working on expediting a new type of vaccine for COVID-19.

A primer on vaccines

A vaccine trains the body’s immune system to recognize some signature viral protein called an antigen. SARS-CoV-2, like other coronaviruses, is named for the crown-like spikes on its surface. There are three proteins on the surface of these viruses: the envelope, membrane and spike, which encapsulate a strand of RNA. This RNA molecule holds the genetic instructions that make up the virus.



The virus SARS-CoV-2 uses the spike proteins (red) adorning its outer surface to invade the human cells. SARS-CoV-2 causes the disease COVID-19. (Photo/CDC/Alissa Eckert, MS; Dan Higgins, MAM)

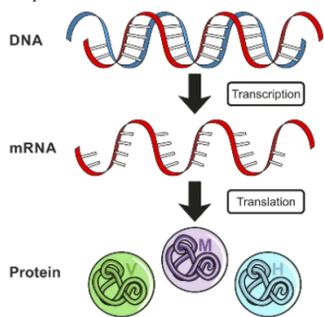
But viruses do not make their own compo-

nents. Instead, a coronavirus enters into the lung and possibly other respiratory track cells by attaching through to them via its spike protein. Once inside, the viral RNA becomes part of the host cell’s protein production machinery, and produces new copies of viral proteins and RNA which then assemble into thousands of new viruses to spread the disease.

So one way to stop a disease is to block the virus from entering the cells. Vaccines do that by training the body to identify and attack the virus before it can infect healthy human cells.

A vaccine is essentially a pure preparation of one or more key components of the virus – such as the envelope, spike or a membrane protein – that is injected in the body to give the immune system a preview of the virus without causing disease. This preview tells the immune system to seek out and attack the virus containing those specific proteins if the real virus ever shows up. However, developing vaccines based on viral proteins takes anywhere from years, such as for the human papilloma virus, to several decades, such as for rotavirus. Protein-based vaccines require mass production of viral proteins in facilities which can guarantee their purity. Growing the viruses and purifying the proteins at medically acceptable pharmaceutical scales can take years. In fact, for some of recent epidemics, such as AIDS, Zika and Ebola, to date there are no effective vaccines.

How to make a new type of vaccine quickly To make an effective vaccine more quickly against never-before-seen, fast-spreading viruses such as SARS-CoV-2, researchers at Vanderbilt and elsewhere are using alternate approaches. In one approach, instead of proteins, a new generation of vaccines, called mRNA vaccines, will carry the molecular instructions to make the protein.



Rather than produce a protein vaccine, sci-

entists at Moderna are instead giving patients the mRNA (the vaccine) that allow the individual’s body to manufacture the vaccine proteins itself. (Photo/udaix/Shutterstock.com)

Instead of the standard vaccines where viral proteins are used to immunize, an mRNA vaccine provides a synthetic mRNA of the virus, which the host body then uses to produce the viral proteins itself. The biggest advantage of the mRNA vaccines is that they can bypass the hassle of producing pure viral proteins, sometimes saving months or years to standardize and ramp up the mass production.

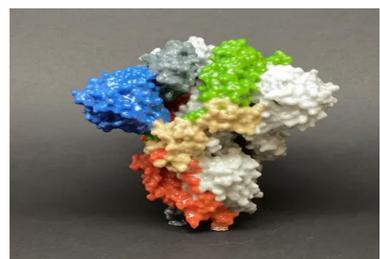
The mRNA vaccines basically mimic the natural infection of the virus, but they contain only a short synthetic version of the viral mRNA which encodes only the antigen protein. Since the mRNA used in vaccination cannot become part of the person’s chromosomes, they are safe to use. Such mRNA vaccines would also be safer than the weakened viral or protein-based vaccines because they do not carry the risk of the injected virus becoming active, or a protein contamination.

An mRNA vaccine for COVID-19 to undergo trial

Using this strategy, biotechnology firm Moderna Inc. announced on Feb. 24 that it had rapidly developed an experimental COVID-19 mRNA vaccine called mRNA-1273, ready for clinical trials in humans. This vaccine candidate is funded by the Coalition for Epidemic Preparedness Innovations, in collaboration with the National Institute of Allergy and Infectious Diseases. The mRNA-1273 encodes for a stable form of the SARS-CoV-2 spike protein.

The idea of using mRNA to ask the human body to read the instructions and manufacture the viral proteins is not new. Researchers almost two decades ago demonstrated that externally supplied mRNA is translated into the encoded protein. However, mRNA is not a very stable molecule, which prevented those mRNA vaccines from becoming a reality. The mRNA-1273 vaccine being developed today uses chemical modifications to sta-

bilize the mRNA and packages it into an injectable form using liquid nano particles.



The new mRNA vaccine provides the body with the instructions to manufacture the SARS-CoV-2 spike protein. This protein gives the immune system a preview of the virus. (Photo/NIH)

RNA-based antibodies

Besides using mRNA as a vaccine, scientists are also using mRNA as a drug that can be given intravenously. In this case the mRNA encodes an antibody protein that is known to attack the virus. So instead of giving the patient a delivery of protein antibodies, physicians could instead give them the mRNA infusion for instructions to make their own copies of disease-fighting antibody proteins. Effective antibodies can be quickly identified by screening the survivors of a disease. But producing such antibodies for therapy often faces hurdles of poor yields, inefficient purification and incorrect protein modifications.

The effectiveness of such strategy has already been demonstrated by James Crowe’s team at Vanderbilt University. In animal studies, an antibody previously isolated from a survivor of Chikungunya, an emergent, mosquito-borne tropical viral infection that causes chronic and debilitating joint pain and arthritis was encoded as an mRNA and given to mice. The mRNA encoded antibody protected mice against infection and virus-associated arthritis, and also created protective antibodies in macaques. The mRNA based antibody is now undergoing clinical trials.

Similarly, specific antibodies against SARS-CoV-2 are being isolated from COVID-19 survivors. The genetic instructions for the most effective anti-coronavirus antibodies can be encoded as mRNA. These mRNA encoded antibodies can be used to treat patients needing urgent care.

While there are several promising new approaches, all of these are still experimental. Our best protection against COVID-19 currently remains prevention and containment of the disease. Until we have a good vaccine against SARS-CoV-2, social distancing and vigilance is our best weapon. (Courtesy https://the-conversation.com/)

SC 美国生活 Daily News

美国的喝茶之道



美国人喝茶的习俗是由欧洲移民带去的，虽美国人喝茶没有欧洲人多，但喝茶方法却与欧洲大体相仿。美国喝茶有清饮与调饮两种，大多喜爱在茶内参加柠檬、糖及冰块等添加剂。不过，美国毕竟是个年青的国家，所以喝茶

没有欧洲那么考究。加之美国人生活节奏很快，喜爱方便快捷的喝茶方法，故以冰茶、速溶茶和水罐茶为主。美国人很喜爱中国茶，中美之间茶的交易几乎是伴随着美国这个国家的诞生而同步开端。

美国地处北美洲中部，当地喝茶，18世纪以中国武夷岩茶为主，19世纪以中国绿茶为主，20世纪以红茶为主，80年代以来，绿茶出售又开端上升。但是，作为热饮料的茶，美国人却演变成冷饮冰茶。

在美国，无论是茶的沸水冲泡汁，仍是速溶茶的冷水溶解液，直至罐装茶水，他们饮用时，大都习惯于在茶汤中，投入冰块，或许饮用前预先置于冰柜中冷却为冰茶。冰茶之所以受到美国人的欢迎。这是由于冰茶应顺了快节奏的生活方法。大家不肯用花时间热泡的方法喝茶。而喝冰茶时，消费者还可联系本人的口味，添加糖、柠檬，或其他果汁等。如此喝茶，既有茶的醇味

，又有果的幽香，尤其在盛夏，饮之满口生津，暑气顿消。

冰茶作为运动饮料，也赢得了美国人喜爱。它可替代汽水，既可在运动时解渴，又有益于运动员康

复精力。人体在严重劳累的臂力活动之后，喝上一杯冰茶，会有清凉舒服之感，而且使精神为之一振。

其喝茶较多种类为袋泡茶、冰茶、添香茶和草药茶为主。当然，美国人也喝鸡尾酒，特别是在风景秀丽的夏威夷，遍及了喝鸡尾茶的习气。鸡尾茶的制法并不杂乱，即在鸡尾酒中，依据各人的需求，参加必定份额的红茶汁，就成了鸡尾酒。仅仅对红茶质量的需求较高，红茶具有汤色淡雅，味道鲜美，以为用这种茶汁泡制而成的鸡尾酒，味更醇，香更高，能提神，

可醒脑，因此广为流传。

这些年，跟着绿茶保健功能逐渐提高，美国又掀起“中国绿茶热”。美国国家卫生部和有关集体还专门举行“茶与安康”的世界学术会议，举行中国茶文化周和中国茶文化研讨会，在纽约还成立了全美世界茶文化基金会，从事茶文化的宣扬与中美茶业沟通的和谐与组织工作。许多闻名大学，都举行中国茶专题讲座，有的还投入巨资进行茶叶保健作用的根底理论研究。



美国婚礼的习俗



不同国家之间具有不同的历史文化、生活习惯、风俗礼仪，其中，结婚的形式也大有不同。今天，小两口婚博网小编就带大家来了解下美国婚礼的习俗，感受一下他们简约的婚礼氛围，和我们的传统中式婚礼的繁琐复杂比较，中国人结婚实在太辛苦了。一起来看看吧，或许会对你的婚礼策划产生某些启发。

在美国举办婚礼可以隆重，也可以简约，没有攀比，量力而行。美国人没有结婚一定要买房的概念，男方更没有结婚前一定要准备婚房的压力。男人娶老婆、女人嫁老公不在乎是否门当户对。

美国人送礼讲究实用，但都不会很昂贵。遇到朋友结婚，你若收到请帖，一般都要去参加婚礼。出席婚礼的宾客一般不直接送礼金，如果不知道对方需要

什么样的礼物时，宾客可以以到不同的商场购买礼券，这样就可以让新人自己到商场挑选喜欢的礼物。礼券的金额可根据自己的财力决定，若你手头实在拮据，送张贺卡也是可以的。

婚礼策划，创意婚礼方案，个性婚礼

在美国较为普遍的一种做法是：当一对新人筹办婚礼，通常会去美国最大的“梅西百货公司”代办礼品，将他们喜欢的礼品放在商店电脑系统或网站上，然后通知前来参加结婚仪式的宾客在网站上挑他们想送的礼物。新婚夫妇会在婚礼请柬上注明，他们已在某百货公司或厨房用品店选好了喜欢的东西，并附上礼品单的网页。朋友在网页上看到礼品单后，根据自己和主人交往的深浅及自己的经济能力，来选择礼品。送礼物只要购买，姓名马上输入计算机，一个清单打出来，谁送了什么礼品，清清楚楚地列在表上。一般宾客送礼品或礼券的数额大约100美元(约人民币630元)左右。

由于婚礼费用昂贵，越来越

多的美国婚前男女都会认真地考虑举办婚礼时会发生的意外风险，譬如因一方婚前突然改变主意、父母家人干涉或遭遇极端恶劣天气等各种原因导致婚礼取消。为了防止和降低婚礼因取消带来的损失，他们都会购买婚庆保险。投保的项目包括摄影、服装、礼物、戒指等，婚庆保险金额通常在155美元至550美元之间。如果投保100万美元婚庆事故险，费用在185美元左右。

目前，美国有多家保险公司提供婚庆保险。与其他类型的保险一样，婚庆保险的费用取决于承保项目和金额。据美国婚庆网站介绍，因取消或推迟婚礼可索赔17.5万美元，摄影或视讯故障赔偿1500美元，结婚礼服出现问题可索赔1.05万美元，责任事故和财产损失赔偿则分别高达100万美元。这为即将步入婚姻殿堂的情侣减少了后顾之忧，确保婚礼办得尽善尽美。

怎么样，一向崇尚自由的美国人，举办婚礼都是很随意的，毕竟结婚是找个心爱的人，并不是找个有钱的人。