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FOR BETTER OR FOR WORSE?



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In Memoriam

This edition of One World Magazine is dedicated to the members of our SLU community who were lost too soon.

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Letter from the Editor

Dearest readers,

Roughly three weeks before we send each edition of One World Magazine off to publication, our senior editorial team gathers in a library study room to conduct secondary edits. We spend so much time reviewing each piece that our eyes start stinging from all the blue light, and our heads start aching from all the debate about appropriate sourcing. Regardless, this weekend—endearingly named “Editing Hell Weekend”—has always been one of my favorite parts of production.

At my first Editing Hell Weekend, four years ago, one principle was seared into my brain above all others: **question everything**. Question the gravity of each claim, the rationality of each consensus, the validity of each citation. Question why we’re publishing this. Question why we might not. Question why this side is enlightened, but that side is left in the shadows. Question who is favored in this narrative; question who is left out. Question if the comma is better here or there—if the colon is better as an em dash—if the leading anecdote is steady and warranted. No rock goes unturned. No curiosity goes unprobed. No eyebrow goes unraised. Our editorial skepticism, as I’m sure our writers can attest, is borderline obsessive.

But it’s worth it to know we did that journalistic duty—we wrote the truth—we **found the answer**.

At least, that’s what I had always believed. Until this semester, when I went back through our Editing Hell Weekend comments: several hundred gritty questions left for some of the smartest people I know, by some of the smartest people I know. Only a few weeks out from final review, we were posing more questions than we were able to answer.

President Joe Biden isn’t holding up to his promises: how do we hold him accountable?

Prison recidivism rates are sky-high: how do we heal broken systems?

The Oscars are losing viewers: will they still be relevant a decade from now?

Factory farms are crushing workers and ecosystems: how could consumers alone redistribute their power?

Medical technology is moving forward: how do we know if it is moving too fast?

I was, admittedly, overwhelmed. My first thought was, “scale down.” Tell the team to narrow the focus, level our heads,

ask smaller questions. Ask for shrinkage. Ask for reduction.

Until I remembered the theme we decided on, after hours of healthy debate over the topic that plagued us the most, the rapid evolution of our cultural landscapes.

“For Better, or For Worse?”

For the first time in the history of the magazine, we had chosen to lead with a question.

What if, for the first time in the history of the magazine, we chose to leave it unanswered?

See, there’s a lot of noise out there nowadays. You can read a hundred news sources. You can talk to a hundred people. You can live a hundred lives of your own, travel far and wide, read and listen and ask and learn. Yet even the most well-rounded of us is not fully spherical. There is always something we are missing, always a perspective we will never hear, always an exception to every golden rule.

There is humanity in our own not-knowing: our perpetual ignorance might just be the only common ground we ever stake.

I admitted, this spring, over and over again, that I did not know the answer. There is oftentimes no right. There is oftentimes no wrong. So, like our last edition, nuance guided our editorial decisions.

“One World” does not mean “One United Front.” It means forfeiting total unity for the acknowledgement of mortality—for discretion—for difference. How do we want to balance that difference? How do we know if we’re getting it right? How do we live on fulcrums and faultlines, reckoning our own experiences and desires with the infinite untapped wisdoms of others’?

These questions remain largely unanswered. But that does not mean they are too big; that does not mean they are not worth asking. We’ll leave it up to you to unravel the threads of the past and future our team has only begun to unfurl. Is our recent global “progress” for better, or for worse?

And if you find yourself saying, “I Don’t Know,” note that sometimes, “I Don’t Know” is an appropriate answer.

Fondly and on behalf of the magazine,
Lexi Kayser
Editor-in-Chief
Fall 2021- Spring 2022

SLU, ROE AND WADE



Ada Heller
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If you are anything like me, classes, tests and friends became background noise during the last week of November and the first week of December of 2021 as I waited with bated breath to see if Saint Louis University (SLU) would prevent “political commentator” Matt Walsh from speaking on campus. In addition to being blatantly racist, Islamophobic, transphobic and sexist, Matt Walsh’s views on abortion were an added stressor to the end of a semester that was chock-full of tension regarding reproductive access. Walsh, in a tweet from December of 2021, stated “I want Roe to be overturned...its overturning would cause misery and suffering among the very worst people on Earth.” At the beginning of November, SLU Students for Life’s display of flags representing a “fetus cemetery” began a campus-wide conversation regarding reproductive justice and abortion access. The rest of the nation is turning its attention to these issues as well. As the country approaches a crossroads, so does SLU’s campus. The question is, where will SLU stand when the dust settles? For and with its students, or with a poorly disguised ideology designed to control bodies and choices?

In November, it was all too easy to see the vast divide between student opinions regarding access to abortion. The country remains divided on this issue as well. The right to an abortion stands in limbo as the Supreme Court prepares to make a ruling this summer

that could reverse all of their prior decisions on abortions. Since 1973’s Roe v. Wade decision, abortion has technically been legal in all 50 states. However, Dobbs v. Jackson Women’s Health Organization, which directly challenges Roe v. Wade, could change that. The state of Mississippi looks to enforce an abortion ban after 15 weeks, as well as overrule Roe and the constitutional right to an abortion.

Missouri, like Mississippi, has only one operating clinic that provides abortions. This clinic sits exactly one mile from SLU’s campus. It is frequented by pro-choice and “pro-life” protestors alike. It is impossible not to feel the delicacy of this situation while having conversations about reproductive justice and access on campus.

The U.S. government’s political debate over access to abortion should not be informed by religion due to the establishment clause in the Bill of Rights, however, individuals are able to rely on religion to inform their political beliefs. SLU sits at an interesting spot in this situation. SLU is a private Catholic university and a good portion of its students are Catholic too, however, the argument that Catholicism and abortion access are fundamentally separate is flawed. The history of abortion and the Catholic church is complicated and at times contradictory. In a poll done by the Pew Research Center, 55% of Catholics in the U.S. today believe that abortion in most cases should be legal. Meanwhile, the Pope maintains that abortion is “murder,” that it is a “scientific” fact that life begins “at conception.”

However, it is unclear what he means. Scientifically, every cell in a woman’s body is alive. The question is, when do cells become a separate human being? A separate life? This is not an answer the Pope can turn to science for.

SLU, on the other hand, mostly avoids the conversation entirely. Even as conflicting groups protested on campus last semester, SLU’s administration maintained its relative silence. SLU does, however, charter a chapter of Students for Life which, according to their website, “upholds the position that human life exists from conception to natural death; that all human beings have the right to life regardless of age, health, function, condition of dependency, or crimes committed, including the unborn from the moment of conception.” SLU did not agree to charter B!llikens for Reproductive Justice (BRJ) in January of 2020. The group formed anyway, in response to a lack of reproductive justice and lack of access to safe reproductive supplies on campus. On their website, BRJ states “cura personalis means every person, and every student at SLU, deserves access to reproductive health care and the education to make the decisions they want about their body. Therefore, as B!llikens for others, we are called to actively implement our mission of reproductive justice at SLU.”

Cura Personalis, as defined on SLU’s website, is Latin for “care for the individual person and describes respect for the dignity of each person as a child of God.” On campus, cura personalis is widely defined as “care for the whole person” or care for a person’s mind, body and spirit. SLU has an obligation to the health and wellness of its students as it has an obligation for the education it provides.

According to the Pew Research Center, nearly 7 of 10 abortion patients are between the ages of 18 and 29 and about 20% of women will have an abortion before the age of 25. This is an issue that directly affects college students and directly affects SLU. This is a health care issue for college students. College students need abortion

access because college students need access to all forms of health care.

SLU can not hide behind its Catholic values just to appease its conservative alumni and donors. College students are overwhelmingly pro-choice. We stand on the side of justice and that includes reproductive justice. One religion’s shaky stance on an issue can not define the lives of millions of people across a nation nor should it define the health care a SLU student has access to.

Come this summer, no one can maintain silence. SLU has an obligation to its students to speak out against any ruling that may prevent abortion access across the United States, especially as a Catholic university that maintains a cura personalis value, and especially since campus is located a mile away from the only abortion-providing facility in the state of Missouri. The consequences of not would be detrimental to SLU’s students, the city of Saint Louis and the state of Missouri.

SLU eventually spoke out against Matt Walsh’s bigotry and prevented him from speaking on campus. SLU proved that it can recognize that injustice is not part of the Catholic faith nor part of SLU’s values. It is simply time for SLU and its pro-life students and alumni to recognize that the real lives on the line are the lives of students with uteruses. Those whose access to health care is on the line. Those whose lives were affected by SLU Students for Life’s actions last semester and those whose safety is hanging in the balance. There is only one right stance for SLU to take. SLU needs to stand with Roe and stand with the health of its students.





Tracy George
she/her
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“How severe is your pain on a scale from 1 to 10?”

This standardized pain scale has been at the forefront of guiding health care professionals in understanding which patients “deserve” drugs compared to others. The United States is plagued by a chronic pain issue with more than 25 million Americans suffering from an affliction that appears to have no relief in sight. With an increase in chronic pain, the clinical use of opioids has quadrupled since 1999. As gatekeepers of the legal opioid supply, physicians seem to be the prime target in combating the rise in drug use over the past few decades. This heavy prescribing manner of pain medication has characterized the epidemic known as the opioid crisis.

The opioid crisis has been at the head of many issues that are looked to be regulated by both governmental and public health officials. This national emergency has caused individuals to take a step back to understand how this matter has become so widespread in the United States. According to an article by scholar Nathan P. Coussens, in 2016, the opioid crisis claimed the lives of 42,000 individuals in the U.S. In 2019, opioids were involved in 49,860 overdose-related deaths (70% of all drug overdose deaths). These numbers describe the magnitude of the opioid crisis, but this issue reaches across many sectors of society. Prescribed opioid-related deaths have the potential to cause a loss of productivity,

intergenerational trauma, and a strain on community resources that leave individuals asking what more could have been done.

Pain control is at the center of the opioid epidemic as millions of individuals in the U.S. look for options to combat their symptoms. As stated by academic Mark A. Lumley, pain is more than a symptom or a sensation. It has the ability to manifest into emotional, cognitive and psychosocial factors. This is specifically why the diagnosing and treatment of pain is so difficult—because of its subjectivity.

Under-training regarding distribution and prescribing of opioids leads to a limited understanding of how to prevent drug abuse. To combat this issue, the most important group of individuals that must be addressed are physicians. It is necessary that physicians are trained in how to properly assess a patient’s need for opioids of any amount.

It was found that prescribing patterns are smaller for physicians who had received specific training in the use of opioids after medical school. This is in regards to the shifting attitudes that physicians have when they are able to become more knowledgeable on the long-term effects that opioids may have on a patient. This shifting attitude focuses on whether the benefits of opioids will outweigh the potential negatives which should be determined on a case-by-case basis. In agreement with scholar Molly Schnell, pain training in physicians can involve evidence-based pain management training. The goal of this training is to assist physicians in their understanding of assessing pain, chronic pain patients and providing evidence-based care. This involves looking towards

physical rehabilitation, pain psychology, pharmacotherapy and procedural interventions for pain management. The implementation of these tactics may have been lacking in previous decades due to differences in specialties that prioritize pain training and shifting attitudes on the benefits of evidence-based care.

Treatment and diagnosing involve a variety of factors in order for physicians to fully address the needs of their patients. Pain needs to be fully characterized in terms of its site, pattern, intensity and pathophysiology. When observing prior medical history, it is also vital to look to present or past disabilities, mental health disorders or substance abuse disorders. In addition, past treatments must be observed closely. Examining all components makes it certain that a patient is not just being examined at one point in time but rather there is a comprehensive perspective on their case. In addition, when looking at all these contributing factors together, it is important to include the patient in the discussion to ensure that they understand their own treatment plan and certain expectations or challenges that may arise for themselves.

In 2018, the University of Missouri School of Medicine introduced a program known as Opioid Use Disorder Show-Me ECHO (Extension for Community Healthcare Outcomes). This strategy allowed specialists to train physicians to identify and treat chronic pain conditions through video conferencing. The implementation of this program can be labeled as a success as it has allowed clinicians to be more supported in terms of ensuring their medical education continues. The long-term goal of Show-Me ECHO is to expand treatment facilities for opioid use disorders and by providing physicians the updated training

and expertise in addiction, they will have greater confidence to offer this treatment. This plan is one of many examples that productively further their mission to educate health care professionals.

The four main vital signs health care providers are taught to look at are body temperature, blood pressure, pulse and breathing rate. The 21st-century dilemma of chronic symptom management has pushed the introduction of pain as a fifth vital sign. There is extreme value in being able to prioritize pain and understanding how it can manifest to be a symptom that consumes an individual’s life. Physicians are one of the main providers that are able to see this through by promoting a biopsychosocial orientation to pain that emphasizes both short-term and long-term alleviations for patients. Yet, education does not halt when a medical student becomes a practicing physician. Rather, it is pertinent for training to be periodic in order to promote self-assurance for each physician— a self-assurance that fosters personalized and compassionate care for each chronic pain patient.

Cleansing the Timeline:

STRIPPING BACK THE WHITEWASHING OF HISTORY



Lauren Hamby
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History & Spanish

My perspective on the way that history is taught changed when I entered Dr. Anthony Marshall's Advanced Placement U.S. History class. A tall, thin Black man with a rich and booming voice, Dr. Marshall was unofficially the voice of my public high school. He had a reputation for teaching classes that were meant to challenge students, especially white ones in our historically Black high school. His courses were centered around the Black experience. He spoke of the past like it was sacred, making every class seem like a sermon and our classroom holy ground.

Although I felt like I knew a good amount about American history before the class, I did not realize that this knowledge was centered in whiteness. I do not fault any of my teachers or institutions before high school for this missing piece. Rather, our education system as a whole generally fails to teach history from a non-victor's perspective. The winners, the colonizers and the white man wrote the narratives that were passed down to today's students and tomorrow's leaders. This perspective is problematic because it erases and willingly silences stories and people who do not fit into the colonial narrative. To create a more inclusive understanding of the past, we must change the traditional timelines from which we normally study history to include Black and Indigenous voices.

Centering Black voices is an essential step in shifting away from the victor's history. Typically, when Black history is touched upon in the U.S.

history classroom, the main focal points are the institution of slavery, the Civil War and the Civil Rights movement. Perhaps a unit on the Harlem Renaissance is included, as well. While there is nothing inherently wrong about focusing on these topics in the classroom, only looking at these narratives fails to teach students a complete and accurate history. It does not show the richness and complexity of Black culture in the United States.

There are many steps that can be taken to change the timeline that U.S. history classes typically use in regards to Black history. Depictions and stories of success and excellence within this community should be shared more, and the histories that are currently shared should be shifted to allow for more honesty and agency in regard to Black people. A few places to start would be by integrating literature and lessons that change the typical narrative and give these communities more agency. For example, Black success could be shared through the story of Madame C.J. Walker or of Tulsa's Black Wall Street. Reading books by Black authors and studying art by Black artists can also be effective tools for promoting changes in classrooms of all ages. Additionally, re-telling the stories typically taught in history classrooms but from a Black perspective can allow for an accurate retelling centered in agency to occur.

This same idea can apply when looking at Indigenous history in the United States. Typically, the stories that relate to these groups are focused on their work for white colonists or their existence solely as a far-distant past. The first Thanksgiving and the lack of present-day Indigenous movements in classrooms work to push these narratives. In this way, the histories that we tend to share about native people in the U.S. severely lack a realistic

perspective of these groups and their relationships with others.

Similar to the changes that would be necessary for a better understanding of Black history, Indigenous representation in classrooms across the country would benefit from having more of their stories shared from their own perspectives, both in the past and at present. This could include intentionally focusing on the Indigenous groups present in the region where the classroom is and acknowledging the land on which the school sits. Inclusive and accurate language is also essential. Naming groups as specifically as possible is better than lumping all Indigenous people into one category, as each tribe is complex and different. Finally, there are many books and artists that center Indigenous voices both in the past and at present. Utilizing these resources to amplify native voices is essential to sharing more accurate accounts of history in regard to these groups.

Centering Black and Indigenous voices in the classroom is necessary to creating a more just and equal society. However, these perspectives are not the only ones that need to be shared. To have a more accurate understanding of all of the history of the United States, any and all marginalized voices must be shared. Too long has the state of our history been that of the white man. Asian American and Pacific Islanders, Latinxs, LGBTQ+ and other groups must be included in order to form the most well-rounded, inclusive and accurate account of the past. Without sharing the past in an honest way, we lose the invaluable lives, stories and lessons of those who lived before us. It is not fair for their legacies for them to be forgotten or conformed to the white model.

Though implementing these changes in every classroom seems like a daunting task, there are steps that every person can take in order to begin challenging our current timeline. To

begin, it is important to view the classroom in the abstract. Any place where learning is done, or where learning could be done, should be considered a worthwhile place to start to change the narrative. Monuments, street art, work spaces and more should be having these discussions about the past as well.

Conversations about shifting away from the white timeline can look many different ways. Perhaps it is reading books about the past by authors with non-white identities. Maybe it is researching who is on the statue that you pass by on your daily commute and reflecting on why they are being honored in this way at this location. It could even look like challenging college professors who are only teaching from the victor's perspective to share accounts of the marginalized. Regardless of how these actions may look, the most important thing is to be open to new ways of thinking and willing to be wrong. Of the many things that I learned in Dr. Marshall's class, the idea that relearning takes time and patience is one that has still stuck with me today. Just because it may be a long and hard process does not make it any less valuable—in fact, it may be one of the most important things to do to build a better future.



THE U.S. PRISON SYSTEM FAILS PRISONERS

BY KLAUDIA WACHNIK

For many decades, it has been known how poor the current U.S. prison system is for inmates. It can be argued that many of the conditions experienced in prisons are inhumane and seek to tear each individual apart. While prison in itself is a grueling experience for many prisoners, life immediately after release proves to be a significant challenge, too. For a system that claims to push people out as better individuals, statistically, it does the exact opposite. According to the National Institute of Justice, 76.6% of prisoners return within five years. The prison system in the U.S. sets ex-inmates up to fail after their release and does not reduce recidivism, but rather inadvertently promotes it.

While there is language surrounding the prison system that the desired narrative is to rehabilitate prisoners, the reality experienced by a large majority of prisoners in the U.S. is the opposite. Internally throughout the system, and externally by those who view prisoners as outcasts, harsh conditions a punishment-oriented environment counter-productive to rehabilitation.

The Eighth Amendment of the U.S. Constitution protects prisoners against cruel and unusual punishment. Currently, violence runs rampant in prisons and leaves many prisoners at risk if they have not already faced harsh assault. While the violence may be done by other prisoners, that does not



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mean that officers and those operating the prison do not have a responsibility to give prisoners adequate medical care and to deter this violence. In a 1976 Supreme Court case, *Estelle v. Gamble*, it was ruled that any prison staff's "deliberate indifference" to a "prisoner's serious illness or injury" is considered cruel and unusual. Although this ruling was made decades ago, there is still a vast amount of unchecked violence in prisons, and rather than deterring or aiding in injury recovery, many prisoners are being ignored or put in solitary confinement as "protection."

These practices are reinforced by understaffed prisons, and classification issues only aid in increasing violence. Due to this prominent violence, offenders often leave prison more aggressive than when they entered.

According to Mental Health America, over half of Americans in jail or prison have a mental illness. For every mental illness, there is specific care and treatment that is needed in order to effectively manage symptoms. Prison staff and officials often will fail to provide the needed treatment

by guiding the prisoners to mental health professionals within the system. When symptoms begin to "spiral" out of control or cause some sort of disruption in the prison, rather than receiving adequate care and treatment, prisoners will typically face physical force and/or solitary confinement. These factors do nothing but aggravate mental illness in most cases.

Beyond just mental illness, many prisoners also experience substance use issues, and do not get the care and treatment that they need. In many prisons substance use runs rampant and is unchecked by prison staff and officials. According to The Marshall Project, former and current staff and prisoners have said that drugs enter prisons through visitors, packages and letters, and corrupt prison staff. - This was especially prevalent during the COVID-19 pandemic.

While prison serves as its own grueling process, life immediately out of prison proves to be incredibly difficult in its own ways. Parole conditions vary from state to state, however there is a collective set of parole expectations that are fairly consistent throughout the nation. Simmons University lays out these typical conditions, which include remaining within the same geographic area, receiving permission to change residence, maintaining consistent employment, prohibition from possessing firearms, paying parole fees, submitting to searches from parole officers at any time under any circumstance, not drinking alcohol whatsoever or not being present in bars and strict adherence to federal and state laws.

Coupled with these parole conditions, The American Bar Association's National Inventory of the Collateral Consequences of Conviction lists 47,442 different collateral consequences of incarceration. While some of the consequences are explicit and straight-forward in their terms, others are often very much up

to interpretation of legal officials.

Parole expectations and collateral consequences contain strict guidelines that can be hard to navigate, especially when individuals are expected to operate seemingly smoothly. Human life is complex, and incredibly difficult to navigate when there are various systemic and infrastructural roadblocks coupled with an experience such as prison.

There is also a lack of aid and support in the transition back to society. Many ex-prisoners experience being immediately thrust back into society, which can be a challenging space to navigate after experiencing prison. According to an Urban Institute study of Baltimore-area prisoners from Simmons University, ex-prisoners found that they relied on their family much more than they previously anticipated they would after prison, and found it difficult to find a job that could provide them enough finances to live securely. Only about half of the prisoners found their parole officer to be helpful during their transition back to society.

According to criminal justice scholars Francis T. Cullen, Cheryl Lero Jonson, and Daniel S. Nagin, "With some confidence, we can conclude that, across all offenders, prisons do not have a specific deterrent effect. Custodial sentences do not reduce recidivism more than noncustodial sanctions."

The United States prison system is set up for punishment rather than a chance at rehabilitation.

THE OSCARS'

Battle for Relevance



Lilly Adams

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Senior

Political Science

On Feb. 22, The Academy of Motion Picture Arts and Sciences announced that this year's Oscars would not be airing eight of its 23 categories. These categories are documentary short, film editing, makeup and hairstyling, original score, production design, animated short, live-action short and sound. This news was met with backlash from film lovers and filmmakers alike. Isaac Fieldberg, a pop culture critic who has contributed to Vulture, Fortune, Entertainment Weekly and the Boston Globe responded to this news on Twitter, writing, "any award ceremony that can't find time to present categories this integral to filmmaking cannot seriously claim to honor the craft of cinema." Steven Spielberg even weighed in for Vanity Fair, saying "I feel very strongly that this is perhaps the most collaborative medium in the world. All of us make movies together, we become a family where one craft is as indispensable as the next...And that means for me, we should all have a seat at the supper table together live at five."

This Oscars controversy is only one of many in recent years. Every year there seems to be a lot of criticism regarding how many marginalized communities are represented among the winners and the nominees. Following the 2015 Oscars, #OscarsSoWhite began trending on Twitter due to the nominees and winners that year being almost exclusively

white. The backlash in 2015 was so bad that the Academy implemented new diversity initiatives to combat the idea the Oscars were for the white Hollywood elite. They were embroiled in controversy once again in 2019 when the film "Green Book" won Best Picture. This was particularly controversial because "Green Book" was a white savior film that won Best Picture that year over films like "Black Panther" and "BlacKkKlansman."

It should come as no surprise that the Oscars' ratings continue to wane every year, and it seems like most attempts to keep the Oscars interesting or relevant continue to fail. This has caused many people in recent years, particularly those who are most interested in film, to begin questioning who the Oscars are actually for and what purpose they're actually serving.

So, who are the Academy voters? In 2012, 94% of Oscar voters were white and 77% were male. According to The Conversation, in 2018, 900 invitations were sent out as part of a diversity initiative to diversify the Oscar voters. Of the people invited, 49% were women and 38% were people of color. These were, of course, just invitations. This does not mean that everyone who was invited actually accepted and statistics on the current Academy are not transparent.

What purpose do the Oscars serve? According to the Washington Post, the Oscars are meant for peer recognition, to boost the profiles of people working in the industry, and to sell tickets so that moviemakers and movie studios can make more money. According to

the Academy's website, the Oscars are geared toward the entertainment community and film lovers internationally, so that people can come together and appreciate the accomplishments of filmmakers every year.

However, for an award show that claims to be by and for filmmakers and film lovers, they seem to alienate a lot of people in these groups. Variety reported in February 2022 that there have been discussions among Hollywood music guilds to ask the best score nominees, which includes people like Hans Zimmer ("Dune") and Jonny Greenwood ("Spencer," "Licorice Pizza"), to boycott. Many Twitter users have proclaimed that they will not be watching the Oscars broadcast because they see the Academy's decision as an insult to the art of filmmaking.

The next decade is going to be very important for the Oscars. With issues over nominees and voters, to issues with hosts, to issues with waning viewership, the Oscars are going to have to prove they are still relevant in today's society or risk falling into complete irrelevance. This is not to say that the Oscars need to become a contest for what is most popular with the public, because that is what the People's Choice Awards are for; it should not turn into an award show that gives incredibly famous people awards for being incredibly famous. However, the Academy could benefit from listening to younger generations and more of a variety of film lovers and filmmakers. There is a reason that certain films, usually biopics ("Bohemian Rhapsody," "Ghandi," "12 Years A Slave") or serious 20th century period pieces ("Atonement," "If Beale Street Could Talk," "First Man") get labeled "Oscar bait." The Academy has a formula that it prefers which means that lots of creative and innovative films get overlooked.

Even when films do get nominated for Oscars, they are still undermined. Just this

year at the 2022 Oscars, the writers wrote a joke for the presenters of the Oscar for Best Animated Picture that did not go over well with many viewers. After a spiel about the importance of animated films in childhood, the presenters went on to say that "animation is for kids to enjoy and adults to endure." This felt particularly disrespectful because one of the films nominated, "Flee," was an animated film about a gay man's experience as a child refugee from Afghanistan, which was geared towards adults. Even when films are nominated, they are still disrespected by the people who nominated them.

Despite many recent controversies, there have been a few silver linings. Jordan Peele's Best Screenplay win for "Get Out," Bong Joon-Ho's Best Picture win for "Parasite," Chloe Zhao's Best Picture win for "Nomadland" and Sian Heder's win for "CODA" are bright spots within overall disappointing Oscar Awards. If the Academy wants the Oscars to stay relevant, they will have to ask themselves whether they want the previously mentioned wins to be a moment or a movement.



SETTLING FOR BIDEN



Swathy Karthikeyan

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Junior

Neuroscience

In November 2021, millions of people across the U.S. held their breath as they anticipated the long awaited election results. Would we be subject to another four years of Donald Trump's presidency or would Joe Biden triumph? When the results came in announcing that Trump's reign had finally come to an end, many people sighed in relief. Optimism coursed through with cautious hope that our country would put together what had been dismantled the last few years. However, when we flash forward nearly a year and a half, we simply are not where we had hoped to be in terms of implementing more progressive, action-oriented policies. While progress has been made that we ought to appreciate, it is equally as important to look to where improvements can be made.

We as a nation need to understand that regardless of the party being represented during a presidency, when unjust decisions are made we must stand against them. However, it is worth considering whether we have grown complacent after four years of tirelessly fighting against the decisions made by the Trump Administration. It seems as if we have settled for mere annoyance rather than action when we are faced with news that would have fared worse if under the Trump Administration.

Prior to the election, several sexual assault accusations arose against Biden. However, overall public response was different compared to the public outcry in reaction to numerous accusations against Trump. An Economist poll at this time stated that "three in 10 Americans (31%) ... say the recent allegations against Biden are credible." However, for

Trump, the numbers were different as "about two in five Americans (41%) ... describe the allegations against Trump as credible." The question arises: did we choose to believe these allegations are less serious because we needed to believe that Biden is better than Trump?

Charlotte Alter wrote in Time magazine that during Trump's era, there was a movement of "nationwide protests urging women to abandon the Republican Party and demanding that GOP leadership un-endorse Donald Trump." While there was definitely backlash and outrage to Biden's sexual assault accusations, the public backlash did not compare to that against Trump. The reason for this may be that Biden's accusations were never as numerous. However, the underlying theme may be that we turn a blind eye to these issues when we are trying to focus on the good. There was a huge push during election time, particularly, on social media to "settle for Biden." But when we settle, do we forget that we must still hold sexual assailants as accountable as ever?

Looking to more positive changes, there still is a lot to be noted that has marginally improved under Biden's presidency: the most significant change being the stance Biden has taken towards combating climate change. Eli Stokols, writer for the LA Times, discusses the promises that Biden intended to fulfill in his first 100 days of presidency. He notes that "Biden signed an executive order on his first day in office to begin the 30-day process for the United States to rejoin the five-year-old global pact to reduce carbon emissions. The U.S. officially did so in February." We can see that there are promises that were made during his campaign that were fulfilled to an extent, but there is still uncertainty on how we deal with unfulfilled promises and incomplete actions.

During the early days of Biden's campaign he was adamant about imposing a more long term

TAKES A STEP TOO FAR

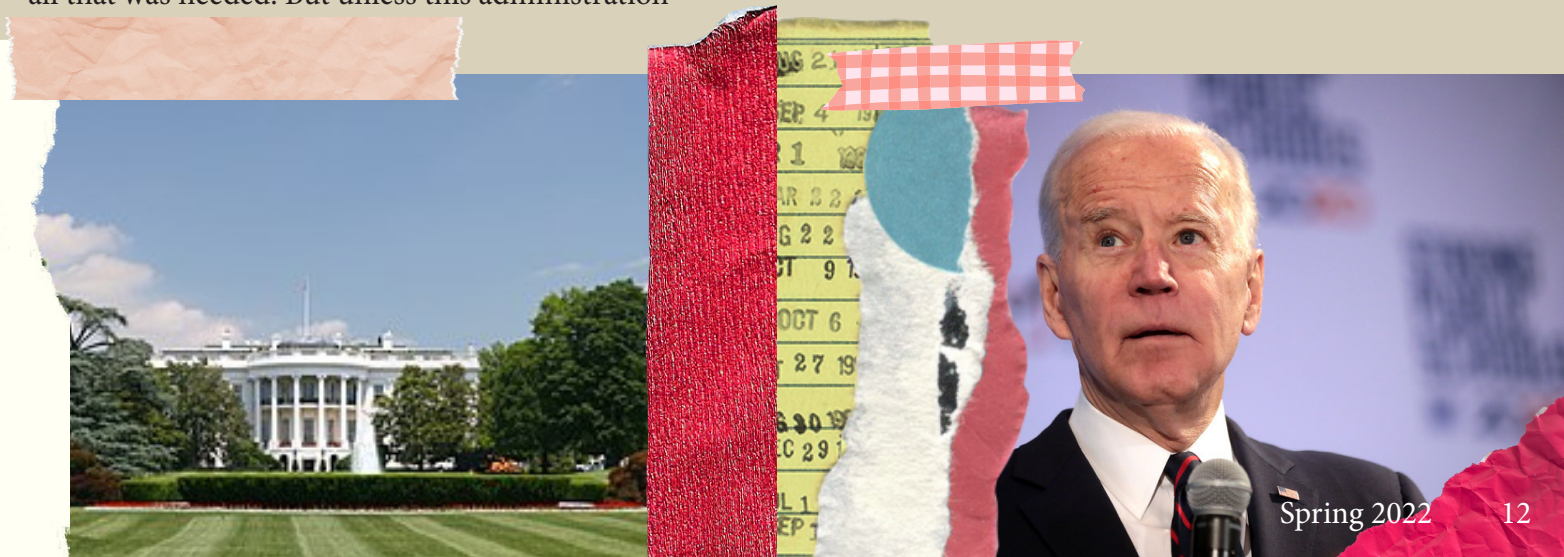
solution for immigration and ending inhumane detention centers. However, this is a classic case of an unfulfilled promise given that "nearing the end of Biden's first year in office, Trump's signature border policies remain in place, and the new Administration, despite the President's explicit promises, has not restored any semblance of asylum" (according to Johnathan Blitzer, staff writer for the New Yorker). Regardless of the party in office, reminding officials of their campaign promises and advocating for fulfillment of those promises should be an expectation rather than an exception. While there are certainly numerous factors that impede decision making, the overarching message remains the same: we must continue to demand change until we witness a satisfactory systemic change.

A core component of Biden's campaigning centered on compromise. With fear of being anything but moderate, Biden focused on meeting halfway between the individuals that had been hoping for Bernie Sanders as a candidate and the GOP individuals wary of Biden yet fed up with Trump. Jennifer Graham of Desert News wrote, "Liberal Democrats who wanted Sen. Bernie Sanders in the White House, but were willing to give Biden a chance, said they would hold the former vice president accountable for making good on some of his more progressive campaign promises. Similarly, Republicans who crossed party lines to vote for Biden said they would watch closely to ensure that he would be the consensus-seeking moderate and the unifier he promised to be." We need to remember accountability whenever we start to get too relaxed. Jeff Cohen, co-founder of Roots Action, an advocacy group writes, "Comfortable liberals — or those not paying close attention — may believe that replacing Trump is all that was needed. But unless this administration

delivers for working families bigly and quickly, the faux-populist GOP will come storming back into power in 2022 and 2024."

Accountability was embedded into Biden's presidency from even the beginning of the campaign. As we draw towards the halfway mark of his presidency, we must go back to the beginning and remember why he was voted into office. Yes, he may in several ways be better than another four years of Trump, but that is not enough to be deemed a successful president. As Martin Luther King Jr. mentions, "The white moderate is the biggest threat to civil rights." Remaining complacent only leads to more stagnancy and yet another missed opportunity to truly better our country.

We may have settled for Biden during the election, but we cannot remain settled for another two years.



URBAN REWILDING:

LETTING NATURE TAKE ITS COURSE IN URBAN SPACES ♻️



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she/her
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Rewilding, a process that allows nature to take over spaces that have been modified by humans, is essential to promoting a healthy ecosystem. One of the most successful examples occurred in Yellowstone National Park when wolves were reintroduced into the ecosystem in the 1990s. The Yellowstone wolf population had previously been hunted to eradication in the park which allowed the elk population to graze freely. This grazing killed off a lot of brush and trees throughout the park which led to hungry and sick elk and an unhealthy ecosystem. After bringing wolves back into the ecosystem, humans stepped away and allowed nature to take its course. The reintroduction of wolves led to a healthy elk population, flourishing willow and aspen trees, stabilized riverbanks, and the return of animals like songbirds, beavers, foxes and badgers.

The efforts of rewilding in Yellowstone cannot be replicated exactly in urban spaces since most city dwellers would not be fond of wild wolves on the loose with no elk to hunt. However, urban spaces can be rewilded, which is essential to promoting biodiversity in spaces that are not typically conducive for healthy ecosystems.

Biodiversity, which is the amount and variety of different species, is essential for a healthy ecosystem. Biodiversity supports the production of clean air and water, waste management, pollination and other essential ecosystem processes. The benefits of biodiversity do not just extend to plants and animals,

but also to human life as well. According to the World Health Organization (WHO), biodiversity supports human and societal needs by providing food, water, energy, and the development of pharmaceuticals. A 2019 study by the University of Exeter found that spending at least 120 minutes in nature every week is associated with good health and wellbeing. Having access to nature can also improve our mental health. A 2017 study published in Biohealth found that neighborhood vegetation cover and afternoon bird abundance was positively associated with a lower prevalence of anxiety, depression and stress.

Between 2001 and 2017, the U.S. has lost 24 million acres of natural land due to agriculture, energy development, housing sprawl, and other human factors according to a 2019 Reuters' report. Urbanization has posed a serious threat to biodiversity by causing habitat loss and fragmentation. Many cities have experienced urban sprawl, a rapid expansion of low density housing, which causes more habitat loss. When a suburb is placed in the middle of a forest, this area has now become fragmented because it is split into two isolated species. Suburban developments, roads, and other human-made structures pose a barrier for animals and forces them to live in a much smaller area. The United States Forest Service reports that every day 6,000 acres of open space, including rivers, streams, parks, forest, and grassland, is converted to other uses. In order to combat the biodiversity loss that results from this conversion of natural land, biodiversity must be promoted in urban spaces.

The biodiversity loss that urbanization has promoted needs to be combated in urban and suburban spaces. Rewilding takes a progressive approach to conservation by letting nature take care of itself. The rewilding movement was started by conservationists in the 1990s and was intended

to promote the restoration of large natural spaces. Rewilding in these areas typically involves the reintroduction of important species to the ecosystem, like the wolves that were reintroduced in Yellowstone National Park. Not every aspect of rewilding that works in a place like Yellowstone will work in cities, but there are still many aspects that can be applied in urban areas to increase biodiversity.

A 2009 study published in the journal Ecology found that small habitat patches must be integrated throughout a city in order to increase biodiversity. This can create a stepping stone effect which allows different habitats to become interconnected which promote biodiversity by exposing organisms to a wider genetic pool. The greater genetic diversity in a species will give them a better chance at survival.

How can we incorporate these stepping stones of rewilded spaces throughout our cities and suburbs? One way is to make changes to our lawns. Lawns are a vast monoculture that can harm biodiversity. When people tend to their yards they pull out, or even spray pesticides on, weeds and other plants like clover, which decreases biodiversity in their space. Lawns do not provide much of a habitat for pollinators or other plants and animals that make up a healthy and diverse ecosystem.

Even if people would allow just a small section of their yard to rewild, this could help sustain the ecosystem, especially as more people start the rewilding process and allow more space to rewild. The first step to rewilding a yard is to stop using pesticides and herbicides. Then evaluate what plants are already growing and encourage those plants to grow. It is important to note that invasive plants, or plants that are not native to your area, should not be allowed to grow since they are harmful to native plants and animals. At the beginning of the rewilding process it is also a good idea to try and attract birds and pollinators by planting native wildflowers and hanging bird feeders.

Even in dense urban spaces, there have been rewilding efforts. In New York City an old railroad line has become a garden that promotes biodiversity called the Highline Garden. Gardeners facilitate the natural growth occurring on the site, which allows for

plants to spread out and grow just like they would in nature. Spanning 1.5 miles, this garden is an important habitat for native plants, insects, birds, and animals that normally struggle to flourish in a dense urban environment. Not only is this garden valuable to biodiversity, it has also become a popular attraction. The garden stretches through Chelsea along the Hudson river and provides a scenic walk through the neighborhood.

Barcelona, Spain has recently started an initiative to help increase biodiversity in the city. The city is working to create over 500,000 square feet of greened streets and over 700,000 open green spaces. These will help serve as stepping stones of nature throughout the city that will help wildlife and plants thrive. In addition to these green spaces, the city will also be placing beehive and insect hotels and bird and bat nesting towers throughout the city. This will provide spaces of refuge for these creatures that might otherwise struggle to find a home in an urban space.

Rewilding in urban areas does not need to be as complex and as large scale as releasing wolves in Yellowstone. What urban areas need is small stepping stones of natural space that will allow native life to flourish. Both cities and individuals can take the initiative to help promote biodiversity where they live. Whether it is creating rewilded spaces in our lawns or dedicating entire parks for nature to take over, these spaces can help native plants and animals thrive in spaces that were originally posed barriers to their survival.

GROWING GREEN



Alfredo Mac Laughlin

he/him
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Agriculture is arguably the beginning of human civilization. It allowed us to settle down in one place, develop specialized jobs and passions and expand our population. This led to the development of human societies. Back when gardening and farming first began, everything was produced locally. Farms or large-scale gardens produced food mere feet from the people who would eat it. Nowadays, things are different. The development of the global economy has exploded the food industry, allowing us to eat food from other climates and cultures across the globe. This is largely facilitated by the practice of industrial farming. It is an incredible phenomenon, but it can carry harsh consequences for the environment and workers.

Industrial farming, or industrial agriculture, refers to the practice of producing crops and animals at a large scale while using methods that streamline production. According to the National Resources Defense Council (NRDC), an environmental interests group, this typically involves the use of concentrated animal feeding operations (CAFO), colloquially known as “factory farms.” CAFOs consist of facilities that house large numbers of animals in the smallest possible space. Even when labeled “free range,” animals are likely still raised in CAFOs. In his documentary “Supersize Me 2: Holy Chicken,” filmmaker Morgan Spurlock examines the way fast-food chain restaurants maintain a facade of morality by opening his own fast food chain. He explains that in order to qualify as free-range, chickens need only have access to the outdoors for 51% of their lives, and there is no minimum

requirement for the size of the outdoor access. CAFOs are in many ways exemplary of how industrial farming cuts corners.

Spurlock goes on to elucidate how industrial farming exploits the actual farmers. In the film, he interviews owners of small farms that raise chickens. The standard way they started their farms was by taking out loans and receiving assistance from large agriculture corporations, such as Tyson Foods. Tyson is the parent company of innumerable subsidiaries whose products can be found in supermarkets across the country. They are then contracted to sell their produce to the parent company. These corporations proceed to continually keep the farmers in debt. They require the farms to perpetually upgrade technology and change standards in expensive and largely unnecessary ways. One of the farmers interviewed by Spurlock who failed to comply was brought to court. Farmers are also paid based on how the corporations rate their chickens against chickens from other farms. Although it may seem like a way of rewarding farmers for performing more highly, many farmers claim this is an arbitrary process used to prevent any one farm from earning enough to pay off their debts. The farmers are essentially chained to the companies for the rest of their lives, and even then their debt is passed down to their heirs. It is modern-day indentured servitude.

In early 2021, The Huffington Post reported that leaders of Indigenous peoples in Brazil brought charges against current Brazilian president Jair Bolsonaro at the International Criminal Court (ICC). The charges assert that Bolsonaro’s removal of protections from Amazonian land and the Indigenous tribes living on it constitutes crimes against humanity. Although illegal clearance of Indigenous Amazonian land has been occurring far longer than Bolsonaro has been in office, he has greatly exacerbated the issue with both policy changes and inflammatory comments on

the ownership of Indigenous land.

Early on in his presidency, he transferred the authority of demarcating Indigenous lands from the Indigenous Missionary Council to the Agriculture Ministry — a move that federal prosecutors see as a violation of the rights Indigenous ethnic groups are guaranteed in the Brazilian constitution. This led to a 135% increase in invasions of Indigenous lands in 2019 and an increase in deforestation and violence against the local Indigenous populations. Much of this is driven by Brazilian cattle ranchers, a massive industry in Brazil. The country is responsible for 20% of the world’s beef exports. Land is cleared not only for the cattle, but for soybeans used as feed for the cattle.

Even when the deforested area is replaced with crops as opposed to livestock, there is still a net deficit in carbon uptake and biodiversity is reduced. Not all plants are made equal. Due to the size of the industry and the significance of the Amazon Rainforest to the global climate, Brazil is a particularly outsized case, but it is by no means unique. Industrial farming drives deforestation around the world.

Deforestation is not the only channel by which industrial farming damages the environment. Cows raised in CAFOs produce significant amounts of methane, a greenhouse gas with a warming effect far more potent than that of carbon dioxide. Methane is released via gaseous releases and in manure. Cattle raised in smaller farms produce significantly fewer greenhouse gasses as a result of their diet as well as due to better manure disposal techniques.

CAFO manure is also a cause of a great deal of ground and surface water contamination, according to a 2010 academic paper published by the National Association of Local Boards of Health. In addition to the usual contaminants in manure, because animals in CAFOs are packed together tightly, some diseases that are carried in manure can spread more readily among the animals. The 2021 E. Coli outbreak in romaine lettuce, for example, was caused by contaminated waste runoff from cattle that were carrying the bacteria. E. Coli

does not naturally occur in lettuce.

Industrial farming has streamlined production at the expense of workers and small farm owners, often with the expressed intention of preventing their growth. It causes monumental damage to the environment through deforestation and air and water pollutants in ways that disproportionately affect Indigenous people.

We can combat these effects by shopping at farmers markets and purchasing from local farms and vendors whenever able. Supporting small, local farms helps them continue operating independently. You can find farmer’s markets in your area by using farmersmarketplaces.com. From a structural standpoint, we can contact our elected officials and encourage them to support the Farm System Reform Act of 2021. Introduced to the Senate by Sen. Cory Booker, the bill aims to prevent the establishment of further CAFOs immediately and end operation of current CAFOs by 2040.

If passed, it will also set up a fund to offer debt forgiveness and transition assistance to owners of smaller farms and future independent farm owners, as well as offering incentives for more environmentally friendly farm maintenance practices. The bill also offers protections to farmers who are contracted to corporations like Tyson. Lastly, it includes a clause that would require beef, pork, and dairy products to have country of origin labeled, which would ensure that the use of CAFOs were not simply being outsourced to a country where they were still legal (and could allow us to avoid purchasing from farms that are invading the Amazon rainforest).

It is currently under review by the Committee for Agriculture, Nutrition, and Forestry. Badgering elected officials about this bill could go a long way towards dismantling industrial agriculture and the harm it does to workers, Indigenous people, and the environment. We can still enjoy the food we eat, but something must change about the way it is grown.



EXPECTING PARENTS EXPECT PAID LEAVE



Tara Burke
she/her
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Melissa Petro is a writer, teacher, wife, and mother in New York City who did not qualify for paid or unpaid leave from any of her employers. She did not take time off to recover from the birth of her first child because she needed the money. She now regrets this, as she wished she had more time to recover from giving birth and bond with her newborn. Tending to her newborn's needs while also completing the demands of her employers proved impossible. Paid parental leave is not unnecessary. It is a basic need that all mothers, including Melissa, should be given in the U.S.

Paid parental leave can promote family well-being and support continued employment. However, there are too many parents in the U.S. who do not have access to this. They must return to work too quickly upon the birth of a new child because they have no choice if they want to pay the bills. The Federal Family and Medical Leave Act (FMLA) requires eligible employers to provide certain workers unpaid family leave; however, unlike other industrialized nations, the U.S. does not have national standards on paid family or sick leave. Besides the United States, all developed countries like France, Canada, Norway and the United Kingdom have a national policy that provides new parents with paid time off with their children. As a result,

the U.S. falls behind many countries for their paternal leave.

The conditions in the U.S. for parental leave do not support the health of mothers. Paid parental leave gives mental health benefits for mothers, including fewer symptoms of depression, both after childbirth and long-term post-pregnancy care, which data from the Early Childhood Longitudinal Study confirms. For their study, they focused on a sample of mothers that worked after their child was born and measured their health status and indicators of depression. They found that mothers who took less than eight weeks of paid maternal leave were associated with increased depressive symptoms and worse overall health. In addition, research from The National Library of Medicine states that mothers who do not take maternity leave are more at risk for parental burnout and other mental health concerns. These findings suggest that longer paid parental leave may improve the mental health and overall well-being of new mothers.

The lack of paid parental leave in the U.S. also causes poor health for children. There is a growing body of work that focuses on the effects of different lengths of parental leave among mothers who return to work during the first year of their newborn's life. According to data from the Early Childhood Longitudinal Study, parental leave of 12 weeks or fewer is associated with lower cognitive test scores, lower rates of child care immunizations and higher rates of externalizing behavior problems

in children. The data also claims that the first few months of infancy are a critical period during which parents familiarize themselves with their newborns and learn to adapt to their needs. If these first months are disrupted by a mother's return to work, this theory predicts a disruption to the child's growth.

As aforementioned, mothers who are not given paid parental leave are more likely to be depressed. Their depression could have negative consequences for their children. Depressed mothers of infants are less interactive with their children and are less likely to seek appropriate health care for their children.

Furthermore, the lack of paid parental leave in the U.S. does not support worker productivity. Paid leave policies benefit businesses by improving worker retention and productivity. According to The Center on Budget and Policy Priorities, the state of California shows the benefits of paid parental leave because their paid leave program lowered the risk of poverty among mothers of infants, while increasing household income for those mothers.

Paid leave can also boost workplace participation. Job -protected paid leave keeps women connected to their employers when some otherwise would have exited the labor force to care for their children. In California women who take a paid leave are 93% more likely to be in the workplace 9 to 12 months after childbirth than women who did not take leave. This highlights that the state's paid leave program is beneficial for employees.

As I mentioned previously, The Federal Family and Medical Leave Act (FMLA) requires

eligible employers to provide certain workers unpaid family leave. Unpaid leave is not affordable for many workers. Black, Hispanic, and Native American workers are less likely to be able to afford unpaid leave from work compared to white workers, reflecting racial disparities in our society. About 44% of workers do not have the option to take unpaid leave under FMLA.

This proves the need for the U.S. to have a national paid program. This would not only benefit expecting parents but the economy as well. A successful federal leave program would have a quality outreach plan with an emphasis on reaching low paid workers, workers of color,

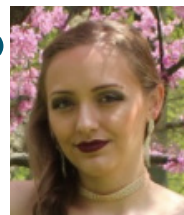
44%
OF WORKERS DO NOT HAVE THE OPTION TO TAKE UNPAID LEAVE UNDER FMLA.

and women. People's access to paid leave should not depend on where they work. If the U.S. developed a national paid leave policy this would allow mothers sufficient time to be with their children, regardless of their employer status.

Overall, the U.S falls behind many countries for their paternal leave. According to an article from the BBC, America's individualism from World War II fed into perceptions of the social value of maternity leave. Paid parental leave was seen as entitled. Over several decades the U.S. workforce has changed significantly. Today both parents work in almost half of two parent households. There is a greater push for mandatory parental paid leave. While the U.S. remains the last wealthy country without paid parental leave, change is coming. The issue of parental leave has been gaining momentum on both the state and national levels. If the U.S. wants to see mothers like Melissa prosper, they must implement a national paid parental leave.

DASHING FOR DIGITAL

Revealing the Technological Revolution and its Effects on Childhood Development



Irma Mustafic

she/her

Senior

Health Science

I recall a hot summer day as a little girl meeting my neighborhood friends outside while riding my sparkly purple bicycle. Most of my friends had similar bicycles in quality, and we often envisioned our group as the “cops” while the other kids were “robbers.” The blazing sunlight rays had turned my fair skin tone to a honey color despite my light colored shirt being used as a protective shield.

Fast forward to today, where I observe my younger siblings in the family room with their eyes glued to an iPad screen. The television is also on and it is set to the latest cartoon episode acting as background noise. Quick, instant, fatty and sugary snacks are also near to reach. The overall composition of childhood has evolved substantially from my own period as a child. The digital revolution has taken a toll on today’s children and various mobile devices are becoming ubiquitous in households.

According to Common Sense Media, a non-profit organization which advocates for child friendly media platforms, in 2017, 98% of households in the United States reported having had a mobile device that their children use daily. Common Sense Media also reports that in the start of the digital era of 2000, only 50% of American households had a mobile device. There is no doubt that there has been a rapid shift from children doing physical activities and playing outside to playing with mobile technology.

A child’s use of technology and social media applications early in life can be a precursor to delayed development seen later in life. These disturbances can be exhibited through the child’s physical, cognitive and psychological development. Examining the differences between children who are adapted to using technology on a daily basis versus those who abstain from use can further provide an understanding of how technology affects child development, and can supplement

advocacy for limiting screen time use.

Many of the current technological devices are causing children to remain glued to their family room couches. More time spent sitting in front of the television, iPad and computer results in less time spent outside, engaging in physical activities. According to the Lancet Child and Adolescent Health Journal, 85% of girls and 78% of boys are not meeting the recommendation of at least one hour of physical activity per day; the lack of physical activity is further perpetuated by the current digital revolution. Although awareness of the growing consumer society is out of a child’s control, it is possible for technology to be adapted to improve overall health. A well-known company, Meta Platforms, has developed popular Oculus virtual reality video gaming, which has encouraged gaming requiring physical activity. According to Meta Platforms, similar virtual reality devices have allowed children to still experience engaging and adventurous activities, in addition to requiring physical activity upon each screen time use.

An increased rate of caloric intake and sleep deprivation with the use of technological devices has also been observed. Children become distracted with various social media applications, videos and gaming, unaware of the amount of food servings consumed. As a result, it can be argued that technology can become a precursor to obesity rates seen in children. There is a similar dependent relationship with sleeping patterns and food consumption. According to the National Institute of Health, sleep deprivation can cause regulating hormones ghrelin and leptin to increase, causing more feelings of hunger. In addition, a child being sleep deprived can affect their personal choice to consume more calories and select fewer nutritious foods. To combat the issue of sleep deprivation and associated binge-eating behaviors, families can incorporate nightly routines of offline technology hours prior to bedtime. The use of devices during mealtimes should be avoided and the extra time can be replaced with more family conversation and tasting of foods.

It is important to recognize the use of technological devices as a form of distraction for

children that can be detrimental to brain development. The overuse of technology causes children to have reduced attention spans because of various applications, sounds and advertisements that cause the child to be attracted by many miscellaneous clicks. A child that is constantly using screens is not able to enjoy the time spent off the screen; therefore the brain is not able to recover and go to a more relaxed state. According to the National Institute of Health (NIH), a recent study found that children under two years old spend over one hour each day in front of a screen and by age three the number exceeds three hours per day. The decision for parents and relatives to give their children technological devices should not become habitual. Additionally, the overall quality of the technology being provided to the child should be taken into account. According to Dr. Michael Rich of Clinic for Interactive Media and Internet Disorders, using technology for non-educational purposes reduces the amount of time engaging in learning activities. If technology is a replacement for actual human interaction, this can lead to negative psychological patterns to occur later in life. Although technology is on the constant rise, parents should not solely rely on these devices to comfort their children. Parents should be advised to provide their children with technology in moderation, to serve as an educational tool. Since the majority of a child’s time is spent at school and home, schools have the potential to increase educational events, which show children healthy behaviors with the use of technology. In these events, children will be able to recognize if their own technological use is beneficial or detrimental to them. In addition, with the goal of reducing screen times, schools can incorporate more clubs with physical activities.

Aside from the physical and cognitive effects that technology has on a child, it is also important to recognize the certain harms technology can have on mental health. It’s becoming more common for parents to rely on technology to comfort their kids during busy parts of their life. From the start, if a child is given a technological device for the means of comfort, the lessened time spent socializing with other human interactions can lead to greater isolation, anxiety and depression. The device has the potential to become a requirement in the child’s life in order to function properly. However, past generations lived without television, gaming consoles and computers and did not have this dependency. The youth are at a vulnerable age, and technology may arise to be a precursor to negative mental health effects. According to the Children’s Bureau Organization, 50% of lifetime mental illnesses start at the age of 14. In response to this statistic, it is essential for parents, pediatricians and schools to take precautionary steps to limit

overuse of non-educational technology.

The prevention of risky, addictive behaviors can also be minimized if parents communicate with medical providers. In a growing consumerist society, advertisements on devices are built to lure more children to remain on-screen and become attracted to add-ons. Addictive behaviors and characteristics can also be distinguished from activity patterns in the brain regions. According to NIH researcher Patricia Wallace, a recent study has shown that compulsive internet users showed much higher activity in the area of the brain that entails the brain’s reward system, while also showing overall decreased gray matter. The overstimulation of the brain’s reward system can cause a child to continue overusing technology, although the overall amount of time spent does not satisfy the brain’s pleasure for dopamine. The child then is required to change behaviors, use multiple technological devices at once and remain socially isolated. This causes the child to be prone to greater risk of depression, anxiety and other mental health illnesses.

There is no doubt that the use of technology and other mobile applications will continue to be on the rise in society. During the midst COVID-19 pandemic, the use of online schooling rates increased across the U.S and the world, allowing children to remain connected with their friends and teachers. Families were able to visually see distant family members by a single, accessible click. This historic time has provided an image of how far technology has changed, and potential future possibilities. Our children can face the future in a positive direction to use advancing technology to shape society around us and remain connected.



RACISM AND PUBLIC HEALTH: Health in Color



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she/her
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For a project in my public health class freshman year, I researched racial disparities in health care. One article I came across was a study conducted by researchers from the University of Virginia, which highlighted racial bias in pain management. Participants (white laypersons, medical students and residents) were given a test where they examined the biological differences between Black and white people. The researchers found that a little more than half white lay people, medical students and residents assumed that Black people had “thicker skin” and had a higher pain tolerance than their white counterparts and believed they would need a less dosage of pain medication. The quality of life decreases for those in pain, and because of such biases, the quality of life of many Black patients decreases.

Racism has also affected the health of many Asian Americans. Researchers from University of California, Los Angeles analyzed data from public opinion polls, field studies and surveys from Asian Americans and found that discrimination leads to issues with mental and physical health. Immigrants were found to be healthier than nonimmigrants but that “immigrant advantage” of being more healthy disappeared over time in the United States. This could be explained by a cultural change or discrimination. “Positive” stereotypes, such as being good at school, can cause stress due to pressure and thus cause their mental health to dwindle. Not to mention, 16 studies were analyzed by the study “Racial Discrimination and Health Among Asian Americans: Evidence, Assessment, and Directions for Future Research,” and data showed that there was a correlation between discrimination and increased risk of diabetes, breathing problems and obesity.

Racism’s relation to public health cannot be overlooked. There are many other instances where minorities are affected by discrimination and many go unreported. Racism has been recognized as a public health crisis across 37 states but is still unacknowledged

by many states including Missouri. Racism has affected the health of minorities for centuries, however, it has not been recognized by 13 states as a public health issue and therefore has not been properly addressed. This can lead to further health disparities amongst minority communities.

The Centers for Disease Control and Prevention (CDC) has created guidelines in order to determine which health problems to prioritize. The criteria include the following: prevalence, socio-economic impact, public perception and concern, ability to prevent and control the health problem and capacity for the health system to implement control measures. Based on these criteria, the CDC has recognized racism as a public health crisis. However, there is no federal law that enforces states to follow CDC guidelines in regards to racism in public health. The CDC found that African Americans (ages 18-49) are twice as likely to die of heart disease than their white counterparts. Due to genetic differences (and any health differences that may have arisen from structural racism), it becomes more important that any inequities are addressed in the health care system. Therefore, treatment is individualized and quality of care is not limited for people of color. The United States can take steps to control racism in health care, at the federal, state and local levels. Several states and cities have already taken the step by passing a policy that declares racism as a public health crisis, yet there are still many that have yet to acknowledge it as a crisis.

The American Public Health Association (APHA) has analyzed the actionable steps different states and cities are taking to address racism as a public health issue. 209 declarations have been passed in over 37 states as of August 2021. The declarations have been adopted by city/town councils, education boards and health associations. APHA recognizes that the policy may not be legally enforceable and there will not be any consequences for those who do not follow the declarations. However, it is essential for calling attention toward racism and contributing to alterations in law and policy. While the declarations differ by states and cities, the intention remains the same: preventing and controlling racism in the health care field. More than a third of the declarations, according to the APHA, identifies activities to increase diversity and incorporates anti-racism principles across the staff.

The declarations also include forming partnerships with communities that address racism, advocating for policies that directly address systematic racism and improving minority health.

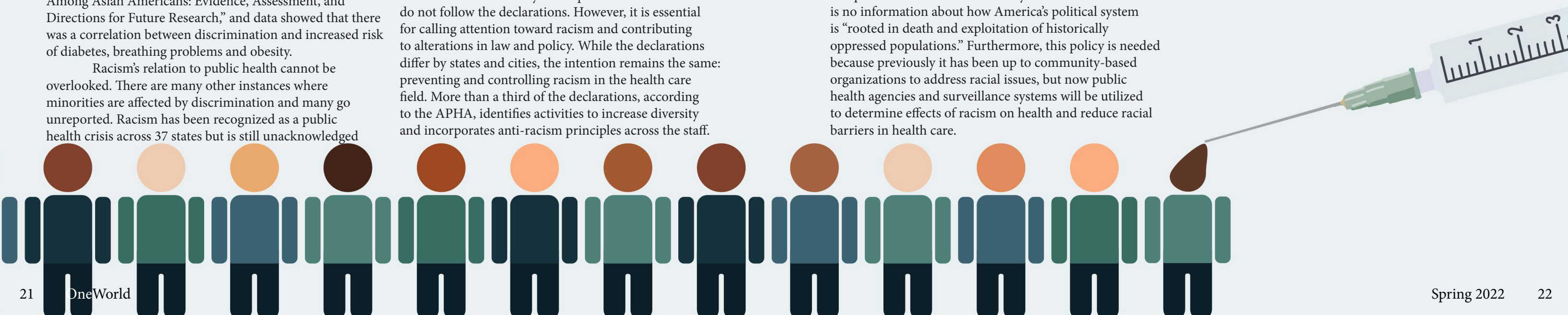
These policies were initially developed to address how racism affects the social determinants for health. Economic stability, health care access, health care quality and the built environment can all affect the health of an individual. Due to structural racism from issues such as redlining, a practice that kept people of color living in poor quality neighborhoods, minority health could be affected by air pollution and lack of access to quality health care

There is evidence that racism itself is a social determinant of health. A comprehensive meta-analysis was conducted by a collaboration of universities from the United Kingdom, United States, and Australia in 2015. The meta-analysis focused on the relationship between reported racism and mental and physical health outcomes. Data from 293 studies reported in 333 articles were analyzed, and data shows that racism was associated with poorer mental health outcomes including “depression, anxiety, psychological stress, and various other outcomes.” Also, racism was associated with poorer general health and physical health. By identifying racism as a public health crisis and implementing regulation within the health care system, it may be more likely that the health outcomes can progress. The policy would of course involve implementation of skills and knowledge gained from racial bias training but also support for communities negatively impacted by health care entities with historical and contemporary practices that support racism. The goal is to hold the health system accountable to enact change and document the impact.

Implementation of the policy could also invoke backlash. According to a study conducted by organizations from across the states including researchers from University of California, Los Angeles, University of Washington, and National Birth Equity Collaborative, in the journal Frontiers in Public Health, any discussion about racism as a public health crisis would only invoke harm if there is no information about how America’s political system is “rooted in death and exploitation of historically oppressed populations.” Furthermore, this policy is needed because previously it has been up to community-based organizations to address racial issues, but now public health agencies and surveillance systems will be utilized to determine effects of racism on health and reduce racial barriers in health care.

Racism needs to be recognized as a public health issue for governments to become accountable for the problem. This policy openly identifies racism as a public health crisis, and governments would be finally encouraged to take action within themselves by preventing discrimination in access to care and treatment. Missouri, and specifically St. Louis, have yet to address racism as a public health crisis even though St. Louis is one of the largest racially divided cities in America. As students at Saint Louis University, by continuing to speak to our legislators and work with community-based organizations, we can push for this policy to pass in the near future. Racism in health care is not something that can just die down by itself. Specific measures such as a state policy that recognizes racism as a public health crisis with effective guidelines can bring transparency to health in color.

Different states have different declarations with the sole intent of reducing and possibly eradicating racism in health care. More than a third of the declarations were committed to the same type of measures: identifying specific activities to increase anti-racism principles and diversity across staff, strengthening partnerships with community organizations addressing who are addressing racism, advocating at local, state, and federal levels for policies that directly affect systematic racism, and/or advocating for policies that improve health for communities of color. If these effective declarations are combined and a personalized policy for each state in health care is created minority health will progress. Students should advocate for this policy to their legislatures in towns/states where the policy is not passed. They should host meetings with legislators, make calls and educate the members in their community and therefore allow this policy to get the attention it deserves.



America is Jeopardizing Patient Health by Ignoring Global Medical Practices



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American arrogance and ignorance have invalidated global ideologies and practices for too long. In the medical field, Eastern medicine has been imperative to preventative care and cures for minor medical irregularities since ancient times. For example, ancient homeopathic medicine has long encouraged parents to expose their newborns to particles of allergens such as tree nuts and watered-down honey—practices American medicine was firmly against. My parents recall their Indian mothers teaching them to denature the tree nut to mildly expose particles of the allergen to me, their first child. But, being new parents in the United States, they were adamant to follow the apparently “better” American medicine by deciding to keep all allergens away from me. Now I, like many other Americans, have life threatening allergies, something that potentially could have been avoided through following Eastern medicine.

It was not until 2008 that the National Institute of Health withdrew their recommendation of keeping infants away from allergens. American ignorance towards global medicine cost the United States centuries to catch up to the so-called “underdeveloped” nations with their traditional medicine. Something that had been common knowledge for generations of Indians was now promoted as a revolutionary American idea. But by then, it was too late for the 32 million Americans with food allergies, cited by the

Asthma and Allergy Foundation America. Some of which potentially could have been prevented as Asian children born in Western countries had a 5-fold higher risk of tree nut allergy compared to Asia-born Asian children, found a 2018 study in the journal of Asthma, Allergy, and Immunology Research. A 2013 study published in the Asia Pacific Allergy journal found that 0.5% to 1.1% of children in Taiwan and almost no children in China and Thailand have peanut and tree nut allergies. These rates are at least half of those reported in the United States, where 0.6% to 2.7% of children are reported to have these allergies. To create a medical system that is sustainable and accessible, with patients at the center of focus, the United States needs to be open to embracing global medical practices.

Before Colonialism, ancient Indian medicine was the center of health care. Medical interventions such as dentistry and burr holes (small holes made in the skull to help relieve pressure on the brain from fluid build-up) were practiced as early as 7000 BCE in the Indian subcontinent according to India's Science and Society of the National Centre for Biological Sciences. Desire for ayurvedic herbs and medical knowledge were significant driving forces of trade with India. With only a few European physicians at the time, Portuguese and Dutch settlers heavily relied on Indian medical practices. Europe did not yet have sufficient medical knowledge to combat tropical diseases, so it was the official policy of the Portuguese and Dutch governments in India to actively seek out and document traditional Indian medical knowledge. In 1858, when the British colonized India, Indian medical knowledge and “native physicians” were important resources for the colonial establishment. However, British individuals soon began seeking medical education themselves. As a result, by the mid-19th century, British colonial policy marginalized indigenous Indian medicine to secondary status and European medicine became the official health care system. Europe, which was severely lacking in medical practices, learned from the East, turned it into their own and then demoted the foundational Eastern medicine. This Western sense of superiority is still persistent today, as America is hesitant to validate Eastern medicine: the medical system that birthed white medicine.

Within the goal of improving American health care lies a push towards bettering preventative care and increasing accessibility. Preventative care is health care that first prevents disease, injury or illness, rather than treating an already chronic or acute condition later. Diseases that often arise from poor preventative care include heart disease, cancer and stroke, according to the Centers For Disease Control and Prevention (CDC). The United States is lacking in accessible preventative care, which worsens the health of Americans, thus increasing their medical spending. This is where ayurvedic medicine can play a part in holistic preventative care. Ayurveda, which

translates to knowledge of life, is a natural health care system originating in India over 5000 years ago, consisting of a holistic approach to physical and mental health. The ayurvedic practices my Indian grandparents suggested to my parents to prevent my allergies were a form of preventative care. From the Journal of Progress in Preventative Medicine, a 2018 study found that “ayurveda treatment offered complete or partial relief in more than 76% of cases.” Ayurvedic practices and medications can play a large role in preventative care and symptom relief in a way that is cost-effective, therefore more accessible.

However, ayurveda alone cannot dominate modern medicine which is essential to treating severe conditions through medicine, surgery and technology. Regardless, ayurvedic practices deserve a seat in medical systems as it focuses on achieving optimal health and well-being through a holistic approach that treats the root cause through addressing the mind, body, behavior and environment. An ideology that would enhance American medicine with its focus on the whole patient and not just their symptoms. For example, a patient who suffers from epileptic seizures triggered by stress could follow a treatment plan including ayurvedic medications that reduces cortisol (stress hormone) levels. This would target the root cause of their symptoms through ayurveda, along with prescribed anticonvulsants which limit seizures—targeting the symptoms of epilepsy through modern medicine.

When we recognize the validity of medical practices from other countries, we see strides in medicine for the greater good of humanity. From the World Health Organization (WHO), around 40% of approved pharmaceutical products in use today are derived from natural substances. Aspirin drew on traditional medicine formulations using the bark of the willow tree, the contraceptive pill was developed from the roots of wild yam plants and child cancer treatments are based on the rosy periwinkle. Artemisinin, now used in malaria treatment, was found through Traditional Chinese Medicine (TCM), and granted Youyou Tu the Nobel Prize in Physiology of Medicine.

Unlike the United States, many countries do recognize forms of ancient Eastern medicine. As of now, the ministry of AYUSH (Ayurveda, Yoga, Unani, Siddha, & Homeopathy) has signed 25 Country to Country Memorandums of Understanding for Cooperation in the field of Traditional Medicine and Homeopathy. Under this, AYUSH supports countries in the incorporation of these medical practices in international meetings, training programs, scientific research and more. Among these 25 countries who recognize, support and validate AYUSH practices are Germany and Japan, which rank higher than the United States in quality of health care according to the CEOWORLD Magazine Health Care Index of 2021.

Drawing upon Eastern medicine not only improves practices in the clinic but also in medical research. David Cryanowski, a researcher of History of Science, Technology and Society at the Institute for the Advanced Study of Human Biology (ASHBi), found that the West relies too heavily on evidence-based medicine with randomized and controlled clinical trials to find ailments. From the Traditional Chinese Medicine (TCM) perspective, this is too simplistic, as determinants of health are specific to the individual and cannot be fully encapsulated through evidence-based medicine. What Western medical research overlooks—and TCM has known for generations—is reflected in the way minorities are overlooked in American

medicine. Much of the research that Western medicine is based on has only studied the average white male with a “normal” Body Mass Index (BMI). Disease symptoms and treatments do not appear and operate the same in bodies that steer from this standard. Heart attacks go unnoticed in women, obese individuals are misdiagnosed, pain in Black individuals is ignored and more. This ignorance in American health care can result in decreased quality of care and trusting patient-physician relationships among minority groups. An implementation of research methodology similar to TCM practices, which emphasizes the need for a varied study population, would recognize the diversity in people, rather than treating unique people by one standard that is not applicable to all.

In a country with diverse populations, comes diverse perspectives and practices, which must translate in the health care sphere through understanding the perspectives of minority patients. This is a practice that can come through acceptance of global medicine. A 2013 Pew Research Center survey of a nationally representative sample of 5,103 Hispanic adults found that approximately one in seven Hispanics overall reported participating in indigenous religious practices. With many communities familiar with other forms of medicine, it is imperative that physicians are versed in these practices to best understand their patients. As a patient from a family that values ayurveda, it was beneficial to have a physician who was familiar with traditional medical practices. This way, he could ensure that the ayurvedic medications I was taking would have no interactions with the medicines he was prescribing to me. Educating health care professionals about traditional healing practices is important for a variety of reasons, including the need to enrich communication, to avoid treatment interactions with herbal remedies and to improve the coordination of health care.

Strides are being made in the right direction as the world is increasingly noticing the good that comes from Eastern medical practices. Around 80% of the world's population is estimated to use traditional medicine, found the World Health Organization (WHO). In March 2022, a signed agreement was made between WHO and the Government of India to establish the WHO Global Centre for Traditional Medicine in India. This center, according to WHO, “aims to harness the potential of traditional medicine from across the world through modern science and technology to improve the health of people and the planet” and create “a body of reliable evidence and data on traditional medicine practices and products.”

This article is not a call to berate American medicine but rather encourage ways to enhance an already advanced medical system. There is a reason American medicine is competitive and accepted globally. The most trusted medical practices are found in the United States and much of American medicine is unparalleled. But that does not change the fact that American health care has its flaws which cause harm. To fix this, American medicine needs to end the belittling of global medicine and ideologies. The U.S. needs to learn from other countries to create interdisciplinary practices that provide patients with the best care. American advancements in medicine and quality of care for patients will vastly improve when American medicine and culture understands, recognizes, validates and credits global medical practices.

The Effect of Innovations on Health Care



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Neuroscience

BrainGate 2 is an invasive medical device that implants electrodes near the cerebellum, allowing thoughts

to turn into text. This device was created to allow quadriplegic patients—patients paralyzed in all four limbs—to communicate more effectively. The device is invasive because it involves the direct implantation of the electrodes near the brain; the surgery involves cutting the brain to place the two microelectrodes near a premotor area of the brain. It is also not a clinically viable system yet, and more work needs to be done to allow for text editing, expanding the character set and maintaining the robustness of the technology. Nevertheless, it has its benefits which include allowing for communication from patients that never thought they would be able to communicate with words again. This type of machine makes us question whether these medical innovations are for the betterment of health care or if they may harm the patients in some way; there are positives and negatives to each medical innovation. For this reason, it is important to understand the necessity of innovation within our society while also taking into account the costs that come with these innovations.

As we look towards innovation in health care, society

identifies that innovation involves change. However, with change comes challenges. Innovation comes with funding, time and trials to ensure that it is not detrimental to one's health and is for the betterment of humankind. For this reason, it is essential to look into the different types of innovation, their benefits and their downsides. According to Time Magazine in 2020, amidst the pandemic we saw a variety of medical innovations come about in the western society. These included a stem-cell cure for diabetes, drone-delivered medical supplies, a handheld ultrasound and a wristband that can read your mind. These innovations are new to health care, but they are not clinically viable yet as more research and testing needs to be conducted. The funding behind these innovations brings great pressures upon health care and on the scientists. The Centers for Medicare and Medicaid Services states that the U.S. health care system spent \$174 billion, 5% of the country's total spending, on medical research and development in 2018. However, according to the Harvard Business Review, this extensive investment in innovations also involves numerous failed efforts and millions of investor dollars lost. The article also mentions that during the managed care revolution, a period of the 1990s that stabilized health insurance premiums and the gross domestic product (GDP)

involving National Health Expenditures, \$40 billion was lost by investors to biotech ventures. This loss resulted in the downfall of many businesses and negatively impacted the economy. This

brings into question whether the right investment is being made for the right innovations or if more spending should be put elsewhere. It would also be important to evaluate whether these innovations are essential for our society by using time and money to determine the value of the research and development.

Health care innovations' benefits involve faster development of treatments and new treatments that allow for better outcomes. According to the Future Healthcare Journal, the researchers talk about how successful innovation involves being usable and desirable. The researchers go on to talk about how the demand for innovations continues to increase as public expectations continue to increase. The front-line workers are under more pressure, and the demand continues to increase as the population lives longer, but with a considerable amount of comorbidities; this also becomes the reason why expectations increase, causing more pressure on the front-line workers. With the population continuously evolving, there is a need for new change to help us adapt to the new challenges that are arising. For this reason, researchers continue to look further into innovations to help get a better outcome, with less cost or effort. According to an article called "Top ten health care innovations" by the Deloitte Center for Health Solutions, there are many innovations that can be incorporated into business models that can revolutionize how patients are being cared for, treatment options and more revenue for the staff and for further research. This will also help the staff learn to embrace change, which is an important aspect of health care. With innovation comes many lessons and commitment to the incessant evolution of health care.

Innovations, though oftentimes essential and helpful for society, can have multiple downsides that need to be considered by the researchers, the government and the people. According to Regina Herzlinger from the Harvard Business Review, the biggest reason why experts go against bringing about new innovations in health care is because they increase the prices that patients have to pay. The fancier the technology, the more research and effort is into the technology and the higher the cost. The patients are the ones who pay that price. Health care is already an expensive essential, so for innovations to raise the cost of care, makes it vital to evaluate the demand for the innovation.

For the new challenges that come with innovation, it becomes difficult for health systems to keep up with the new changes. Innovation becomes more like a disruption, so to adjust and improvise ones

techniques and work practices require time and practice. For the innovation to be used properly in a clinical setting, the health care workers will be taking out time to spend learning the new innovation. And according to BMJ Quality and Safety, as health care workers catch up with the new modality, new innovations have already started going through testing and been put on the market, establishing a cycle of renewal and reinvention. For this reason, it is necessary to evaluate the need for innovations and how these innovations can contribute to health care. It also becomes necessary to understand how to implement the new technology so it can be learned and used properly in a clinical setting.

Putting together innovations takes funding, time and resources. But just like there are regulations for food, there are also regulations for innovations. In the article called "Promoting innovation in healthcare," the researchers discuss how the ambiguity of medical device regulation makes it more difficult for the developers to continue constructing their apps. Additionally, the researchers also stated that many devices provide limited testing capabilities as there are various times where it becomes difficult to find the proper clinical setting or patients for the device to be tested on. For this reason, it may take longer for the device to be put on the market or it may prohibit the device from ever entering the market. Essentially, this prevents development in health care and becomes an obstacle for not only the researchers but also the patients that are in need of the new devices.

According to Dhruv Khullar from Stat News, health care should be focused first on safely providing the basic elements of care to the patients. If the researchers and physicians focus on bringing innovations into health care, the basic elements of care can get washed away and less effort will be put into actually treating the patients. Time spent away from taking care of patients and focusing on technology more can result in fragmented health care practices where health care professionals may spend more time figuring out the technology instead of spending time with patients, or they might use the technology incorrectly. When patients turn to health care, they expect to be treated by the health care workers themselves, not to be relying on different machines to give them care.

Looking at the benefits and downsides of innovation, there are various aspects that need to be addressed when conducting research and development of a health care innovation. And as our world continues to evolve, it remains essential to interpret the necessity of the innovation being developed.

"TAKE TWO, TWICE DAILY"

VS

"TAKE TWO IN THE
MORNING
AND TWO IN THE
EVENING"

Health Literacy Levels and the Future



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According to Eve Glicksman, a health care feature writer for the Washington Post, Association of American Medical Colleges and UnitedHealth Group, the difference between “take two, twice daily” versus “take two in the morning and two in the evening” is a distinction that can be made via a mere change in the wording of medical directions—and in result, will produce less misinterpretation and stress for many people trying to follow medical advice.

October serves as our global Health Literacy Month, however, the term itself may not often seem like the large and pertinent entity it is. This is particularly because most people will recognize the word literacy by itself, and tie the whole term to what is known as basic prose literacy: reading and writing. Whereas, health literacy is different and more complex. The lower levels of basic prose literacy is another pressing issue, however, the one at hand for this article is health literacy. Current

events, such as the COVID-19 pandemic, have illuminated the lack of health literacy in adults in the U.S. and the negative

impacts it holds.

But what is health literacy? As stated by BMC Public Health, this is a concept developed in the 1970s, gaining traction in the world of public health and medicine, and is depicted as a person’s capacity to understand certain aspects and concerns for their own health. It also represents one’s ability to take useful health care information and guidance to act and make decisions on one’s health.

In 2012, the Institute of Medicine found that nearly half of the adult American population has difficulty understanding health information. The broader health care literacy definition includes not only the difficulties with knowledge and action within a health care setting but also those outside, having to do with a person’s general health. At a local community health care clinic, the exiting survey patients are asked to fill out to the best of their ability asks how well the physicians and other staff members were able to communicate with them about matters regarding their health, how confident they are in their ability to understand the matters and their confidence in proceeding forward and following them. This is an intervention that can be done universally at the downstream level, offering a sort of compensation for the general lack of health education at earlier stages in life, or any other prior action taken to prevent patients’ lower health literacy levels in the future. Downstream interventions take place at a level of immediate attention needed to help problems that are the result/outcome of earlier and larger issues. Whereas upstream interventions take place at the higher level of systems and address issues before they have produced negative results or outcomes, or aim to reduce them altogether.

Dr. Don Nutbeam is a professor of public health at the University of Sydney and a social scientist with research interests in social and behavioral determinants of health. He is renowned for research with health literacy and the development and evaluation for public health interventions.

Breaking down the concept:

In his articles, Nutbeam delves into the concept of health literacy beginning with three different levels:

basic/functional, communicative/interactive and critical. Basic/Functional health literacy serves as enough to understand the bare minimum of health care directions and apply them in everyday contexts to a certain extent. Communicative/Interactive health literacy is depicted as the ability to obtain health information through various outlets whether it be social media, websites, books or another person, and apply this information to one’s own life in specific circumstances. Finally, critical health literacy is the ability of a person to use higher cognitive skills and analyze the information obtained and use it to control current and future health situations to be prepared for any future health-related issues.

In the context of this article, the goal is to situate health literacy levels across the country as a public health issue to turn people’s perspectives and increase the support and collaboration surrounding it. As a public health issue, interventions are more likely to be generated and intervened in hopes to find solutions.

Interventions to improve:

Nutbeam discusses education, social mobilization and advocacy as three possible health promotion actions, to result in beneficial outcomes on health literacy, social action and healthy public policy and organization. When considering social action, there are upstream and downstream factors to be recognized, personal and environmental influences subjective to each person/ community. Education would best serve as an upstream intervention to improve the general literacy levels of a person or community. Health education reform starting at a younger age is important to prioritize and begin with as it is a measure for future generations.

On the other hand, opportunities for adults to improve their education now need to be stressed just as much, especially for those who are more vulnerable in the case of illness such as the elderly, immunocompromised, those suffering from chronic diseases, as well as marginalized communities. All these groups would benefit immensely in their understanding of their own health and safety. Interventions as such will help to advance more people to the highest level of critical health literacy in order to best protect and care for their own health and those around them.

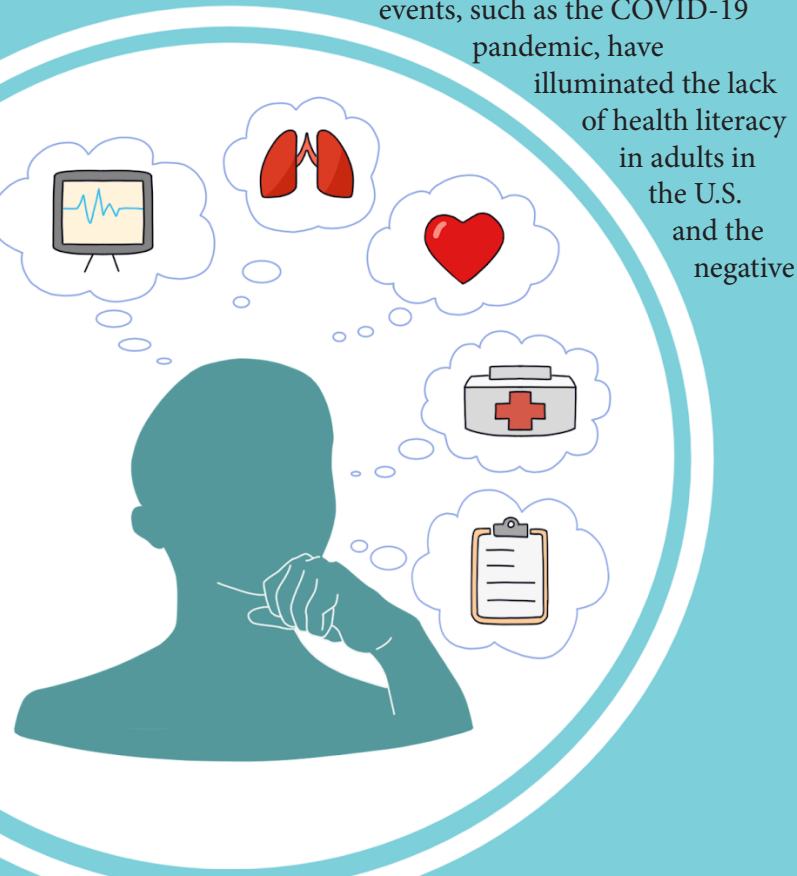
There are relevant downstream interventions to be recognized. A few interventions emphasized in Nutbeam’s article to improve health literacy, are more so current quick-action remedies, such as physicians reducing their reliance on written medical direction. The National Work Group on Literacy and Health recommends that if there is necessary guidance to be written down, it should be written at a fifth grade (age 10 to 11) literacy level or lower to assume

sufficient understanding. There is also a certain level of comfortability needed for a person to be able to follow-up on guidance they are unable to understand. I think each person in any circumstance can relate to the feeling of insecurity in asking for additional help and instruction due to a lack of understanding. Nutbeam discusses the individual and community/social benefits interventions to improve health literacy levels. On a more individual basis, improving a person’s health literacy level will improve confidence and motivation in acting on one’s own health. His article also highlights how on a greater level, improving individual literacy levels may result in higher influence on social norms and groups to act positively on various public health issues, such as increased involvement in immunizations, screenings and use of self-checking medical devices).

Reflecting on the current state of the COVID-19 pandemic:

A public health issue, such as low health literacy levels, contributes to negative causal thoughts and behaviors of the general public when engulfed in another public health concern such as the COVID-19 pandemic. According to Glicksman, communities who have been designated at a higher risk of fatality from the virus correlates to those who are more likely to have lower health literacy levels. This does not just connect with the current virus, but also other diseases, especially chronic diseases, that are correlated with greater negative implications to those with lower literacy levels. Glicksman illuminates the stressed notion of health care providers that in a pandemic, words like “comorbidity” and “immunocompromised” are of relevance and extreme importance for all people to be cognizant of and understand.

In a country with health disparities marginalizing groups of people, and infringements on people’s access to health care, there is a lot of mending to be done in the health care world. Prioritizing the health literacy level as a public health issue is a start to work towards a healthier future for the greater community. As mentioned by Glicksman, the fact of the matter is many physicians hold the perspective that a person’s health literacy level is the best predictor of their overall health. This should exacerbate just how important the low level of health literacy across adults in America must continue to be a priority for change.



Being Asian In



Birch Fabregas

she/her and he/him

Freshman

Biology & Creative Writing

“Is being Asian today different from being Asian when you were growing up?”

This was one question of many I asked

Abigail Kwon and Marisa Bugarin, both Asian students at SLU. Abigail Kwon (they/she) is a Korean senior; Marisa Bugarin (she/her) is a Filipina freshman. When I first sat down to interview them, the focus of this article was a lot smaller. Their interviews, however, made it clear that none of what we talked about exists in isolation—their experiences are a piece of a much bigger issue, one of intersectionality, one of changing perception when it comes to Asian individuals in the U.S. In other words, by answering my questions, we approached a new one altogether—what does it mean to be Asian-American through youth, through COVID-19, through fox-eyes, anime, K-pop, and more?

Or, what does it mean to be Asian, in a shifting American consciousness?

Racism against Asian individuals did not start, nor end, with COVID-19. But for Bugarin and Kwon, it was a turning point. The racial violence against Asian people that skyrocketed during the pandemic made both come to terms with what being Asian meant to America: “I came out of the pandemic more conscious of my race,” Kwon expressed. She also told me they were forced to face questions about her own safety when going out in public. An incident occurred when Kwon was walking her dog in the park during the quarantine period. Although Kwon was wearing a mask, a woman walking in the opposite direction started to make a scene upon seeing her. The woman kept trying to dramatically get away from Kwon despite their distance, repeatedly stating they had to be six feet apart. “Even though it wasn’t overt racism, she didn’t call me a slur, you can tell it was racially motivated,” added Kwon. “And I kind of thought, if I looked different would she still say the same thing to me?”

As a Filipina, Bugarin expressed that the Chinese xenophobia that heightened during COVID-19 was associated with all Asians. “At the beginning of the pandemic we all stayed inside like we were supposed to,” she said, “but my family was scared of being harassed on the street even if we’re not Chinese.” It was also deeply upsetting to see hate crimes reported in the media: “The fact that it’s happening is scary enough. You don’t know what people are thinking, especially as a woman of color.”

But while COVID-19 was exacerbating anti-Asian sentiment in the U.S., a different shift was taking place. What might seem contradictory to not only the historical presence of anti-Asian sentiment in America, but also the recent rise in hate crimes, is the increasing presence of Asian cultural aspects in American pop culture. When asked to name some of these aspects, Kwon

and Bugarin listed anime, boba, the fox-eye trend, K-pop, and, of course, Korean media like “Squid Game”. For Asian-Americans, this may seem like a juxtaposition: the same people who now eagerly await the release of their beloved manga’s newest chapter were the ones making jokes about Chinese people causing COVID-19. Bugarin, in particular, highlighted her experience with being Asian and enjoying some of these things when she was young, versus now.

“Lots of Asian people grew up watching anime—I grew up on anime,” she said. For her and her siblings, anime and other aspects of Japanese culture were a way to connect; however, outside of her home, anime was seen as weird and perverted. Bugarin also experienced harassment over her features. For all Asian kids, she called eyes an “[immediate] go-to” for bullying. Her mom was scared for Bugarin to bring Filipino food to school, and there was also an intense lack of visibility of the Philippines as a culture and country.

While these forms of racism persist today, the general attitude towards anime and other forms of Asian media has changed. “Now, it’s a trend. Now, it’s cool,” Bugarin said regarding anime. She expressed that people have also begun to see certain Asian groups as “cooler,” yet their only association with these groups is through various forms of popular media. “I said I wanted to get a wolf cut one time. Someone’s immediate association was, ‘Oh, like the girl from ‘Squid Game?’”

Indeed, this rise in popularity has introduced another form of racism altogether. Kwon had similar experiences with being reduced to forms of Asian media. There was an incident at work where she mentioned being Korean; a coworker’s go-to response was, “Like the show ‘Kim’s Convenience?’” Kwon said this interaction “blows her mind” that when they talked about her ethnicity, the first thing that came to mind was a piece of media and not her as a person.

They have also seen similar scenarios play out on social media. Often, when an Asian person posts a video, many of the comments compare that person to anime characters. Kwon and Bugarin also highlighted the fox-eye trend as an important intersection between racism against Asian individuals and popularity of Asian trends. The fox-eye trend refers to a makeup look in which people will make their eyes appear longer and more slanted to achieve a “sultry” look. For Kwon and Bugarin, who were mocked for their eye shapes throughout their lives, it’s a slap in the face. Some might express that it is just a make-up look and not harming anyone. To this, Kwon stated, “You need to listen to people affected by this if you want to have a better understanding of it.”

Bugarin added, “The shape of our eyes was used to mock all Asians for years. It was used in propaganda and political cartoons. And now white women are using it to be trendy.”

Another result of this recent popularity is the overgeneralization of Asian cultures. Most of these trends originate from East Asia, and South and Southeast Asian cultures are often left out entirely of discussions like these—and of this newfound

American Consciousness

popularity. The result? A very limited perception of Asia, if your only interaction with Asia is through these forms of media. “When people think of Asia, they only think of East Asia,” stated Kwon. “China, Korea, and Japan, when it covers different countries...you can only generalize so much.”

This also leads to a limited idea of what Asian people look like. As a Filipina-American, Bugarin spoke first-hand of this erasure. “The view of Asia is lighter-colored,” she stated. “People can usually never tell where I’m from; people usually think of Vietnamese, Thai, for darker-skinned Asian people.” The Philippines has an intense lack of visibility in pop culture, which contributes to interactions like these. This is further perpetuated when people enjoy things from Asian cultures and do not know where they are from. For example—boba originated in Taiwan. Bugarin said she’s been drinking boba her whole life. “People didn’t know what boba was and now they do. Do they know the difference between Hong Kong and Taiwan?”

A common pushback to discussions like these is, “Let people enjoy things.” After all, how much harm can be done by simply sitting down to watch the newest K-drama with an ube latte?

But this is exactly the kind of attitude that causes harm, particularly by dismissing the voices of Asian-Americans. Bugarin was adamant that merely watching anime doesn’t make one racist, but at the end of the day, there is a general lack of respect that rises from this issue because, “People don’t understand that there’s a culture behind what they’re consuming.” Furthermore, if your main engagement with Asian cultures is through media, it very much impacts your engagement with Asian people in real life. Lack of critical consumption leads to the incidents described above, where both Kwon and Bugarin were reduced to various forms of media. Bugarin also pointed out that we consume things, especially foods, from other cultures every day; this isn’t an inherently racist act. But when people think this is all being Asian is, “[It’s] under the umbrella of experiences that stem from racism. There is a difference between Asian countries,” Bugarin stressed. “Know where things come from. We love sharing culture—don’t ignore us—but acknowledge who we are and that there’s more to Asia. We’re here too.”

Similarly, Kwon stated, “people might compare it to being called slurs on the street, but people forget to realize that all these things are interconnected...Racism is perpetuated across scales stemming from one big issue; calling out these small things can bring attention to a bigger issue.”

This is where intersectionality comes in. Kwon told me that if there was one thing they wanted people to get out of this article, it was intersectionality. As a fem-presenting, queer, Korean person, she has faced difficulties with the intersection of their identity. Her queerness cannot be separated from society’s perception of her race; they can’t exist solely as a fem-presenting person—they are an Asian, fem-presenting person. Thus, her presentation cannot escape the fetishization of fem-presenting

Asian individuals. The model minority myth, too, does not exist in a vacuum—Kwon explained how it is rooted in anti-Blackness. “Desirable” characteristics people of color “should” have are placed on a pedestal; the opposite characteristics are associated with Black individuals—“bad people of color” in the eyes of those who perpetuate the model-minority myth.

Bugarin, too, wanted to highlight intersectionality. Of anime’s recent popularity, she related this to white people’s tendency to co-opt Black culture. “Black culture is stolen from and appropriated,” she said. “Black people picked [anime] up and it became cooler so now other people got into it.”

Intersectionality was something Kwon built into her work during the Stop Asian Hate movement. When Stop Asian Hate was on the rise, they did organizing on campus. “We came up with a list of demands like more education about Asian-American history and addressing other issues on campus [such as disarming DPS]... the demands weren’t really addressed by the admin,” Kwon said.

Bugarin agreed that many people didn’t take Stop Asian Hate seriously. “People didn’t understand it or why it started, especially since our issues aren’t really talked about.” She added, “People will spend hours watching Asian media, but talking about Stop Asian Hate is seen as shoving it down their throat.” Again, this is why this issue can’t be combated with a simple, “Let people enjoy things.” While experiencing both erasure and racial violence throughout COVID-19, Asian people were also experiencing a frustrating juxtaposition in their lived experiences. Bugarin summed it up succinctly: “you used to bully us, and now this is what you’re consuming.”

“Why did you agree to this interview?” was one of the first questions I asked Kwon and Bugarin. After all, the issues discussed in this article are incredibly reactionary to some, and people are all too eager to speak over Asian-American voices. Both gave steadfast answers. Bugarin said that she wanted to expose nuance and represent different types of Asian perspectives in this issue: “I want more recognition, not just for Southeast Asians and South Asians that aren’t on the mainstream hemisphere, but for all Asians that are affected. Even if we’re all different, we are a community.”

Kwon added, “You need to speak up if something is bothering you because otherwise no one will know. I want to put a new viewpoint out there so people can think about it.” To those who want to see a change, they suggested diversifying the perspectives people seek out: “It all comes down to what you expose yourself to. If you’re interested in Asian media, diversify it. Listen to real experiences and unlearn your biases.”

Bugarin wishes for appreciation, understanding, and education. Education especially is why she agreed to this interview. “You don’t have to know everything. I just want you guys to understand that we are people and we have our own culture,” she said.

“If you’re going to enjoy our stuff, know where it’s from,” Bugarin added. “Don’t call it a purple drink.”

THE UNTOLD LEGACY OF Racial Integration in the Education System



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In 1954, *Brown v. Board* revolutionized the legal system, calling for widespread desegregation in the United States' public school system. However, when you look at the school system today, it is evident that it largely reflects the historic and present-day racism that persists in this country. There have been several attempts at integration, prompted by the ruling in *Brown v. Board II* in 1955, which called for integration in school districts with "all deliberate speed." Yet, these attempts have largely failed, leaving students of color underrepresented and under-resourced in largely segregated schools. In fact, according to the National Center for Education Statistics, nearly 7 in 10 Black children attend a school where the majority of the students are also students of color. This demonstrates the widespread lack of integration, and subsequent inequality, that persists within our schooling system.

While segregated schools are undoubtedly a product of the persistent racist housing policy in the United States, there is an untold story behind the efforts to integrate schools that further explain this widespread injustice. Public policies like bussing programs, closing schools, and even bringing white kids into schools of color have largely failed at creating an integrated and diverse school communities because these efforts have only been centered around the convenience and security of white students and families. Students of color in America face unique and challenging barriers to education, which must be addressed in these policy initiatives. Integrated public schools are one thing, but when the system fails to adequately meet the needs of its students of color, they are just as unequitable as the segregated schools and inevitably destined to fail.

The phenomenon of ignoring the needs of Black students in efforts to integrate began almost immediately after *Brown v. Board*. Even though that landmark court case gave Black children equal access to education, the unintended consequences of the decision predominately harmed Black students. According to Dr. Lutz, writing for the *Journal of Rural Research and Policy* after schools were legally mandated to integrate, Black teachers were fired and schools in African American neighborhoods were most commonly closed. Over 38,000 African American teachers in the south and bordering states were fired after *Brown V. Board* legally ended segregation. As a result Black students lost important leaders and role models in education forever. According to the National Center for Education Statistics, minority educators make up only 14% of the current teacher workforce, despite the compounding evidence that if Black students have a teacher that looks like them they perform significantly better in school and their life afterward. While *Brown v. Board* made large strides for equality in education, the implementation policies decreased the amount of teachers of color, creating a harmful reality for Black and Brown students.

The system that students of color were forced to integrate into was evidently not designed with their success in mind. In 1971, the Supreme Court ruled in *Swann v. Charlotte-Mecklenburg Board of Education*, that the desegregation previously set out in *Brown v. Board* required schools to maintain a racial balance, even if it required the bussing of students far beyond outside of their neighborhood schools. Bussing programs have traditionally taken students of color from their neighborhoods and forced them to venture sometimes over an hour to go to school. According to Dr. Amy Wells, professor of education policy at New York University, students of color were disproportionately forced to bear the burden of traveling large

distances to go to a "better" or "white" school. While traditionally white schools were stereotypically marked as the better performing schools, this was not always the case for African American students who were bussed in.

This long distance made it difficult for students to fully integrate into the school community. Oftentimes, they were not able to socialize with other students because white parents were afraid of their students going Black neighborhoods. Additionally, bussed-in students were not able to participate in extracurricular and after school activities because they had to catch a bus to be able to get home that night. Further, students of color were routinely excluded from Advanced Placement and honors level courses. In interview accounts Dr. Wells found that African American students were not even made aware of advanced course options at their schools, despite meeting the grade requirements to enroll in those courses. Thus, it is evident that even though Black students were present in historically white schools, they were not receiving the same treatment as the white students.

Even today, efforts at integration are commonly centered around the white student and parent. Presently, there is a movement with self-identified "progressive" white parents to send their children to diverse schools. That is, oftentimes parents say that a diverse experience enriches their white child's educational experience and development. While this may be true, the narrative unequivocally centers the needs of the white students, while effectively ignoring the cost to Black and Brown children.

The podcast "Nice White Parents" by the New York Times documented one such instance. The white parents featured in this podcast wanted to send their children to a predominantly non-white school in New York City called the School of International Studies. In the span of just a few years, the middle school went from 30 mostly Black, Latinx, or Middle Eastern students to over 100 students, shifting the student body to be majority white. Along with an influx of white students, the parents brought a prestigious fundraising committee and a high brow French language immersion program. While they had good intentions bringing their children to the school, the implementation methods missed the mark. The fundraising committee ignored the requests of the previously established and predominantly non-white school board and moved events outside of the community. The French immersion program required after school activities to be taught in French, making the clubs extremely challenging for students without French skills, which included almost all of the students of color.

Ultimately, the school found that integration was not as easy as it seems. History has shown that the simple fact that white students and students of color go to the school in the same building, does not mean that their experiences will be inherently equitable. Thus, advocates on both sides must acknowledge the historical racism and discrimination that has occurred both inside and outside of the education system that has consequences on the way the public school system serves students of color today. Going forward, we must advance public policies and practices that focus on our students of color, not just those that center the needs and desires of white students and family.

COLLABORATION NOT COMPETITION: WOMEN IN SCIENCE FICTION



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Space Race, Atomic Bombs, Penicillin and Women? The mid-twentieth century proved to be a time of tremendous growth, marking the end of World War II and the beginning of the American Feminist Movement. Because of the developments in technology and space exploration during the war, science fiction's popularity was “sky-rocketing.” The combination of these events created the perfect storm for feminism to grow and thrive in the world of science fiction.

It is a common misconception that sci-fi is a predominantly male space. However, that has never been true since the first official work of science-fiction, “Frankenstein” was written by a woman, Mary Shelley in 1818. Not to mention, Shelley was the daughter of Mary Wollstonecraft, the face of feminism in the late nineteenth century.

The existence of feminism in sci-fi should not be a novel idea, however it can be a rather surprising discovery for some people. The presence of feministic nuances, seemingly more evident in recent works, have always been incorporated in works of science fiction.

1940s: With the end of World War II in 1945, science fiction became a renowned form of entertainment. It proved to be a manner in which recent scientific advancements could be explored by the audience. One of the first sci-fi works released post-war was the novel “1984” written by George Orwell in 1948. Aside from his eerily accurate predictions about the future of technology and governmental control, Orwell included an important female character, Julia, in his novel.

Winston, the main character, and Julia are forbidden to love one another, but that does not stop them from developing a relationship. Furthermore, Julia is the only person Winston trusts to despise the Party, the government of Oceania, as much as he does.

They may be lovers, but they are equals. She compliments his gloomy, anxious character by being a confident, free spirit, yet they share the common goal of rebelling against the omnipotent government. She speaks her mind and goes after what she desires, while evading the consequences of the Party. Julia and Winston are the yin and yang of Oceania.

1950s: Moving into the next decade, the movie “The Day the Earth Stood Still” premiered in 1951 in every theater across the country. A well-rounded film discussing the importance of international understanding and agreement, Retrocinema Magazine explains how it is one of the first science-fiction films to portray the archetype of a ‘sci-fi mom,’ a resilient mother that contributes to saving the day.

Helen Benson is a widowed mother working as a secretary.

She unknowingly lets an alien, Klaatu, stay in her home and befriend her son. She helps Klaatu evade detainment so he can make his critical announcement to a group of scientists who must help save all of mankind. Helen rescues Klaatu, in turn saving humanity, keeping the peace internationally and galactically: all this while being a single mom to a pre-teen son in the 1950’s...no big deal.

1960s: As the Boomer generation will remember, the show beloved by all sci-fi fans, “Star Trek,” premiered in 1966. According to William Snyder Jr. in his article “Star Trek: A Phenomenon and Social Statement in the 1960’s,” Lieutenant Uhura is the highest ranking female officer to serve on the USS Enterprise. Uhura, along with her prominent position, is also a Black woman. This kind of role in the 1960s promoted feminism and discouraged racism in media. She was a strong character, showing immeasurable independence and intelligence. That is not a common occurrence in movies and TV shows during this time period, making the show all the more controversial, yet irresistible. Her excellence in her role proved to all viewers that a woman can not only succeed, but thrive in positions of authority.

According to Margaret Kingsbury’s article “Star Trek Created Feminist Icons in Front of and Behind the Camera,” there are many more strong female characters in “Star Trek,” including Kira Nerys, Tasha Yar, Deanna Troi, Captain Kathryn Janeway, Phillippa Georgiou and Sylvia Tilly. These women portrayed incredible female icons throughout their roles, inspiring young girls and women to aspire for greatness and to not accept defeat in the face of adversity.

1970s: Hold onto your butts, because this decade brings one of the most controversial, extraordinary pieces of science fiction to date, “The Rocky Horror Picture Show,” released in 1975. When considering feminism, a cousin to the movement, per-se, is the LGBTQ+ community. According to Angela Li in her article “Human Rights Hero: The LGBTQ Rights Movement,” the Gay Liberation Movement was occurring right around the release of this film, during the 1970s and 1980s.

In the film, Dr. Frank N. Furter, a brilliant scientist and self-proclaimed “transvestite,” creates a beautiful man/monster for himself to have. Although Dr. Furter does not transition into a woman until the end of the movie, she displays many female characteristics throughout the film, foreshadowing her transition from man to woman.

Additionally, she displays affections for all people, man, woman and monster. Dr. Frank N. Furter is secure in her femininity, dressing in corsets and makeup and singing about wanting to be actress Fay Wray.

“The Rocky Horror Picture Show” defines an era of ultimate rebellion against heteronormative ideals. There is gender fluidity and equality, bisexuality, omnisexuality and transgenderism displayed in the film, lending support to the advancing movement regarding the LGBTQ+ community. Plus, who doesn’t love a cameo from Meatloaf?

1980s: This decade brings the film “Starman” introducing Jenny Hayden to the world of sci-fi in 1984. The film follows Jenny through her newfound widowhood. Starman, the alien who receives an invitation from Earth’s satellite, the Voyager, gets thrown off course when the U.S. military shoots down his spaceship.

Landing near Jenny’s house in rural Wisconsin, he takes up the identity of her deceased husband and asks her for help getting back on course. She obviously freaks, as any sane person would seeing their dead husband alive and well, but she soon comes to realize it is not her husband at all. Despite her internal struggle, Jenny agrees to help Starman get to Arizona, where he can catch a ride back to his home planet. Their journey is nothing short of tumultuous but Jenny protects Starman at all costs.

Jenny’s character is not a badass fighting machine (although she does have her moments), but what makes her character so strong is her empathy and protective nature for this creature that she barely knows. Putting her life at risk for a stranger shows unmistakable character and strength, more than most people can claim to have even a third of.

1990s: Continuing with the theme from the 1970s, the 1990s further advocates awareness for feminism and LGBTQ+ rights. We are gifted with the first film in the series “The Matrix,” which was released in 1999 and directed by the Wachowski sisters. Trinity is the strong female lead, working under the direction of Morpheus who helped her to escape the Matrix. Trinity is a sophisticated hacker and computer programmer, talented in operating machines and exceptional in martial arts. Her skills aid her in keeping her friends alive and escaping the Agents, the programmed police of the Matrix.

In addition, the film was directed by Lana and Lilly Wachowski, two transgender directors. According to Emily St. James in her article “How The Matrix universalized a trans experience - and helped me accept my own,” Lana and Lilly had not come out as trans when the film was released. She goes on to say that because they were closeted during the filming, the movie depicts what the trans experience is like prior to coming out—portraying the mind transcending the body’s limitations and the need for individual self-determination. This is one of the most popular works by a trans director and remains a staple in the trans community to this day.

2000s: The 2000s were jam-packed with novel sci-fi films, one of which was “Avatar,” released in 2009 and directed by James Cameron. This movie, aside from its incredible portrayal of scientific innovation, wonderfully represents a feminist film. The roles throughout, male and female, are fairly equal, with the brain of the operation being scientist Grace Augustine. She designed the Pandora Program from the ground up, concentrating on the scientific discoveries to be made in Pandora while still respecting the culture of the Na’vi people. Her goal was to integrate herself and her team into their world to learn and discover. She unfortunately died a martyr, but her legacy lives on.

The prominent female characters native to Pandora include Mo’at, Neytiri and Eywa. Neytiri is one of the main characters throughout the film, as she guides Jake, a war veteran and rookie to the Pandora Program, through the ins and outs of Pandora and her clan. She is strong in battle and undeniably independent. Mo’at is Neytiri’s mother and spiritual leader of their clan. She is connected directly to Eywa, who is less a character and more an entity. Eywa, comparable to Mother Nature, controls the balance of life and is an integral part of the

Na’vi culture. Each represents attributes of womanhood - intelligent, nurturing, tough, merciful - serving as role models to all viewers.

2010s: The 2010s were chock-full of feminist sci-fi works, including “Arrival” in 2016 and the novel “The Hunger Games” in 2008. In “Arrival,” twelve extraterrestrial spaceships land in locations throughout the world. A linguistics specialist, Louise Banks, is recruited by the government to attempt communication with the aliens. Louise uses her knowledge of semantics, but more importantly her compassion, to create a bond with the aliens and learn to communicate with their language. She is a brilliant female lead, using her intelligence accompanied by some of her more traditionally feminine qualities to build a rapport with the aliens and save mankind.

In the novel “The Hunger Games,” written by Suzanne Collins, the strong-willed heroine, Katniss Everdeen, brings well-deserved chaos and scrutiny to the Capitol of Panem. Her confidence and unshakable integrity exemplify the feminist lens used by Collins, opening the world of sci-fi dystopia to girls during this decade. She represents the strength within us all to fight for what we believe in and to do it with honor.

2020s: Released just last year in 2021, “Stowaway” presents the all-familiar motif of space exploration. A group of scientists depart from Earth on their two-year trip to Mars. Marina Barnett is the commander of the ship and successfully leads the crew out of Earth’s atmosphere towards Mars. Unbeknownst to the crew, there was an accidental stowaway aboard the ship named Michael. Because the ship is only supplied for three people, the crew runs into problems with sufficient oxygen supply and scrubbing the ship’s air of carbon dioxide.

Zoe, the doctor aboard the ship, faces the oxygen dilemma with compassion. She urges the commander to wait ten days for them to find a solution so Michael does not have to die. She institutes the solution effort to acquire more oxygen, heroically sacrificing herself in the solar storm filled with deadly radiation to do so. Her martyrdom gives insight into her character and the courage she has to sacrifice herself for the good of the other three crew members. She is a noble, brilliant woman who died with dignity.

Science fiction for so long was propagated for a male audience, seemingly due to traditional gender stereotypical interests. Generally written by men for men, science fiction quickly evolved to the inclusive genre it is today, but without much notice from the public. Sci-fi fans are now coming to realize the everpresent equality among the genders weaved throughout sci-fi films and novels. The feminist nuances incorporated into science fiction prove an exceptional vessel for the promotion of gender equality. It enhances the stereotypical “dominant” male audience to embrace the concept of equal partnership with women, as well as reinforces confidence in women and acknowledges their remarkable contributions to the sci-fi atmosphere. Sci-fi is not just a male space and never has been solely a male space.



CENSORSHIP IN SCHOOLS

How Does **Banning** Books Impact the Student Learning Experience?



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Language. It is a form of identity. It is a medium for human connection and consciousness. It manifests itself in the cadence of our steps to each movement, idea or thought we have. When language is obstructed, the human experience is consequently deprived.

The banning of books—therefore, the banning of language—in public schools and libraries has escalated in the United States, with around 330 book challenges in the fall of 2021 according to the American Library Association. The rise in book bans is a movement to reshape the education system through policies such as educational transparency and the banning of critical race theory. It is an act to promote certain ideologies while omitting other sides to the historical narrative of the United States.

The banning of books is an example of censorship in society, particularly in the education system. Censorship can be defined as the control of information ambient in society. This can include the prohibition of books, films, images, and other forms of media due to being obscene, harmful or a threat to security. These reasons for censorship are often ambiguous, and the meaning commonly stretched based on varied interpretations usually related to social, political, religious and

ideological explanations.

Many of the books being banned or challenged in the United States are written by minority writers. One of these writers is Toni Morrison, known for being the first African American writer to win the Nobel Prize in Literature. In the Wentzville School District in Missouri, the school board recently reversed its 5-1 decision to ban “The Bluest Eye” by Morrison after being sued by the American Civil Liberties Union of Missouri. This book describes the experience of a young African American girl who has internalized racism by wishing to have blue eyes. Other books being banned in the United States include titles such as “The Hate U Give” by Angie Thomas, “I Know Why the Caged Bird Sings” by Maya Angelou, “The Color Purple” by Alice Walker, “Invisible Man” by Ralph Ellison, “George” by Alex Gino, “Of Mice and Men” by John Steinbeck and many more. Many of the books in this list are by African American writers. By banning these books, school boards and lawmakers are attempting to conceal topics related to LGBTQIA+, race, politics, gender norms and discrimination from the eyes of students. Books that are being censored seemingly exude graphic violence, offensive language and are harmful to social order.

Advocates for banning books fear the content can influence children by presenting ideas that promote inquiry and curiosity. It can be argued that this is counterintuitive as being a student means to acquire knowledge and that banning books can prevent students from being able to approach real-life challenges.

Historically, book bans were primarily due to obscenity prior to the 1970s. In 1873, Congress passed a law that made it illegal to mail, give or sell a book, image, advertisement or other media if considered obscene and lewd. This act was known as the Comstock Act of 1973 which was created through the persuasion of an official named Anthony Comstock. The definition of obscenity in this act even led to the banning of anatomy textbooks. Later in 1933, the court case—The United States v. One Book Called Ulysses—helped create a new interpretation of freedom of expression. A judge overturned the banning of the book Ulysses which is known for containing obscene content. The judge deemed that such a book can be read if it is a form of serious literature. While the Comstock Act was not terminated until 1957, many other cases led to the definition of what is considered obscene to be more ambiguous and less related to personal preference. This aided in setting the precedent for new interpretations in law. One can examine the history of banned books to learn what the educational systems were like in the past, and how they are transitioning to be either more liberal or more conservative depending on the leading governmental officials.

In book bannings taking place today, many conservatives are advocating for transparency bills or “parents bill of rights.” Such bills will dictate what can be taught in the classroom. The legislation that is being pushed in at least 12 states would require all instructional material to be posted online to enable parents to monitor teaching materials. Those in support of education transparency view it to be beneficial; it would allow parents to be more active in their child’s

education. However, others in opposition to such policies argue that this can lead to parents protesting the material being taught, and it can disengage their children from important socio-political issues in society. It can induce parents to prevent their child from entering the classroom if they are displeased with the material, particularly on important subjects such as race.

Natalie Monzyk, an English and Women and Gender Studies professor at Saint Louis University, states “Not all parents are trained in education theory. While they have a say in their children, they still send them to schools so they can be taught by teachers who have a variety of knowledge and expertise in different areas. Educational transparency is a good goal but flawed in implementation. It doesn’t allow for flexibility to adjust to every student in the class.” According to Monzyk, flexibility makes the best teachers. Each student learns differently so when one method is particularly helpful to a student, a teacher can adjust to meet the students needs. If the class material was posted at the beginning of the year, little room would be left for adding something new or changing things as students grow.

The rise in censorship these past few years, and the political divide in society can further be exhibited through a new bill in several states aimed to ban critical race theory. Critical race theory (CRT) is an academic and social movement where race is inherently a social construct and that racism is institutional and systemic. CRT contends more than individual bias, but rather it is embedded in society as seen in policies, educational institutions, criminal justice system, labor market, health care system, housing market, etc. CRT was first developed in the 1970s and 1980s in response to institutions being “color blind.” Attention to this theory rose after the 2020 election, and this theory is continuously attacked by groups who do not want to acknowledge racism in the United States. People may recognize the United States’ past with race, but refuse to see its impact on society today making such a ban similar to a blind spot. Opponents of this theory argue that it is “white shaming” and that it pushes the idea that white people are inherently racist. Acknowledging racism means acknowledging an embedded societal problem.

Rachel Greenwald Smith, an author and associate professor in the Department of English at Saint Louis University, states “The 1619 Project should not be controversial. It’s a historical study. The fact that it is controversial has been entirely manufactured by a panicked right-wing, under the belief that producing a culture war will scare white suburban voters back into voting for a party whose policies (tax policy that concentrates wealth at the top, taking away health care benefits, allowing for unrestricted resource extraction, ignoring accelerating climate change) are widely unpopular.”

Due to current policies, one may wonder what the limits of censorship are, and what or who gets to decide that they can be moral enforcers. Missouri legislators, including Rep. Nick Schroer, a Republican, plans to outlaw curricula related to race and equity, particularly in teachings of U.S history. Shroer states “I think CRT, and in particular the 1619

project, does in fact seek to make children feel guilt and even anguish, not because of anything they’ve done, but solely based on the color of their skin.” The 1619 Project is a long-term initiative of the New York Times beginning in August of 2019. It is a collection

of stories that shift America’s historical narrative particularly to change how it is taught in schools. According to the New York Times, “The project was intended to address the marginalization of African-American history in the telling of our national story and examine the legacy of slavery in contemporary American life.” Nikole Hannah-Jones started this pioneering project and she states “Every American child learns about the Mayflower, but virtually no American child learned about the White Lion.” The White Lion is a slave ship notable for forcing the first Africans to be taken to a colony in Virginia in 1619, hence the name, the 1619 project. The omission of the White Lion, she says, is “symbolic of how history is shaped by people who decide what’s important and what’s not. And that erasure is also a powerful statement.” The people who choose which parts of history to promote and which parts to erase can control the dynamic of society as a whole. This is impactful as it incites a single-story narrative of society and this can lead to questions regarding the intersection of self and society.

After assessing the recent policies being implemented, it is important to acknowledge who is most affected, students. Banning diverse literature can mean that minority students will feel less represented. It can convey that their experiences do not matter. Many schools in the United States remain heavily segregated, and books are a way for students to learn about experiences different from their own. Diverse books teach empathy and collective tolerance. Erasing such books from public schools and libraries promotes single story narratives in the education system. It deprives people from the human experience.

I Know Why The Caged Bird Sings

THE HATE U GIVE

The Bluest Eye

OF MICE AND MEN

To Kill A Mockingbird

THE BENEFITS OF *Loving* A SERIAL KILLER



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If you are a true crime fan, you may have stumbled upon the idea of individuals who are attracted to serial killers. Some notable examples of the people of attraction include Ted Bundy, Richard Ramirez, Kenneth Bianchi, Dennis Rader and even some school shooters. At times, it almost feels like some of these notorious killers are rockstars with groupies following them around to court hearings and sending them love letters. But there is a major and obvious difference between rockstars and serial killers; the latter have committed atrocious crimes and ended the lives of others. While there may be no clear or definitive answer to why hybristophilia occurs, likely due to a large variety of individualized cases, one can theorize on some potential explanations, including but not limited to: societal expectations of ideal partners, psychologically traumatic pasts, and the treatment of serial killers by the media.

The American Psychological Association defines hybristophilia as “sexual interest in and attraction to those who commit crimes,” which is considered a type of paraphilia, “mental imagery or behavior that involves unusual and especially socially unacceptable sexual practices.” It is only considered hybristophilia when a person becomes sexually attracted to the violent crime and its perpetrator, not in cases where people are attracted to the perpetrators but not the action itself. This becomes a slippery slope for these fangirls of serial killers: are they attracted to the persona or the violent act itself? Can the two be separated? Often the two, hybristophiliacs and serial killer fans, are grouped together without the distinction of the attraction to the violent act. When looking at other sexual paraphilias - like that of pedophilia, exhibitionism, or voyeurism - society immediately rejects them, in most cases punishing participating individuals. So, where do hybristophilia and fans of serial killers fit into all of this?

One potentially promising explanation is American society's perception of what an ideal partner is. Society pushes an idealized image of what people should want in a partner, as well as what roles they should in turn adopt to be viewed as desirable. These ideas have greatly changed in the past few decades, but are still somewhat ingrained within our society.

Unfortunately, typical expectations of males being the dominant figures in a relationship can lead to abusive practices as a method of proving their masculinity and authority. Despite how strange it may sound, serial killers may in some way complete gender expectations that were projected on them since childhood

in the manifestation of their dominance and violence towards their victims. In the case of hybristophiliacs, seeing men that complete that dominant role they were constantly told to look for in a partner may be the reason why they become attracted to serial killers.

When looking at specific cases of hybristophiliacs, it is important to note their previous sexual and romantic experiences. In Sheila Isenberg's book “Women Who Love Men Who Kill” she found that many of the hybristophilic women she interviewed had been abused in past relationships. She also found that these women found benefits to loving someone that was away in prison. In a strange way, carrying out a relationship with someone that was convicted and serving time for a violent crime guaranteed some sort of safety. The serial killer that they are attracted to has been charged and is behind bars, where they will stay until likely the end of their lives. Ironically enough, this makes it considerably safer to carry on a relationship with a convicted serial killer as opposed to a significant other capable of physical abuse. While emotional abuse and manipulation may still be an issue, the factor of physical abuse is seemingly solved.

In her book, Isenberg comes to the conclusion that most of the people that are attracted to serial killers do it for fame and notoriety. In the media of the 60s, 70s, 80s and 90s, serial killers were given superstar-like status through the constant discussion of their crimes in tabloids and on the news, aiding them in gaining cult-like followings. Take the cases of Ramirez or Bundy, whose cases were widely publicized in tabloids and is how many of their fangirls discovered who they were. Merely having their name and face on the front cover of a magazine was all that was necessary to make them known and adored by their fans, negating the crimes they were on trial for. Often, the media would give serial killers a catchy nickname to distinguish them, like Ramirez as “The Night Stalker.” In hindsight, this practice of giving the killers a seemingly cool and fearful nickname seems more like a glorification of the person and gives them the attention they desired. Similar to how some people fantasize about being in relationships with celebrities, there is a certain amount of disbelief that is present when this occurs; they don't actually know the celebrity but they have an idealized perception of the person that they base their fantasies on.

A parasocial relationship is defined as a one-sided relationship in which an individual spends time and energy on a person who is not aware of their existence, with this typically being seen with celebrities and their fans. This phenomenon usually occurs due to the fan connecting with some aspect of that celebrity, be it a role they played in a movie, an experience they shared in an interview, their sense of humor, or countless other things. In essence, the same phenomenon occurs with hybristophiliacs, but the subject is changed to a serial killer. There

are also different levels when it comes to parasocial relationships with serial killers. While some simply form the attachment from what they read in the media, others are more proactive in reaching out, such as writing letters to the serial killer. In this, the hybristophilia builds an image of the killer in their head as someone they sympathize with based on one-sided interactions. In some cases, it may even escalate to the killer replying to the letters, turning a parasocial relationship into an active relationship. In this way, the serial killer can try to foster that connection with the person to make them appear more attractive and innocent than they are, as in the case of Doreen Lioy, who married Ramirez after writing love letters back and forth.

With these romantic fantasies come the added fantasies of fame. Often romantic partners of serial killers tend to attract media attention, especially if the relationship started after the killer was convicted, such as the case of Carole Ann Boone, who married Bundy during his second trial. Simply through her marriage to Bundy, Boone was able to gain fame and notoriety, often being interviewed by the press about Bundy and his desires. As the saying goes, “no publicity is bad publicity” and while the attention she received was due to her relationship with Bundy and often accompanied by criticism, it was attention nonetheless. In turn, others may look to Boone and want what she had, attention and notoriety through an act as simple as marrying the man she loved.

A very common theme in the case of fans who love serial killers is the fact that many deny that the killers committed the crimes. Some hybristophiliacs claim that the serial killer isn't guilty of their crimes, creating a rather perplexing situation, especially when the evidence points overwhelmingly to their guilt. In the case of Bundy, his supposed charms and good looks are often cited as why some women found him so attractive. In such a case, serial killers fans may not be attracted to the crimes and actions of the individual, but the idea of an innocent individual being falsely accused.

Isenberg herself believes that “Carole did not love Ted Bundy, the man, because he didn't reveal himself to her, or to anyone. She loved Bunny [her nickname for Bundy], her own creation, what she wanted him to be—not what he was.” This ties into the previous ideas of fame and persona created around serial killers, instead of the reality of the situation, with some like Bundy using the media to their advantage to gain support. As Isenberg points out, this can be also seen in the case of John Wayne Gacy, who “[didn't] have Bundy's appeal to women nor did he have avid fans and groupies following his case. He has, however, achieved celebrity status. And the abundance of letters he gets from strangers, women he has never met or contacted, shows how many lonely, deluded women out there want contact with a notorious killer—either to become notorious themselves or perhaps because they're attracted by his deviance.”

Like the previous fantasy of fame and notoriety, there is also a fantasy of helping or changing the killer for the better. In movies that involve idealized, romantic relationships that are more toxic than many wish to admit, the line “I can fix them” or “this isn't you” can usually be heard during the emotional climax of the movie. This idea is directly present in movies themselves, such as “The Kissing Booth” and other titles, but can also play a large role in fandoms, in which fans will try to “fix” characters because they find them attractive or with some other redeeming quality. Despite these lines often being parodied, these ideas are present

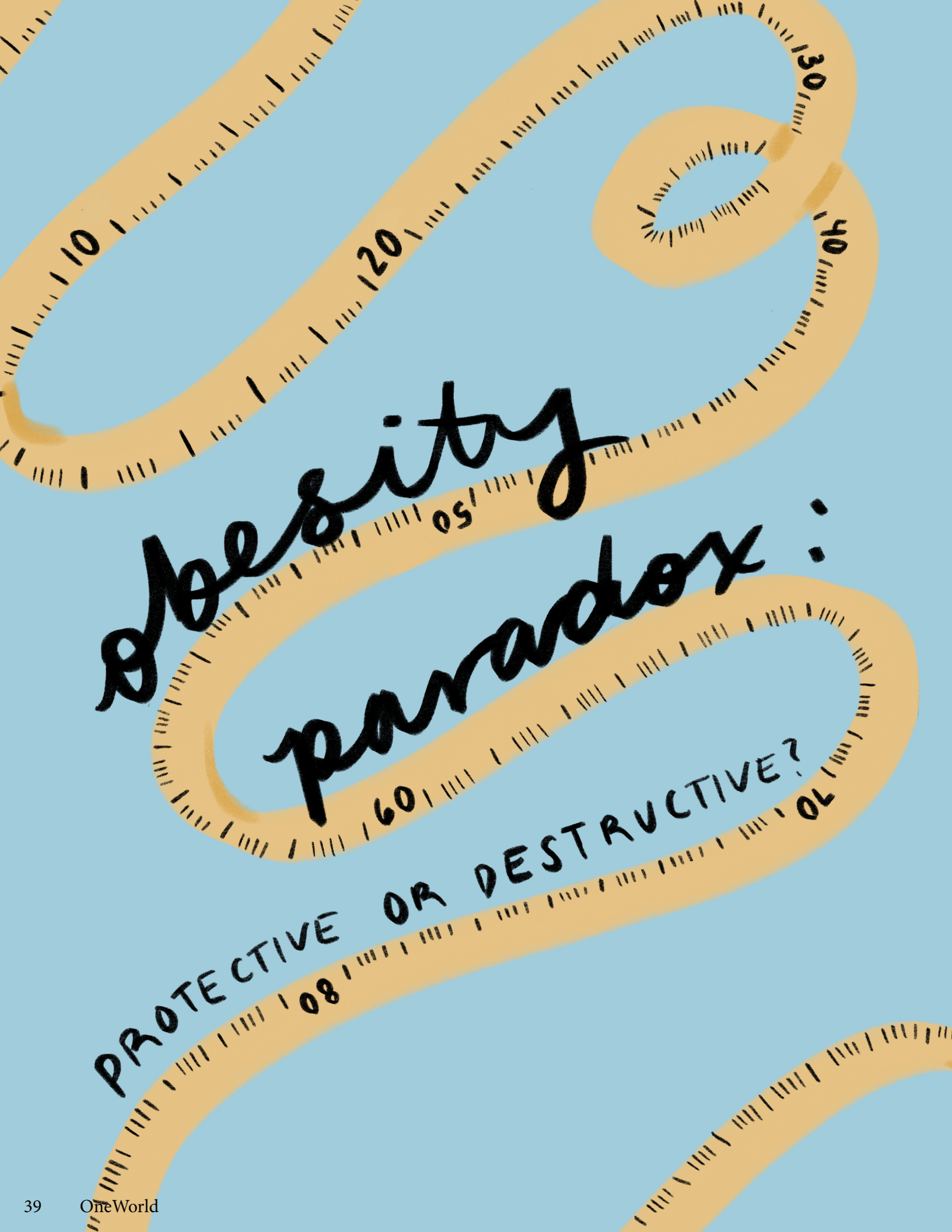
in some of the people that are attracted to serial killers and in the corresponding fandoms.

Take the case of the Columbine school shooters. As shocking as it may be, the Columbine shooters have a whole fandom dedicated to them on different social media platforms. Often dubbing themselves as “Columbiners,” those in the fandom are unique in the fact that they do not necessarily deny the atrocities committed by the shooters. They also claim that they do not try to justify the shootings—rather, they sympathize with the shooters—which can be indistinguishable to many. This apparent sympathy was birthed out of the diaries of the shooters that were released to the public, causing the fandom to paint them as depressed loners that seemed relatable or sympathizable. This is often where the “I can fix him” or the “this isn't you” mentality enters, with those in the fandom believing that they could have done something to prevent the event from ever happening. However, this event did happen and was real and devastating for many. Meanwhile, the creation of fan art, fanfiction, and edits that paint the killers in a sympathetic light and at times glorify them can be offensive to victims and those that had to live with the aftermath.

After the examination of several factors that might explain hybristophilia, there may not be any definitive answer but there may be some explanations. Hybristophiliacs and others that find themselves attracted to serial killers appear to be a product of a society and their personal experiences. Ultimately, there is a human factor to this strange phenomenon, one of a desire for human connection, even if the other human is a serial killer. There is also the looming question of how society should treat hybristophiliacs, who may not cause direct harm but justify the horrendous acts committed by serial killers and shooters through their attraction and glorification.

Hybristophilia and serial killer fandoms reveal a lot about the psychological and sociological factors present in American society, but is there anything that can be done about it? For one, increased awareness of the phenomena can be beneficial in many ways. Not only can it help people realize that they or others around them are hybristophiliacs, they may be able to provide an explanation. Providing services like therapy can help those who experience hybristophilia manage their attraction and help in other ways, such as address trauma from abuse or provide a sympathetic figure they can speak to. The other angle to approach in hybristophilia are the societal aspects, especially the role of the media. While it may be excessive to censor widely discussed topics like serial killers on social media, traditional media has already begun to make the shift to focus less on the perpetrator and more on the crime and its victims. In the case of the Oxford school shooter, ABC reports that the Judge has granted that the shooter's name would not be named in his parent's separate trials to minimize glamorization in the media.

Ultimately, Isenberg concludes in her book, “Women who love killers were often little girls lost.” While some may find issue with the wording Isenberg uses as infantilizing, it still hits at the core of why hybristophiliacs exist. It has much to do with personal psychological factors and one's past experiences, partnered with sociological factors of societal expectations and the media. While there may be no clear definitive reason or solution, there are ways to not only help those that are hybristophiliacs, but to also change society at large to prevent hybristophiliacs and serial killers from being created.



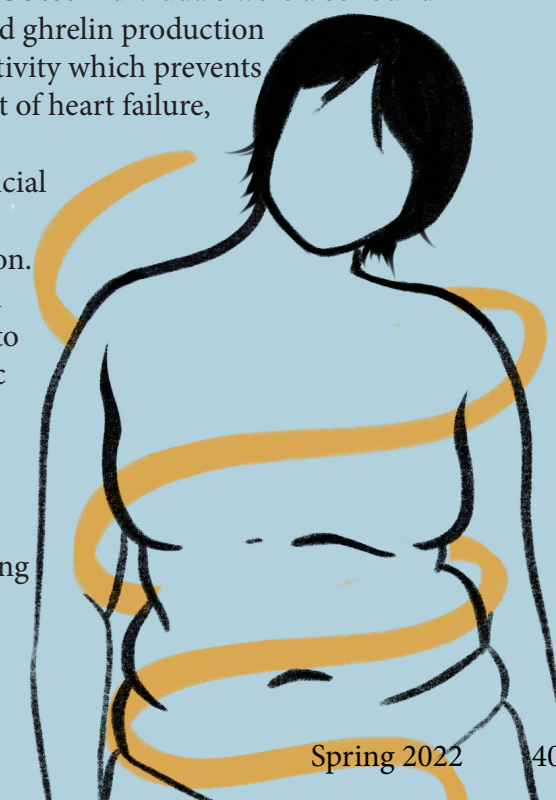
Aman Bassi
he/him
Junior
Public Health

What used to be an indication of an affluent and healthy individual is now widely viewed in a negative light. According to the World Health Organization, obesity is a disease characterized by excess fat accumulation. This complex health concern can be rooted in behavioral choices as well as lifestyle choices. This medical condition has traditionally had a high degree of negative stigma stemming from unattainable beauty standards projected by western society. This is compounded by the medical community's perception that obesity is the root of many medical complications. However, recent empirical studies have claimed that benefits may be associated with the condition denoted the "Obesity Paradox."

So what exactly is the "Obesity Paradox"? The paradox refers to evidence that found obesity protects the elderly or those with comorbidities (having two or more conditions), increasing life expectancy. A study published in the Journal of American College of Cardiology found that life expectancy was higher amongst overweight and obese individuals with coronary artery disease after undergoing percutaneous coronary intervention (treatment to treat narrowing of arteries) than in the leaner experimental group. A systematic review published by Frontiers in Nutrition revealed that obese individuals had a higher life expectancy when having chronic heart failure, after acute myocardial infarction, peripheral arterial disease, stroke, thromboembolism, and type two diabetes. The data sets that provided these insights were published in the Journal of the American College of Cardiology, the International Journal of Obesity, and the American Diabetes Association. Publications by the Journal of the American College of Cardiology and the American Diabetes Association also found that the benefits extend to patients undergoing more invasive procedures such as dialysis, cardiac surgery and catheter ablation.

The mechanism of these mysterious benefits has been widely disputed. According to a study published in *Nutrition* it may be rooted in body composition and structure, wherein excess weight, by providing

additional adipose and muscle tissue, may mitigate the adverse metabolic effects of conditions and their corresponding treatments. As for the protectiveness against acute coronary disease, a study published in the Internal Journal of Obesity attributed it to the production of a peptide called N-terminal pro-B-type natriuretic peptide (NT-proBNP). This peptide was found to be in higher concentrations in leaner individuals, indicative of worsening heart failure. According to Cleveland Clinic, levels increase with the development of heart failure and decrease when heart failure is more stable. According to a study published in The American Journal of Medicine, obese individuals also had greater mobilization of endothelial progenitor cells. This promotes the synthesis of new blood vessels, allowing for better blood flow. Others, including a publication in the Journal of the American College of Cardiology, assert that the mechanism may be through lipid metabolism, where excess cholesterol and lipoproteins augment the endotoxin-scavenging effect or the breakdown of harmful substances in the body. Essentially, the higher amount of fat allows for the breakdown of toxins in the body, keeping the body healthy. Benefits can also be explained by cytokines production. According to a publication by the American Diabetes Association, leaner individuals were found to have a higher concentration of cytokines produced by subcutaneous adipose tissue in their body than their heavier counterparts. The increase in the concentration of these cytokines is associated with increased metabolic risk and thus increased risk of heart failure. Obese individuals were also found to have increased ghrelin production and better sensitivity which prevents the development of heart failure, according to a study in the Official Journal of Gulf Heart Association. This is rooted in ghrelin's ability to augment cardiac contractions by improving the function of the heart's left ventricle, allowing for a higher exercise load and less muscle



wasting in congestive heart failure patients. Lastly, a publication in the *Current Oncology Reports* found that this same group had less aggressive tumor sizes and were more responsive to cancer treatments. This is rooted in a greater nutritional supply from the excess fat to supplement treatments.

However, the studies that support the presence of this paradox have key confounding variables and innate flaws due to obesity being solely measured via Body Mass Index (BMI). This health indicator is solely based on the weight-to-height ratio of a given individual (kg/m^2). As a study published by the International Journal of Obesity outlined, elements, including muscle and bone mass, are indistinguishable from fat in this calculation. Essentially, a healthy individual with a large muscle mass may be deemed overweight or obese when they may be healthier than their “normal” counterparts. According to studies published in the Journal of the American College of Cardiology and International Association for the Study of Obesity, confounding variables also extend to age. The experiments compared the protective nature amongst a younger demographic to the older “normal weight” counterparts. So to what extent can the aforementioned data be trusted?

Although this recent evidence in support of the paradox is far from conclusive, it has major implications for public perception of obesity. What was thought to have entirely adverse implications and a sign of unhealthiness may be beneficial. Furthermore, BMI is the sole method to determine obesity, which fails to factor in multiple variables, including muscle and bone mass. As a result, we must force ourselves to become more accepting of individuals who may conventionally be called overweight or obese. We must recognize that health is a holistic term, not a ratio. We must accept that there may not be a definitive ideal body type. As a result, we must eliminate the stigma of a health indicator that has been overly exaggerated and criticized.



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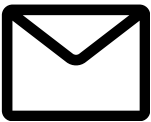
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