

Delta Winds

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Punishment Fitting the Crime

By Amaya Smith

“Injustice anywhere is a threat to justice everywhere.”- Martin Luther King Jr. It is the wide belief and understanding that the punishment should match the crime. So, why are the median time convicts served for sexual violence from thirty-eight to forty-eight months, instead of the max of eight years, in California? The act of rape and sexual assault not only harms the victim, but also steals a piece of them. Then an increase in severity would deter possible offenders, as majority convicts receive the bare minimum punishment. This inflation of penalty then lessens the amount victims who would have to worry about their attackers getting out and coming back for revenge.

It has been a controversial, discussed topic that the legal system is too lenient on offenders as well as repeat offenders. The basic sentencing for sexual assault charges, allows those who brutally rape and devastate families to be released with little to no consequence. According to California law, if the victim is eighteen years old and older the penalties range from three, six, or eight years in prison accompanied by a twenty year to lifetime sentence on the sex offender registration. When the victim is fourteen to seventeen years old the perpetrator would receive nine, eleven, or thirteen years in prison with lifetime sex offender registration. The court will also, "...impose an additional three or five years in prison if the rape victim suffered great bodily injury" (Shouse Law Group). Three years seems too minimalistic for destroying someone's life, especially since the victim could potentially suffer from life threatening conditions as a result. The age of the victim as well as the accused plays a major part in whether it would be tried as a misdemeanor or a major crime. If the age difference is no more than three years, then legal violation would be a misdemeanor. And if the age of the accused, "...is over three years of the

alleged victim. The crime can be punished as a minor or major crime" (Lluis Law). Regardless of the age difference, if a person makes the active choice to sexually assault another person, then they should be charged as an adult. As well as under the pretense that any injuries such as wounds, STDs, STIs, brain damage and more; caused by the accuser, would most likely cause the victim health complications down the road in life. The California rape law also provides, "...civil penalties for persons convicted of this crime. Said sanctions are established only for adult defendants and those over 18 years of age" (Lluis Law). The civil penalties fine ranges from \$2,000, \$5,000, \$10,000, to \$25,000 depending purely on the difference in age of the victim and the accused (Lluis Law). This essentially allows for those with not only connections, but also disposable wealth to walk away from receiving any form of genuine punishment fitting to the crime. Consequently, allowing for them to become repeat offenders, to attack the good people of the public.

After receiving news of the guilty verdict, relief is the most common emotion victims feel; however, that does last long when the realization sets in that the offenders could very well likely strike again once they are released. As the short sentencing only allows time to plan what to do when the perpetrator gets out rather than be rehabilitated, as intended. Stated in the article "Recidivism of Adult Sexual Offenders," there is research, "...that has compared the recidivism rates of sex offenders with those of non-sex offenders has consistently found that sex offenders have lower overall recidivism rates than non-sex offenders; however, child molesters, rapists, and sex offenders overall are far more likely than non-sex offenders to reoffend with a sexual crime" (Przybylski). This means that those who have committed a sexual crime once are more likely to do it again, then those who have not. Yes, the difference in rate is noticeable but

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the point still stands that sexual offenders are the most likely to commit a sexual felony once again. Stated in the article “Chapter 5: Adult Sex Offender Recidivism,” that in 1994 out of the 9,621 sex offenders released from prison:

3.5 percent were reconvicted for a sex crime and about one-quarter (24 percent) were reconvicted for an offense of any kind during the follow-up period. Nearly four out of every 10 (38.6 percent) sex offenders in the study were returned to prison within three years of their release due to the commission of a new crime or a technical violation of their release conditions. (Przybylski)

While it is not an absolute guarantee that the released sex offenders would be convicted once more for the same nature of crime, the probability is too likely; considering that leaves the unreported incidents unaccounted for. According to Roger Przybylski, a researcher as well as evaluation consultant asserts that, “...researchers widely agree that observed recidivism rates are underestimates of the true [re-offense] rates of sex offenders”. Throughout the years Przybylski had, “...[worked] directly with criminal and juvenile justice system policy makers and practitioners” (RKC Group). Considering that the majority of offenses unfortunately go unreported for fear of reliving the trauma as well as the anxiety of having to face their attacker in the courtroom. Thus, the reported cases of reoffense rates of this type of sexual crime are underestimating the actual proportion, allowing the public to feel a false sense of peace. When in reality, the danger closer than they know.

To even think that such a threat is in close proximity to loved ones than the majority of the public actually realize, is too horrific to even speculate. While it is not a guarantee that a member of the family or friend will be assaulted, disappointingly the possibility is still present in every household. According to the Rape, Abuse & Incest National Network, also known as RAINN, “Of sexual abuse cases reported to law enforcement, 93% of juvenile victims knew the perpetrator: 59% were acquaintances, 34% were family members, 7% were strangers to the victim.” These statistics only consider the juvenile victims, not accounting for the abuse continuing throughout adulthood. Sexual violence is also prevalent for those incarcerated as they are, “...most likely to be assaulted by jail or prison staff. In jail or prison, 60% of all sexual violence against inmates is perpetrated by the institution’s staff” (RAINN). While such as-

saults primarily occur in female prison, the threat is evident in male prisons as well. Roughly around eight out of ten sexual assault cases the victim knew the identity of their attacker. Unfortunately, the rate is even higher when the victim is a child, considering that 90 percent of them personally know their abusers. 85 to

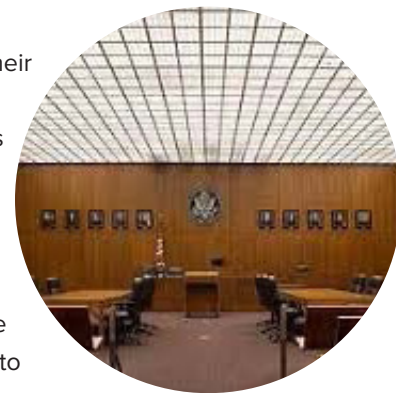
90 percent of the victims know their attacker when the sexual assault happens on a college campus, as about more than half have had a date with their attacker (Gomez).

Addressing the morbid reality that no matter where a person is or how old they are, they all the same have the dreadful possibility to be the victim of sexual assault by someone they perhaps trusted. People are not the only aspect to be wary of, but locations are well. RAINN provides a breakdown of locations where sexual assault occurs of: “48% were sleeping, or performing another activity at home, 29% were traveling to and from work or school, or traveling to shop or run errands, 12% were working, 7% were attending school, 5% were doing an unknown or other activity.” For those that were assaulted in their homes they could have just been at the wrong place at the wrong time, as the attackers could have originally broken inside to pillage. Make no excuse, the attackers are to be tried as a sexual offender.

It is not casual endeavor when it comes to healing from a such a scaring as well as traumatic experience. Such nightmare experiences stay with the victims all their lives, acting as a looming shadow. For those who had been sexually assaulted and without a support group, “...are more likely to use drugs than the general public: 3.4 times more likely to use marijuana, 6 times more likely to use cocaine, 10 times more likely to use other major drugs” (RAINN). Resulting in additions to the ever-growing homeless population as young victims are unable to put up with the abuse anymore and runaway. However, with no resources or support they have no other choice but to live on the streets, possibly experiencing more sexual abuse. The eventuality that a person develops then suffers from suicidal or depressive thoughts increases significantly after sexual violence. RAINN reports that:

94% of women who are raped experience symptoms of post-traumatic stress disorder (PTSD) during the two weeks following the rape. 30% of women report symptoms of PTSD 9 months after the rape. 33% of women who are raped contemplate suicide. 13% of women who are raped attempt suicide. Approximately 70% of rape or sexual assault victims experience moderate to severe distress, a larger percentage than for any other violent crime.

As an attempt to quiet their dark thoughts they resort to drugs and alcohol as a form of self-medication. While most might start to going to see a therapist, only a small percentage of these women go to therapy regularly. The long-lasting effects not only come at the consequence of the victims’ health but also with their relationship with their friends and family. When citing



the statistics of victims of sexual violence, RAINN asserts that: 37% experience family/friend problems, including getting into arguments more frequently than before, not feeling able to trust their family/friends, or not feeling as close to them as before the crime. 84% of survivors who were victimized by an intimate partner experience professional or emotional issue, including moderate to severe distress, or increased problems at work or school. 79% of survivors who were victimized by a family member, close friend or acquaintance experience professional or emotional issues, including moderate to severe distress, or increased problems at work or school.

The attacker not only steals apart of their victims' soul but a part of their families as well since their child, sibling, or parent will never be the same again. Though it is possible to move on, that does not make the journey any easier.

Arguably, one could suggest that by increasing the severity of the punishments the convicts will never atone for their sins as they would not only be surrounded by their peers but also learn from their mistakes, to perfect their crimes. The confidence in committing such crimes originate from the lack of assurance local and national authorities provide when it comes down to detaining such criminals. As stated by Vox reporter, German Lopez, "The criminal justice research shows what matters is not the harshness of the punishment, but the certainty that someone will be punished once they offend". Regardless by only focusing on the length of the sentencing, the additional issue of mass incarceration will never be corrected. In spite of this, based in the findings of criminal psychology, "...some people decide whether to commit a crime based on its punishment or not" (Laura). Hence by increasing the severity of the punishment, it would most certainly assist in deter majority of premeditated sexual and non-sexual crimes. Though it is a reasonable inference. In fact, according to the agreeing US National Institute of Justice wrote that, "Research has found evidence that prison can exacerbate, not reduce, recidivism. Prisons themselves may be schools for learning to commit crimes." Making the point that while punishment as a general base can deter crime, it is the increased severity that would result in an incline of the rate of crimes. Nevertheless, while child abusers and rapists are an enemy in the eye of the public, they are a target in prisons. As there is, "...no creature lower than a sex offender. Even snitches get a pass before these guys" (Ferranti). For a sex offender to publicly declare what they were convicted of meant a death sentence or worse. So, the preposterous

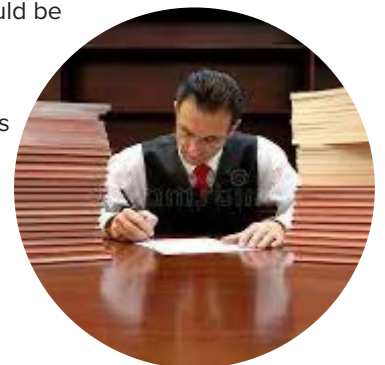
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notion that they would be among "peers" seems highly unlikely. On the other hand, UNSW Law Emeritus Professor David Brown states that the, "...severity of punishment, known as marginal deterrence, has no real deterrent effect, or the effect of reducing recidivism. The only minor deterrent effect is the likelihood of apprehension. So, if people think they're more likely to be caught, that will certainly operate to some extent as a deterrent" (Knight). This clearly states that the potential punishment is not the aspect acting as the deterrent by the certainty that they will be caught and detained that thwarts crime. However, in the article "Rape: Understanding and Investigating Sexual Assault Offenders" the author D. Olson describes the three major categories of rapists whose psychological and emotional needs were fulfilled through the means of sexual violence:

The power rapist, most common, commits premeditated attacks designed to force sexual submission on his victims. Less common is the anger rapist who commits unpremeditated spur-of-the-moment attacks that are violent, savage, and excessively brutal. The least common type of rapist is also the most dangerous. The sadistic rapist uses sex to express power and anger in often bizarre, ritualistic behavior verging on lust murder.

The actions of a rapist and sexual offenders are driven by the power they take from others, not because they thought they were confident not to get caught; it was due to the fact that they just could. This quite dreadful, as the number of potentially targets only grows with each passing day.

The long arm of the law should swing on both sides, where all sentenced sexual offenders receive approximately the same time, considering that those with disposable wealth and connections could very well get off with a slap on the wrist. A person cannot be forced to sexual assault another; therefore, said person should be tried as an adult, regardless of their age. Taking into account that they would most likely believe that if they were a juvenile, they would be receiving some community service hours instead of an actual prison sentence. By treating the accused as a single adult, regardless of social status, justice would prevail and not be blinded by the advantages that certain offenders have over others. When compared to released



non-sexual offenders, released sexual offender are more likely to reoffend in sexual crimes. It is wise to take the rates of recidivism with a grain of salt as it only accounts for the observed incidents, not considering the attacks where the victim does not report. Victims do not report their attacks for a numerous reason, one being that they fear their attacker will return once word got out that she went to the police. As it would be easy to enact revenge on the victim who reported considering that 48 percent know where they live, and that eight out of ten cases they personally knew their attacker. The fact that the younger the victim, the more likely that they would be assaulted by a family member or family is absolutely appalling as the statistics go up to ninety percent. While the young children and juve-

niles are the most likely to experience some form of sexual abuse, sexual violence doesn't end there; as sexually assaulted college students more than half have had a previous date with their attacker. The aftermath for the victims not only harms their physical health, but their mental health as well. As 94 percent of women experience some form of PTSD in the next two weeks following the sexual attack. Relationships also become harder to maintain as they feel as if they cannot trust their family, friends, or significant other. The offender not only stole a piece of their victim, but a piece of that person's family. A stricter punishment for such heinous crimes will not only benefit the people of the present but also those in the future.

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Not Your Perfect Mexican Family

By Ava Staas

Family relationships are hard and confusing. No one knows this better than the Reyes family, featured in *I Am Not Your Perfect Mexican Daughter* by Erkia Sanchez. They often argue and insult each other's actions and behavior. Julia, Ama, and Apa make up this tight knit home, but they are all very different people with different values. Julia is the rebellious, imperfect daughter of Ama, who is very strict and hard on Julia. Apa is the father, but not present and not involved with his family often. These three characters can each be classified into one word that describes their own essence.

Julia's word is independent. Julia often displays her defiant nature by ignoring people with authority and choosing to do her own thing instead. Erika Sanchez displays this when she states, "Before he says anything else, I shove my stuff into my backpack and run out the door. I can't deal with this today" (37). Julia ran out after her algebra teacher, Mr Simmons, asked her a question she did not know and did not want to answer. Julia is better at writing, and often states how she does not care about math or science. This displays her independent nature because she only wants to participate in activities that she enjoys, and does not listen to others when they give her input on what she should or should not be doing. Another example of how Julia is independent is when she chooses to stand for herself when people say rude things to her. Sanchez argues this with, "Like you're so great- all bitter because your husband left your ass years ago. Get over it already" (Sanchez 157). Julia's aunt calls Julia angry and selfish at her party, to which Julia insults her right back. This happens many times in the story, especially with Ama and Julia's conversations. Julia is bold and says what she is thinking, even if it is hurtful. This makes her a sort of outcast because she does not care about others' feelings, and instead does what she wants to. The final example of Julia's independence is how she wants to go to college in New York, and ends up choosing to go to New York University at the end of the novel. Sanchez displays this with, "What about the one in Chicago, mija? That's a good one too, que no?"

'Yes, but I want to go to the one in New York. It's what I've

wanted for a long time"' (322). Apa and Ama both want Julia to stay at home to go to community college like they assume that Olga did. Julia, instead, wants to be alone at college and experience the big city writing. This is not what the "perfect Mexican daughter" would normally do. But, because of Julia's ambitious spirit and desire to do what pleases her and not others, she makes this decision to go off alone.

Ama, Julia's mother is a very religious and strict woman. The word used to describe her would be smothering. Ama often shoots down Julia's dreams and hopes. Erika Sanchez shows this with the example, "You can live here and go to college, you know? That's what Olga did" (90). Ama does not believe in Julia's future as a writer, and instead feels the need to push her towards what she believes Olga did. She crushes Julia's hope for a career she loves by always talking down to her. Ama displays her smothering by immediately shutting down what Julia wants, and making it about what she wants for Julia. She also rarely listens when Julia talks about school or writing. This also relates to how Ama always compares Julia to Olga, and almost tries to replace Olga with Julia. The author illustrates this with, "What's so strange about a young lady who doesn't sleep around, enjoys spending time with her family? Girls here have no morals. You're the weird one, you know that?" (Sanchez 103). After Julia asks about Olga's strange history, Ama immediately glorifies Olga as the perfect daughter. Ama tries to shove Julia into the role of an obedient Mexican daughter who does anything she is told. This smothers Julia and causes her to be very unhappy with her life at home which then causes her to want to leave even more. Ama is so distraught about Olga; she wants to replace her with Julia. The final example of how Ama is smothering is when she takes being a strict parent to the extreme by not letting Julia go anywhere besides school,



and grounding her for almost every action she does. Sanchez portrays this when she states, “I’ve done the calculations and have figured out that from the ages of thirteen to fifteen, I’ve spent about forty-five percent of my life grounded” (116). Ama is so strict that she barely lets Julia go anywhere if it is not for school, which means Julia has to lie about wherever she goes. When she gets caught, she becomes grounded immediately where she cannot even go to the library. Ama smothers Julia by forcing her to stay at home all of the time, where Julia feels the most unhappy and the least free. Even with her friends, Ama rarely lets Julia go to hang out with them. Ama, through forcing Julia to stay home like she believes Olga did, was a huge cause of Julia’s sadness throughout the book.

Apa, unlike Ama, is not at all mentally present in Julia’s life. The word to describe him would be distant. Every day after work, he comes home and sits on the couch, and that is all he does. Sanchez argues this with the quote, “Apa works all day, then sits on the couch with a bottle of beer, like usual. In fact, he even sleeps on it now. It’s probably molded to his body at this point” (12). Apa only comes home and sits, never talking or engaging with his family. He is physically in the home, but mentally, he

does not seem to want to be there. Apa is distant as a father and does not usually speak to Julia, unless normally forced to. During Ama and Julia’s many fights, Sanchez depicts that Apa, “...always turns the volume way up when Ama and I are arguing, as if he’s trying to drown us out” (17). He does not

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bother to get involved or stop the fighting that ensues when Ama and Julia are together.

Instead, he chooses to completely ignore the whole family, acting like he lives in another home. This illustrates Apa’s distance because of his denial of major family issues and arguments, instead choosing to ignore his child and wife. Although they are his loved family, he does not want to talk or care about them. Apa also shows his distance through his past love of drawing and art. The author explains this when she states that Apa believes, “Sometimes in life

you don’t get to do what you want to do. Sometimes you have to deal with what’s given to you, shut up, and keep working. That’s it” (Sanchez 315). Apa finally shows his emotion, but when Julia asks about his past hobby of drawing, he refuses to acknowledge it. Readers can infer that because of the trauma Ama and Apa faced when crossing the border, Apa decided to take the first job that was available and not complain. Although his job is back-breaking work, he does it for his family. This makes him tired all day, and distant because he chooses to be alone instead of relying on his family for support. His past experiences have ruined his hope for the future, and so he has become quiet and reclusive to deal with his stress of being unhappy.

The Reyes family has been through the significant loss of Olga, which has caused their own separate personalities to clash even more than they had before. Julia, Ama, and Apa can all be categorized with one word each to describe them. Julia’s independence versus Ama’s smothering, and Apa’s distance from them both play into the family dynamics that readers witness in *I am not your Perfect Mexican Daughter*.



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The Coconut Farm Boy

By Diana Chavez



It was freezing in December when my brother and I packed up and went to the Tijuana airport. It would be my first time out of the country, and I started to imagine what Mexico looked like and what the population would look like. We eventually crossed the border, and all the signs were transformed into Spanish. We reached the airport in Tijuana and passed through security. As well, we checked in and arrived at our terminal. It was extremely packed, with more and more families trickling in. I was getting nervous because I had only flown twice in my life and the airplane was a much older model. Nonetheless, I boarded the plane and sat in the cramped seats alongside my brother. We had enough money to last a few days until our parents could send us money in Mexico.

During the flight, it began to rain, and thunder struck all around us. I turned to my right, and I saw my brother beginning to freak out, so I remained calm, but for a split second, I saw the stewardess clutch her rosary, and all I could do was hope we got to our destination. Eventually, after five hours of being in these dingy seats with barely any legroom, we landed, and as we got off the plane, I could feel my clothes start to stick. It was so humid that I felt as though I was lathered in sticky oil. We got to Acapulco Airport, Guerrero, and called our grandmother to set up a meeting place. My brother and I went to collect our baggage and headed to the airport entrance. There we were greeted by my grandma and an older cousin named Alejandra. Alejandra is a rather short 25-year-old girl with thick black hair and peach-colored skin. Her most defining feature is her smile, as her teeth are glamorously white and straight. My grandma is also quite short and has a very intimidating aura. My friends have commented that they think she looks like an "old Mafia boss," with her walking stick, short blonde hair of ash, and a perpetual frown.

While driving to my grandmother's house, we stopped to eat from a food vendor who was selling outside her home. Many people were out and about around us while we ate, which was

a foreign site to me. The smell of smoke permeated the air. I learned later that it was because everybody was burning their waste because they didn't have a waste management system. We finally arrived at my grandma's house, and I was amazed at how many flowers were growing around her house. The people from the neighboring houses all came one by one to greet us. My grandma's house, like many houses in rural Mexico, is very humble. The walls and floor are made of concrete, and the bathrooms are often not fully functional. The roof is made of metal and not fully attached to the walls, so there are gaps in all the rooms that let in bugs and animals.

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After a dinner of meat and beans, I was taken to the coconut farm alongside the house. There I got to eat fresh coconuts and meet some of the workers. I noticed a little boy, about five years old, with a very stern face and battered clothes, picking up and throwing coconuts into a truck. He waved at me, and I could see he had three fingers missing. His mother explained the little boy lost his fingers while trying to open a coconut with an axe. This was so shocking, but I was told many kids in the village had missing fingers or limbs because they were working to provide food and money for their families. I was taken aback, and as I was walking back to the house, I thought about when I was five, how I started school and played with toys with no care in the world.

Over the next two weeks, I felt like I was in a completely new world, full of new people and a different culture. I got used to the sweltering heat, the insects, and going out every single day to explore a new part of the village. I would often have full-fledged conversations with kids half my age. They were far more articulate with their Spanish and spoke like adults. I learned to appreciate my privileged life after living in a rural setting and not having the luxuries I had back home. As I left Mexico, I thought especially about the little boy on the coconut farm and his two-fingered wave.

Inspiring or Intoxicating?

The Culture of Celebrity Worship

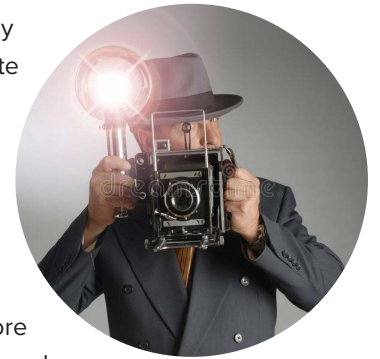
By Graycelin Marlowe-Alpers

In 2021, Gigi Hadid expressed concerns about the press taking photographs of her 10-month-old daughter, and asked future photographers to blur out her child's face (Schindler). Many other celebrity mothers have voiced similar requests, although they struggle to follow through with these requests, as there is no universal legal precedent protecting the privacy of their children. This is just one example of the many ways that celebrities and their families are subjected to scrutiny and a lack of privacy, simply because they are famous. Gossip columns, internet blogs, magazines, paparazzi—there is an entire industry built around our society's fascination with celebrities. This is not a recent phenomenon that developed with the rise in popularity of movies and TV shows; people have always been captivated by the social elite. However, today's saturation of celebrities in our culture has exacerbated and magnified the negatives to this so-called "celebrity worship." This essay will explore the positives and negatives of our celebrity culture. While it is a nuanced topic, ultimately, this fascination of ours is fundamentally negative.

One positive aspect of the celebrity craze is that celebrities can use their platforms to raise awareness about important subjects. Let's face it, the world has a lot of issues. Oftentimes, many of these issues go unnoticed by the general public, especially if they are happening far away from home. People either don't know, don't care, or simply don't believe they can help. Celebrities have the power to draw millions of people's attention toward certain issues, and ask for their support. They can use their platform to spotlight certain topics, and give their fans information and a path to help. This makes activism more accessible to more people, and can make them care

about the issues more, because they want to care about what their favorite celebrity cares about. As Alain de Botton writes, "In a fantasy world, we'd be motivated purely by the love of justice and humanitarian generosity. But most of us are not like that. We need a lot of encouragement, a lot of inducements, before we direct our thoughts - and money and effort - to distant strangers. Not because we are mean but because we are normal. It's normal to care a lot more about your own family than about other peoples (de Botton 65)." Celebrity endorsement can be the "encouragement" or "inducement" that people need in order to care about these causes. Some celebrities, such as Angelina Jolie and Emma Watson, both of whom are UN Goodwill Ambassadors, get involved with human rights organizations to try to influence direct change (Gillett). Others use their platforms to try to spread awareness and ask their fans for support, such as the celebrities who called attention to the 2020 Australian wildfires (many of whom also made donations of their own).

Another positive aspect of our celebrity culture is that people, especially children, teens, and young adults, can see themselves represented in celebrities. Representation is a huge issue in media. Humans are incredibly diverse, but a large amount of the media that we create does not reflect this diversity. It is especially difficult for children and young adults to not see themselves reflected in "coming of age" stories, and never seeing people who look like them on screen. This is why movies with non-white casts, such as *Crazy Rich Asians* or *Black Panther* were such huge milestones in the world of



media. It is important for people to be able to see people with the same background as them find success, especially in a world where minorities are still discriminated against. This goes for race, gender, ethnicity, and sexuality. Seeing people who share those same characteristics find success and fame can serve as inspiration, especially in the face of the inequality that many of these groups have to deal with. "South Mountain High School student Dazhane Brown in Arizona said that feeling represented is "empowering." "If you see people who look like you and act like you and speak like you and come from the same place you come from ... it serves as an inspiration," Brown said" (Elbaba).

Finally, fans of celebrities can find community in their shared love of the work that the celebrity creates. This is most common with singers and bands. As people follow their music, they not only grow to love an artist; they share that love with others. This fosters a sense of community and allows people to develop relationships with their peers based on shared interests. Finding such connection can be especially important for teens who struggle to fit in with their classmates or have trouble making friends. Finding people with common interests can be empowering, and it would be significantly more difficult to forge such connections without our celebrity culture, which provides constant information about and access to the lives of celebrities.

However, while there are positive sides to the cult of celebrity worship, there are also severe negative aspects as well. Celebrity worship can be obsessive, and people sometimes develop para-social relationships to celebrities that become delusional. People will spend countless hours focused on the lives of other people, reading gossip columns, following celebrity relationships, and learning anything and everything they can about their favorite stars. Sometimes they start paying more attention to the lives of celebrities than to their own, because it seems more glamorous and entertaining. This fascination can turn dangerously obsessive. It is common enough to hear about someone having a "celebrity crush," but sometimes people take it further than that, and develop serious romantic feelings for a celebrity that are not returned. Sometimes in order to validate these feelings, people will resort to extremes such as stalking or harassment to try to get the attention of their favorite celebrity.

Another negative aspect of our fascination with celebrities is that people can develop body image issues due to how

Celebrities have the power to draw millions of people's attention toward certain issues, and ask for their support. They can use their platform to spotlight certain topics, and give their fans information and a path to help.

celebrities are portrayed, the standards of beauty they uphold, and even the products they promote. Many women who rise to fame in the acting, music, and modeling industries are considered the beauty standard, and young girls try to replicate their body types. This can lead to girls developing eating disorders in their effort to become thinner. These unrealistic bodies are sometimes flat out impossible to achieve, as many celebrities' posts and magazines use programs like Photoshop to alter and "perfect" images. The same goes for young boys who idealize male celebrities. The "ideal" male body type is thin and incredibly muscular. However, in many cases, makeup, dehydration, and photoshop are all used to enhance, or fake, these characteristics. Celebrity culture has caused us to lose sight of what real human beings look like, and instead saturated the media with artificial beauty standards that are practically unattainable. As Julie Mehta states, "Wanting to be thinner is a huge issue for many girls, while boys feel increasing pressure to be more buff. Boys look at singers such as Usher and realize they'll never have those abs--or the screaming female fans that go with them. In extreme cases, girls develop eating disorders and boys turn to steroids in an effort to achieve an ideal that isn't real" (Mehta 49).

Finally, a huge issue with the cult of celebrity worship is the lack of privacy. So much of the entertainment industry is built upon intrusions into celebrities' lives; nothing they do in life can ever be private. Their every move in life is scrutinized and gossiped about by millions of people. As mentioned previously, fans demand a constant stream of information about their favorite stars, and various industries have developed to fulfill that demand. Gossip reporters, celebrity news channels (such as E! News, Extra, and TMZ), paparazzi, and magazines all closely follow the lives of celebrities so that they can document and report on every detail. Photos of celebrities are taken without their consent, and they are unable to even go to the grocery store or airport without being assailed by hundreds of fans and paparazzi who feel entitled to get a look at them. Some celebrities, such as Paris Hilton and Beyoncé, have even taken measures against the constant barrage of paparazzi, these two in particular donning a scarf designed to be reflective, so that if a flash photo is taken the wearer is completely blacked out (Nhlapo). The fact that things such as anti-paparazzi clothing even need to be developed points out the toxicity of celebrity culture. Many celebrities are actors and actresses who wanted to pursue their dreams of entertainment, but for that to be a successful career path they must be willing to sacrifice all per-

sonal privacy. They are not just entertaining on-screen; their entire lives become entertainment for millions of strangers around the globe. There is constant probing into some of the most personal and private parts of a person's life, and we justify it as being okay simply because it is a celebrity. You would not grab someone off the street and start asking them questions about their romantic, sexual, or personal life, but the common rules of etiquette disappear in the case of celebrities, and fans act as though they deserve to know everything. Recently, Kit Connor, an eighteen-year-old actor known for his role in the teen drama *Heartstopper*, a coming of age story about two boys falling in love, was harassed by fans to disclose his sexual orientation. Fans demanded he clearly state his sexual orientation in order to "validate" his role playing a queer character. Connor posted online confirming that he was bisexual, and then deactivated all of his accounts (Dennett). Coming out is a scary and lifechanging decision, and one that should be made in one's own time and at their discretion. However, because Connor is famous, fans acted as though they had the right to force this deeply personal moment to become a spectacle to be played out on the public stage.



Even in criticizing celebrity worship, this essay itself is still engaging in the cult of the celebrity by dedicating time and effort into analyzing celebrities' lives. Our society is so saturated with celebrities that the fascination with them feels normal, and oftentimes we don't see a problem with it. But if one takes a step back and realizes that all celebrities are is people that

are doing their job, then the obsession about them outside of the work they create becomes rather strange. There is no reason we should really care about celebrities, no reason why they should have so much influence over the world today. Even with the positives they contribute to society, are these really the people we should be relying on to steer society? Celebrities are just people, and they are often forced into roles that they did not sign up for, and are not qualified for. Celebrities are not trained activists, so why do we trust them to push political agendas? While representation in media is a good thing, would it not be more inspiring to see actual diversity in real situations in the world, not just in fiction? Can we not still bond with people over a shared love of a piece of media, without idolizing the person who created the art? Not to mention the fact that the cult of the celebrity has negative effects on the celebrities themselves. With the fame and fortune comes constant surveillance, the inability to live a normal life, and a loss to the right to privacy. If a celebrity makes a mistake, people are devastated, and take it as a personal offense. As the public, we elevate normal people to pedestals of almost god-like status in our society, and then are surprised and betrayed when they are not perfect. It is time we recognize that celebrities are just people doing their jobs like the rest of us; there is nothing about them that warrants the obsessive attention we grant them. The negative consequences of the cult of the celebrity far outweigh the positives, and thus such obsessive celebrity worship is fundamentally detrimental to our society.

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Let's Talk About Mother

By Janessa Velasquez

“MOM!” I screamed from the register across the Walgreens. My stomach dropped to the floor; it was my mom. I was fourteen and hadn't seen Veronica since second grade. We picked her up from jail one day, and that night she left and never came back. I remember it all because I've had very little contact with my mother in my twenty-five years of life. In fact, our contact has been so limited that I could count every interaction we've had on my hands and still have fingers left over. When I screamed at her in Walgreens, she almost looked confused, as if she forgot she was even a mother. I ran to her and immediately hugged her; regardless of all the pain, anger and sadness she left me with all these years, it was my mom. Shortly after our hug ended and the tears stopped flowing, that's when the shock and infatuation wore off; she was dirty, she kept falling over, her nose looked like it had been picked almost raw, and she couldn't even stand without falling into me. She was a full-blown heroin addict.

At fourteen I obviously knew my mom was on drugs and had problems. For example, I remember once when I was seven, she had me pee in a zip lock bag for her and made me promise not to say anything to my grandma after she left. Once I got a bit older, I realized she used my pee to pass a drug test with her parole officer. However, until that meeting in Walgreens, I had never really understood the extent and hold heroin had on her. I can't say I remember any good personal times with Veronica, but I do recall being around her at family parties. She was very loud, vibrant, and the life of the party with the loudest laugh, similar to me now. I don't think back then, though, I even associated her as my mother, as I relied on my grandmother to be my mother. Veronica was incarcerated during her pregnancy with me, and that led me into my grandparents' custody at two days old. My entire life was just filled with random pop-ins by her where she occasionally brought this disgusting man with her who sexually abused me as a toddler. Of course, that was something never to be spoken about, or if it was, it was followed by her calling me “a little attention seeking bitch.” Every encounter I ever had with her

in my life would one way or another turn south. Then I didn't understand, but now I do: it wasn't her that was overreacting and screaming at me; it was the drugs.

She allowed a substance to control her and eventually made it her lifeline, so much so that she's missed out on the opportunity of motherhood four times and is even now missing out on the chance to be a grandmother. As an adult, I have tried to forgive her and talk to her, but she never seems to validate my feelings or acknowledge her wrongs. Veronica is the type of parent with the logic, “I'm the parent and you're the child, so I don't have to answer or explain anything to you.” Every single

feeling Veronica has ever made me feel, I wish on a million stars that I never make my own children feel that way. I'm in the percentage of people who see their parents and want to be the exact opposite. For instance, I don't allow my children to say the word 'hate' because of the way my mother hurt me with that word. I would cry and scream to not go with Veronica and the child molester anytime they tried to take me from my grandma's. This would in turn lead to her saying, “I hate liars Janessa and that's exactly what you are. I hate that you came from me. It disgusts me that you came from my body.” To hear her tell me that she

hated me for being a liar, on multiple occasions, was heartbreaking because I wasn't lying. For this and many other reasons, I will always be an advocate and the voice for my children when they need me to be. I will never allow my children to live in fear of or be hurt by someone out of my own fear of speaking up and of repercussions. If fire is brought to my babies, be prepared for me to release hell on Earth. Back to her “logic,” I may be the parent, and these are my children, but because of that I will always do my best to educate them, assist them in healthy communication, and help them understand everything around them and why it is the way it is.

Every single feeling Veronica has ever made me feel, I wish on a million stars that I never make my own children feel that way.





I enjoy being a mom and I love the opportunity I have been given when it comes to them. I try to have understanding for the person my mother still is, but it's hard at times, especially when I have children of my own that I could never imagine treating how my mother treated me. I definitely think I got lucky, because all of the parenting traits

I have didn't only come from me wanting to be opposite of my mother. It actually came from the positive parental influence I received from my grandparents throughout my life. Their love and positivity outweighed the negative so I can't say I ever felt missing love, just that missing person. My grandmother is the complete opposite of my mom. She is always present, she is genuine, her love is unconditional, and she would go without, before ever letting me. Which is why I believe I'm just like my grandma. I try to be at least. I don't think my mother and I have any similar traits other than laughs and our personality. My brother stated I avoid conflict like her; I'd have to disagree. I don't do conflict, that's true, but it's for my own peace of mind. I also don't go doing drugs to avoid conflict either.

Overall, I'd have to say my actual mother led me to not want to be like her as a mother in any way. I do believe I have parental traits like those of my grandmother, only because that was my mother figure my whole life. I'm sure there are things I do like Veronica without my knowledge, but I do know that I will do everything I need to so I can instill healthy communication and relationships in my children. One day if my mother reaches sobriety, who knows what doors that could open for our relationship. Until then I can only continue to be present, understanding, loving, and knowledgeable in my own children's journey and continue to be the loving mother that I wasn't able to have through Veronica but was fortunate enough to have from my grandmother. I see how happy my grandmother is, surrounded by all of her children and grandchildren, and then I can only imagine how lonely my mother must be with nobody to call and no family to ever go to. I hope to be as fulfilled with all my children and grandchildren around me when I'm older rather than sad, alone, and scared.

Gender-Affirming Care: The Transgender and Non-Binary Experience

By Nat Austin

Transgender and non-binary individuals are people who do not identify with the gender that they were assigned at birth. Many of these individuals often experience gender dysphoria and gender euphoria. Gender dysphoria is a disheartening feeling that one may experience due to a mismatch between their biological gender and their gender identity. Conversely, gender euphoria is the psychological state of bliss and satisfaction one gets when their gender expression matches their gender identity. Transgender and non-binary individuals have been around since the beginning of time. In fact, before European colonization occurred, indigenous people celebrated multiple gender identities as part of their culture. Native Americans use the name “two-spirited” to describe transgender and non-binary people. Today, transgender and non-binary individuals are punished and discriminated against purely for not aligning with the gender assigned to them. And thus, receiving gender-affirming care is challenging to acquire for transgender and nonbinary individuals. This is especially important since transgender and non-binary individuals need to prove that they experience persistent gender dysphoria before being allowed to receive gender-affirming care. Transgender and non-binary individuals should not be required to prove their gender dysphoria to receive gender-affirming care.

Not only do transgender and non-binary individuals undergo gender-affirming care, but cisgender individuals, which are people who identify with their assigned gender

at birth, receive it as well. According to an AAMC article, “Gender-affirming care, as defined by the World Health Organization, encompasses a range of social, psychological, behavioral, and medical interventions ‘designed to support and

affirm an individual’s gender identity when it conflicts with the gender they were assigned at birth” (Boyle). This means that cosmetic procedures such as augmentation mammoplasties, which are surgeries that increase breast size, and reduction mammoplasties, which are surgeries that reduce breast size, fall under the gender-affirming care umbrella. These surgeries help people with breasts, primarily women, experience gender euphoria. Yet, even though augmentation and reduction mammoplasties are gender-affirming surgeries, the only requirement for these surgeries is for the patient to be in good health. For transgender and non-binary individuals, many undergo gender-affirming surgeries such as top surgery or feminization surgery, where the surgeon either removes all breast tissue to masculinize the chest or, a surgeon adds implants to feminize the chest. Yet, according to Mayo Clinic, the criteria for that form of gender-affirming care are that the individual “...must have persistent, well-documented gender dysphoria, is able to make a fully informed decision and to consent to treatment, has reached the legal age to make health care decisions in their country, and is managing any significant medical or mental health concerns.” Why are cisgender people’s lived experiences taken at face value, while transgender and non-binary people are required to provide extensive evidence that is time-consuming and expensive to obtain? How can one prove the soul-crushing pain of being trapped in a body that is not their own? Furthermore, according to an article titled “Desire for Genital Surgery in Trans Masculine Individuals: The Role of Internalized Transphobia, Transnormativity, and Trans Positive Identity,” “Trans people have a long history



of psychiatrization, where mental health professionals stood (and in some cases still do) as gatekeepers of the medicalized transition journeys” (Annalisa Anzani et. al). One thing to note is that not all transgender people experience gender dysphoria. Suppose transgender and non-binary people are not able to have a letter from a mental health professional proving that they suffer from gender dysphoria. In that case, they will not be able to get gender-affirming care. Receiving gender-affirming care is crucial for many transgender and nonbinary individuals. Being imprisoned in the wrong body and being powerless to mend the insufferable pain is a death sentence for far too many transgender and non-binary people. What is the point of living if a person is an alien in not only their own body but in their existence as well? Imagine if cisgender individuals were required to have extensive therapy to get a buttock augmentation (a butt job), botox, or even a nose job. The procedures that transgender and non-binary individuals are forced to do are pointless and hypocritical, to say the least. Yet, these same procedures are what can lead many transgender and non-binary individuals down the path of self-harm and suicide.

Self-harm and suicide are all at an all-time high among transgender and non-binary individuals. In an article titled “Factors Associated With Suicide Attempts Among Australian Transgender Adults,” the authors wrote, “Suicidality is associated with barriers to gender-affirming care, gender-based victimization and institutionalized cissexism” (Zwickl, Sav, et al.). The authors later mentioned that one in three trans people experience suicidality. This is why transgender and non-binary individuals should not have to have barriers to gender-affirming care. On top of gender dysphoria, being alienated, abused, and discriminated against by society, and having their rights stripped away from them left and right, transgender and non-binary people also have several barriers in place preventing them from getting gender-affirming healthcare. With all of these factors stacked against transgender and non-binary people, there is no question as to why the suicide and mental health rates are elevated. Additionally, in an article titled “Effects of Gender-Affirming Hormones on Lipid, Metabolic, and Cardiac Surrogate Blood Markers in Transgender Persons,” the authors state that: The number of transgender persons seeking gender-affirming care is increasing, although access to healthcare remains precarious. Because of stigma and fear of medicalization, transgender persons may encounter barriers when accessing healthcare. Transgender care is currently not a strong part of the medical curriculum, which may lead to miscommunication,

misinformation, not referring trans persons to the appropriate care providers, postponing necessary healthcare, uncontrolled hormone use, and self-performed gender-affirming surgery. Therefore, it is important for healthcare workers in both specialty and primary care to get acquainted with the needs of transgender persons and to understand the impact on morbidity and mortality. (Defreyne, Justine, et al.)

Notice how the authors mentioned that although the amount of transgender individuals is increasing, their access to healthcare remains precarious, meaning dangerous or unstable and that “Transgender care is currently not a strong part of the medical curriculum”. So if obtaining mandatory healthcare is dangerous and unstable as well as a weak part of the medical curriculum, why does America continue to shove these requirements down transgender and non-binary people’s throats? If these barriers are to remain, the healthcare industry must be willing to learn more about transgender and non-binary individuals. They also must be willing to serve as a bridge to help transgender and non-binary individuals, instead of a dead end. As more evidence is accumulated, it is ostensibly evident that the medical curriculum does not care for the mental well-being of transgender and non-binary individuals but rather about the best ways to prevent them from receiving gender-affirming care. On a lighter note, the previous article states that “In trans people who wish to access hormones, being able to do so reduces mental distress, and improves the quality of life [31, 32]. Similarly, trans adults who desire and are able to access gender-affirming surgery report stronger mental health as compared to trans adults who cannot access surgeries [33]” (Zwickl, Sav, et al.). This proves that receiving gender-affirming care can not only lower suicide rates but also lower mental illnesses. So if allowing access to gender-affirming care for transgender and non-binary individuals reduces these factors, why does America keep them in place?

Arguably, one could oppose transgender and nonbinary individuals are permanently mutilating their bodies and may regret doing so in the future, which is why the systems in place must remain. Those that oppose could also bring up detransitioners to justify their claim. Detransitioners are people that have transitioned socially or medically and have ceased their transition. Socially, this could indicate that a person started dressing in clothes that align with their assigned gender, rather than their chosen gender. Medically, detransitioning could indicate that a person stopped taking hormones. This is reasonable. In fact,

Transgender and non-binary individuals should not be required to prove their gender dysphoria to receive gender-affirming care.

according to an article titled “TRANS MATTERS: An Overview of the Debate, Research, and Policies”, Lisa Selin Davis writes:

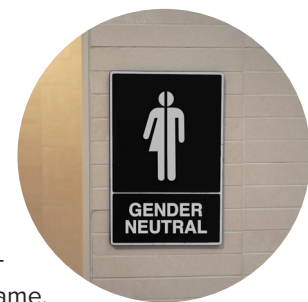
But the number of people detransitioning because of internal regrets is growing. They are speaking out on social media (94) and forming networks and groups. (95) A new study in the *Journal of Analytical Psychology*, (96) as well as a new study on too detransitioners by Lisa Littman in the *Archives of Sexual Behavior*, (97) find that more people are detransitioning because they realized that they never should have altered their bodies in the first place.

However, Davis also writes that

The dominant narrative is that regret and detransition... are rare. One review of studies claimed that less than one percent of those who'd had gender-affirming surgeries regretted them...Participants said they experienced pressure to transition; therapists presented transition as a panacea; doctors pushed hard for drugs and surgery; and friends told them they should transition.

Those who oppose this belief are not taking the factors of detransitioning into account and relying solely on the fact that people detransition. As Davis wrote, there are many factors of detransitioning. Those factors include pressure from healthcare professionals, and friends. This would likely not be a factor if healthcare professionals were one, more educated on transgender and non-binary people, and two, actually cared about the mental well-being of transgender and non-binary people. This is why the requirements for transgender and non-binary people need to be removed entirely. Furthermore, Davis wrote

that “sixty percent of detransitioners returned to identifying as their biological sex once they understood that categories of male and female could accommodate them.” It challenges the opposition’s claim because detransitioners can detransition, as evident in the name. Although they may never be able to look like they did pre-transition, they would still be able to stop hormones, get implants (if needed), use voice coaching, and so on.



The barriers that prevent transgender and non-binary individuals from receiving gender-affirming surgeries should be eradicated. Research shows that there is a direct hypocrisy between gender-affirming care for transgender and non-binary individuals and cisgender individuals. Research also shows that the barriers in place add to the rapid suicide and decreased mental well-ness among transgender and non-binary people. Even though some could oppose eradicating the barriers due to the existence of detransitioners, detransitioners are rare and account for less than one percent of the trans community. There would be a significantly lesser population of detransitioners if health professionals cared more for their mental well-being. Instead of forcing transgender and non-binary individuals to seek mental health professionals, America could encourage those who are transgender to see a gender therapist to help guide them during their transition but not require it.

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Soldiers and Athletes

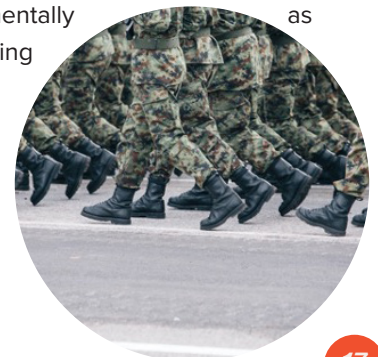
By Ben Alarca

Some professional sports teams liken themselves to a military style organization. Many football, baseball and hockey teams model their clubs with similar structures that can take on the appearance of a military unit. The basic configuration of many professional sports outfits consists of some of the same operational systems as an Army unit. All teams have a leader, or captain, designated to guide its members to a specified goal, or objective. In most professional team settings, a team leader is the first line director in a large group of athletes, who attempts to motivate his group towards a winning outcome. In an Army squad, the team leader is typically in charge of three to six men, and responsible for everything from their well-being, to their training readiness. Professional athletes, just like most members of the military, train very hard to keep fit, stay healthy, and remain prepared to perform at all times. Along with these similarities, differences between the two fields of endeavor can be noted as well. Typically, well known athletes, and celebrated professional sports team players, play for high wages and accolades, whereas, military members serve for honor, and commitment. It has never been a secret that the pay in the military is not what most of us would consider lavish, where conversely, prominent athletes boast of outrageously high earnings. Consequences resulting from an athletic engagement, where you might lose, but live to play again, differ greatly from a military confrontation, where the result can be lethal. For many soldiers, losing a war has far more extended ramifications than losing a soccer game. Examining some of the similarities and differences between members of the military and professional athletes, one discovers the common denominators, and the polarities of the two vocations.

One of the major similarities between a military unit and a team of professional athletes is the fact that both elements work towards achieving predetermined objectives. A Navy Seal fire team might be expected to set up an outpost to gain intelligence on a suspected enemy supply route. They will set up in a concealed position, and gather information on travel routes, times, and number of people detected, and report all findings to commanders who then make decisions based on their established intent. An infantry squad may be tasked to lead a patrol in an effort to seek out enemy positions on a battlefield. Members will perform an orchestrated reconnaissance, led by

a squad leader, to make an informed verification of everything needed in the event of a conflict. An Army platoon may be given an order to secure and defend a hilltop vital to the overall success of their operation. Although the particular objectives for a football team, professional bowler, or any other career athlete, may be different than a military force, the uniform likeness is that both professions have an end result that they are expected to accomplish. The Las Vegas Raiders are charged with scoring touchdowns in order to win their games. They execute plays designed to outsmart their opponents with the goal of being triumphant at the end of the fourth quarter. A professional bowler has an objective to topple over as many pins as possible to wind up the top scorer at the end of the tenth frame. He or she will meticulously align themselves in their respective lane with their only concern being capturing that elusive strike. A pro golfer's aim is to score the lowest total possible to take home that trophy or win that prize. The ultimate target for Tiger Woods is to make sure he sinks that winning ball on that last hole. While the prevailing objective for the military member and the professional athlete may differ, the parallel semblance is the fact that both strive for an end result comparable to their efforts.

Training is another similarity that exists between military personnel, and professional athletes. Soldiers, and prominent sports figures alike, take great pride in the preparations they make in order to do battle in their respective arenas. I recall my training in the Army in which my cohorts and I would practice a tactical scenario for hours at a time. For days leading up to a military offensive exercise, we would rehearse the entire phase of a battle, to ensure everything goes as planned, from the start of the maneuver, to the forecasted conclusion. My fellow squad members and I would thoroughly inspect, check, and recheck, every piece of equipment to confirm its functionality and effectiveness. We would also prepare mentally as well as physically. Repeatedly running through measures in our minds so as not to forget certain procedures was not uncommon. We would get rest, if permitted, to conserve energy for any arduous mission we might be called upon





to execute. Members of a military unit train hard to be a well-oiled machine. I cannot begin to remember all of the firing ranges I visited. As an infantry soldier, I faithfully tested my weapons sights, and filled targets with holes on a regular basis. I performed innumerable fitness tests to ensure I remained fit to

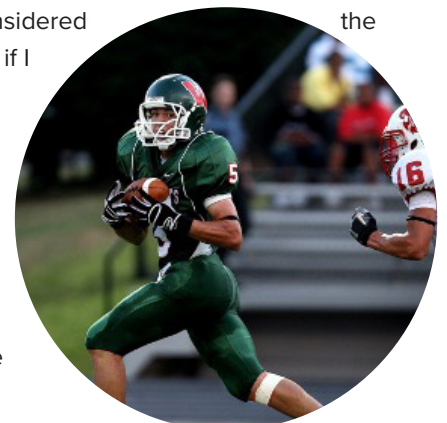
fight at any given moment. I underwent a multitude of readiness courses and challenges to demonstrate that I was perfectly combat ready. All of these practices and drills can be comparable to the rigors that an athletic star might put themselves through. Professional athletes also train for perfection. On many occasions, they torture their bodies in an effort to gain the maximum potential from their efforts. Ironman contestants endure grueling workouts just for the chance to completely finish a course. Marathon runners trot for countless miles in practice, in the hopes that at the end of their race, they are the first to break through that ribbon. I have seen hockey players unceasingly aim shots at the net before games to establish precision prior to a match. I once practiced a particular kenpo kata for weeks preceding a martial arts tournament, examining every aspect to ascertain any variance that might improve my chances for dominance in my specific class. My dedication paid off, as I was awarded the “Grand Champion” trophy in my division. Although many similarities exist between both military members and professional athletes, there are substantial differences as well.

Among the numerous differences between the military member and the career athlete, a quite notable one is the compensation rate. The military pay chart operates on a tier level system. A principle salary is awarded based on rank, and years of service. Higher rank garners higher wages. Government raises were always a welcomed occurrence because it typically meant the military received a raise as well. Although all of the raises were never intended to make anyone rich beyond their wildest dreams, they were appreciated, and quite frequently, badly needed. A memorable verse I remember hearing many soldiers repeat quite often was, “you can’t get rich in the Army.” Truer words have never been spoken. I would, no doubt, have lobbied for higher wages, but I suppose I could not complain too much. Although the pay was meager, we did, as military members, enjoy benefits such as health care, education, and countless other amenities that civilians pay an arm and a leg for. In contrast to the professional athlete, military members

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hovered near the poverty level. It is common knowledge that many professional athletes enjoy spoils to the tune of millions of dollars in pay. In regard to salaries, if you consider the fact that athletes typically participate in sports that most of them grew up playing as a child, versus the military member, who is employed to defend our country, the dissimilarity hardly seems fair. Although a top notch athlete should be commended for his dedication and commitment to his sport, having played most of his life, many of their total earnings come from endorsements. Some of the world's top sports figures earn more money from companies agreeing to pay them to endorse their product or service, than they do from their respective sport. According to an article on the website, GOBankingRates.com, professional golfer Phil Mickelson, earns the majority of his income from companies willing to pay him for his name. In 2020, his total earnings were \$40,800,000, of which ninety-eight percent, or \$40,000,000, came by way of endorsement contracts (Malone). Mickelson only played in eight PGA tournaments in 2020, which amounted to the sum of \$5,100,000 per game. At one point in my military career, I can recall earning a base salary of \$1325.00 per month. If one were to break that figure down into a typical forty-hour work week, it would only amount to an hourly wage of \$8.29. Although I did not go out hunting for endorsement contracts at the time, I am sure I would have been hard-pressed to find someone willing to pay to use my name.

The results of a military conflict, in comparison to the consequences observed in an athletic event, is another difference between the military member and the professional athlete. In a combat situation, the outcome can be deadly. One misstep could very well produce severe repercussions. In war, one must adhere to strict directives in order to survive. There is no free throw in combat. Timeouts are unheard of. Crying “foul” for a little rough contact is a joke. During Desert Storm, I served as a leader in charge of a four man fireteam. I can distinctly recount moments when I considered the consequences of my actions if I had hesitated to make a split second decision. In many instances, the lives of my men were in my hands. It was a heavy responsibility weighted on my shoulders, and the shoulders of a great number of other soldiers in that same



predicament. Unfortunately, I could not ask to go to the bench. I could not “sit this one out.” I was in the thick of it, without a time clock to save me. Fortunately for me, I returned home unscathed, as did the men in my charge. Luckily, for the professional athlete, the consequences of a lost game, or defeated contest, are typically never anticipated to be that detrimental. Although a loss, or conquer could prove to be disheartening, there is seldom a risk of loss of life to the measure that a combat veteran subjects himself to on a battlefield. Dangerous and extreme sports do exist, but the ominous circumstances associated with an unyielding, tumultuous battleground, are incomparable. Most professional athletes and sports teams have the luxury of living to play another game. It is hard to imagine Michael Phelps missing a stroke and drowning in the pool. I have personally never witnessed a cross country runner step on a mine halfway through a big race. I would never downplay the significance of any athlete or team sport, and in fact, I am an avid sports fan myself, but the consequences of their losses cannot measure up to the potential aftermath of combat.

Probing the similarities and differences between the service member, and the professional athlete is nothing, if not revealing. Resemblances such as the quest to reach objectives, and training, prove to be convincing, while contrasts including earnings and consequences to loss, are surprising. Each profession

has their goals, and work extremely hard at maintaining their vision to reach them. The duty of completing their respective assignments is their primary concern.

Service members and athletes alike, devote great portions of their time to training. Rigorous workouts are common in both fields, for the purpose of being equipped for any challenge that might arise. Variations in salary between the military member and the professional athlete are obvious. Endorsement deals make being a star athlete much more lucrative. Waging war on the gridiron is nothing near enduring battle in a live combat zone. Although injuries may hinder a performance in a tennis match, or squander a win on a basketball court, the consequences of loss between the service member and the athlete can be quite different. Many service members can attest to the fact that war has changed their lives in the most drastic way. Although, as a soldier we always anticipate a return home being welcoming and productive, it does not consistently happen that way. Some service men and women return accompanied with baggage that they carry with them for the rest of their lives. In that respect, the consequences have proved destructive.



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Seeking the Right Path Through Ceaseless Struggles

By Hajra Shaheen Ahmad

Stockton has a unique beginning unlike any other city, and even in the 1900s, it starts growing in the agricultural and manufacturing industry, which gives it an advantage over all the other major cities in California. The Gold Rush brings in around 300,000 people to Stockton of different ethnicities and backgrounds, making Stockton one of the most diverse cities in the United States. But due to the lack of leadership and poverty in Stockton, it starts to decline in the mid 1950s. Although Stockton did not hold the same morals as it did when it first became a city, it still had a strong background in diversity and industry which helped it come out of the dark shadows. However, gambling and prostitution had increased which changed the morals that Stockton originally had set. Leonard Gardner's *Fat City* is set in Stockton, California, which provides a somber feel to the entire story because during the 1950s, Stockton was not doing its best. In *Fat City*, Gardner expresses how life is filled with endless battles, but every person needs to fight through them to find their own purpose in life. Gardner's focus is not to educate his readers about the reality of a boxing career, but to highlight how people choose their own fate by making decisions that affect their future. We meet two main characters; Billy Tully and Ernie Munger who have similar lives as one another. Billy is a struggling boxer who has passed the peak of his career and is trying to reroute his life so he can once again become successful, but the grief of his wife leaving him overtakes him. Ernie Munger is a young 19-year-old kid trying to seek a successful boxing career while balancing his home life. As Billy and Ernie come across each other, we see how their lives parallel, and we even see how Billy's life foreshadows Ernie's fate. After Gardner published *Fat City*, John Huston worked closely with him to create a film, but we see the film moves in another direction. The differences in the plot, setting, and theme make the film inaccurate by directing

the audience away from the main points that Gardner is helping get across to his readers, and this is because there is lack of empathy, character analyses, and relationships that aren't portrayed in the film.

Overall, the film *Fat City* gives us the same characters that Gardner gives his readers, but in the film, Huston overlooks character analysis by only giving us Billy's story which affects what Gardner is trying to prove with his novel; life is filled with hardships that everyone needs to overcome by struggling. There are a lot of people who favor reading books over watching films because they believe that books can provide more vivid details that a film cannot. I never understood that until I read *Fat City* and watched the film. One of the main things that the film does not accomplish is highlighting what the characters are feeling, and this is because there is no omniscient narrator in the film. An omniscient narrator is one narrator that knows everything, beyond what is going on in the characters' minds. Gardner uses a third person omniscient narrator to help the readers understand the characters better. In the film *Fat City*, we do not know that Billy is heartbroken from his wife, Lynn, leaving him because Billy only breaks down once in the film, and that too is towards the middle. During the film's beginning, the audience is not aware that Billy is struggling internally, which not only takes away from the entertainment but also makes the audience misinterpret Billy's character. The audience misunderstands that Billy is trying his best in the film. However, in the novel, we know what Billy is feeling, and that is because of the omniscient narrator. Billy's wife meant a lot to him, and she was in the part



of his life that he wishes he could return to: "He could not stop thinking of her. Expensively dressed and winning fights, he felt he had to have her, and he was a proud husband..." (15). This scene is taken out of the film, which makes its audience feel lost and confused about Billy's life story.

In the novel, we are also following two characters' lives instead of one. The film does not focus on Ernie's life since it focuses only on Billy's life, letting the audience decide Ernie's fate for themselves. Gardner's main purpose for including Billy and Ernie in the novel is to show us how the decisions people make will lead them to their success or failure. Ernie and Billy are characters who follow the same path but make different decisions in their lives. Towards the end of the novel, Ruben persuades Ernie to go to a boxing match alone, but we know when Billy was sent alone a few years ago, he lost the match in Panama. Similarly, Ruben manipulates Ernie into thinking he must send him alone because he cannot afford the expenses by saying "It's the expenses. How can I go? There's no expenses for me anymore. You want a fight, don't you?" (179). Gardner suggests that Ernie still has a long life ahead of him and can still do something better with his decisions by learning from Billy's experience. In the film, we cannot learn about this because the film summarizes what the novel is saying, so it does not follow the novel's direction. In the film, the audience only meets characters like Ernie, Ruben, Oma, and Victoria several times and does not get enough time with them to understand the character's feelings. In the film, we can see that Ernie starts following the same path as Billy, which could lead to Ernie becoming unsuccessful, since we already know the outcome of Billy's life. By focusing more on Billy than the rest of the characters in the film, the audience cannot identify what is happening, making the audience confused about what is going on with Ernie. We are not even able to feel sympathetic towards characters other than Billy in the film since there is not enough information provided. Since the novel provides us with more clear and vivid details about how Ernie is as a person, there is still hope for us to see that Ernie might make it further in life than Billy.

The setting helps illuminate the characters by helping provide context, which helps the readers familiarize themselves with the feelings of the characters and with the atmosphere surrounding them; this helps the audience figure out the mood and tone of the scene. Ever since Lynn left him Billy, he has been residing in hotels for the past year and a half. I can see that Billy lost his passion for fighting because the setting that

he surrounds himself with in the story is very dull and unmotivating: "Smudges from oily heads darkened the wallpaper between the metal rods of his bed. His shade was tattered, his light bulb dim, and had all seemed to have lung trouble"

(8). The setting matches how Billy is feeling because Billy does not have much to be happy about. Billy seems meager due to all that he has gone through. As we read the first few chapters, we learn Billy feels out of place, and he is trying his best to hide his emotions but fails. In the film, we are not introduced to why Billy feels hopeless; we can only assume that he is unmotivated and does not try to get better. Gardner describes Billy being surrounded by a dark atmosphere, which most clearly signifies that he is struggling.

After Billy and Oma were done drinking in the bar, Billy left and was described walking through a dark street, which helps us understand that he is not content with his life: "They drank in silence. When the woman returned, Billy rose and went out. He crossed the dark street and limped the stairs" (14). This tells us that Billy is not in the best physical condition, which might be hard for any athlete to face. The setting gives us clues that Billy is not happy, but we are not introduced to this concept until later in the film. Ernie has an ignited passion that Billy once had. However, there is something different about Ernie. Ernie, from the start of the novel, seems like a very humble and motivated child, but as we get to know more about him, we see that he lives a life on his own terms. Ernie Munger "slept late, stirring briefly to the chatter of the water pipes, subsiding back to sleep" and felt unmotivated to get up to start his day. His sleep schedule catches my attention because we see that him waking up and falling back asleep is due to lack of motivation because that is what most of us do when we feel tired with how everything is going. Gardner describes the dark setting that he is in, which helps us understand his inner emotions that he cannot physically express. Adding on, the phrase "murkiness of the rooms" tells me that there is displeasure in Ernie's life that is keeping him from doing more with his life because there is not enough light in his life (27). The setting does a wonderful job illuminating Ernie because it helps guide us to see what kinds of emotions Ernie is feeling. As we further read, we realize that these emotions that Ernie is feeling are romantic emotions. These emotions might have kept him feeling sad because he did not know how to go about liking someone: "Had he committed himself to nothing, or had he said what he should have said all along?" (38). He expresses his emotions to Faye, the girl he likes, and although the setting is not the most romantic place, the weather and scenery illuminate Ernie's love for Faye. The film does not go into this

In Fat City, Gardner expresses how life is filled with endless battles, but every person needs to fight through them to find their own purpose in life. Gardner's focus is not to educate his readers about the reality of a boxing career, but to highlight how people choose their own fate by making decisions that affect their future.



scene with much description, which causes us to misinterpret Ernie because the film is missing Ernie's emotions. Their relationship starts off as beautiful but then it changes the course of its direction. As an audience, we do not know that Ernie likes Faye but also gets manipulated by her many times. Once when they have first

had sex because it is both their first time. Second, when Faye gets pregnant, and she uses her manipulative words to trap Ernie in marriage when he is not emotionally prepared. Huston is not able to help the audience understand the characters as Gardner helped its readers understand because there is less description and analysis in the film, causing the audience to misinterpret the characters' actions and feelings.

Sexual tension in *Fat City* helps provide us with a character analysis on each individual because it helps us learn more about the individuals. But unfortunately, the film does not go over the important conversations that lead to the characters having intimate relationships. In the film, we do not know what each character feels because there is no omniscient narrator and by focusing on Billy's life. The most important relationships in the film are Billy and Lynn's, Ruben and Victoria's, and Ernie and Faye's. In the film, we are kept in the shadows of Billy's past relationship with Lynn until the middle of the film, so we are not able to understand why Billy is hurting. As Billy is living a life that he never imagined, he looks back to the moments in life when he was happy and lively, which is the opposite of Billy's life right now. Billy can feel that he had lived his best time with his wife, Lynn, but he did not appreciate his life when he still had her by his side: "It had gone by without time for reflection, ending while he was still thinking things will get better" (15). This was heartbreaking to read because Billy loved Lynn and did not realize how much she meant to him until she left him, and this is the reason Billy is hurt throughout the story. Ruben and Victoria's relationship, on the other hand, is not perfect either because both do not put much into their relationship and there is a lack of communication. When Ruben is talking about his day at work with Victoria, he realizes that Victoria has not been listening to what he has been saying. So, instead of realizing that she is exhausted and wants to sleep, he expresses his feelings about wanting intimate time. She says, "We could if you wanted to. I don't care" (25). Victoria does not acknowledge Ruben because she is already sleeping but also because she does want to risk getting pregnant. They are Catholics so they cannot be on birth control. Ruben knowing this still chooses to hassle Victoria into wanting sex. This tells us that Victoria is caring and understands her limits, but Ruben is needy and overcome by his desires. Intimacy in a relationship signifies two

people's affections for each other, but it seems like Ruben just wants sex and Victoria is too tired to communicate her feelings. But Victoria ends up giving in because Ruben is not leaving her alone but even then, Ruben fantasizes about another girl to climax which is disgusting. Ruben is a married man who follows Catholicism but still does not seem to respect his religion or Victoria. However, in the film, there is not much emphasis put on their relationship, so we are not aware of what is going on in Ruben's life. The scene in the film only lasts about two minutes so the audience cannot gage into the characters' lives. By doing so, we do not learn much about Ruben as a character in the film because we can only see the good side of him and not the bad. We are also not aware that Ruben and Luna are Catholics or practice their religion seriously, so are not aware that Victoria cannot be on birth control. On the other hand, Faye and Ernie's relationship is portrayed in a beautiful way because it is young love, and they both seem interested in one another. Ernie "sensed a difference from the other crossed-leg girls that he had dated" when he is with Faye, which helps us realize that even though he had previous relationships, he feels different with Faye (35). As Faye and Ernie are making out, Faye's hand glides down to rest on his thigh, where she feels a box and asks if it is aspirin. Ernie does not answer this. Ernie does not want Faye to know what is in his pocket, and he just freezes: "Alarmed, he gave no answer, and uncertain of what he should do, he allowed her hand into the pocket" (37). Faye realizes that it is a tin of condoms and starts to question Ernie and his intentions. Faye's insecurity in this scene makes sense because carrying a box of condoms is suspicious, which leads to Faye doubting Ernie. The tension is created from there.

Gardner makes sure to use the dialogue to express what each character is feeling. After these questions are sorted out, Ernie and Faye have sex, and this is significant because Ernie has lost his virginity right before a fight. The sexual tension between the two characters shows that they were not emotionally ready to have sex, since they still do not fully trust one another. But the film also fails to capture Faye's manipulative behavior that entraps Ernie in her "love." She first manipulates Ernie into having sex and then later when she finds out she is pregnant she emotionally blackmails Ernie into marrying her: "Caught between prudence and expediency, afraid of committing himself and afraid of losing his rights to her, he replied despondently..." (86). This explains how Ernie was manipulated into marrying Faye even though he was ready to commit himself for someone. Towards the end of the novel, we can see that the outcome of their marriage is not good because Ernie has slept with numerous women and that is because he is not ready for a commitment that Faye entrapped him in. In the film, we are not shown the scene leading up to Ernie and Faye having sex, so we are not aware of what has just happened. This causes us to not feel

empathy for Ernie in the film because Faye is not portrayed as being manipulative in the film. This leaves the audience in the dark shadows because it keeps out a large chunk of character analysis out of the film that was important since it tells us about Faye's manipulative personality. The audience is not only kept in darkness about the intimacy between characters but also the conversations that explain what type of individuals the characters are. The film fails to explain the events, and often we see they correspond with the novel but just cut short, because all those significant conversations are not portrayed in the film as they are in the novel.

The ending of *Fat City* in the novel, and the film is left on a cliffhanger, but that is to let the audience and readers decide the fates of both Ernie and Billy. We see that Ernie has followed the same path as Billy by choosing to make similar decisions as him, but Gardner leaves it up to us to decide whether Ernie will choose to correct his life. Billy's life in the novel turns out to be worse than it is in the film. We are introduced to Billy in a hotel, and he is still living in a hotel towards the end of the story, which causes the readers to assume that Billy's life has not gotten any better. Billy is constantly drinking and smoking, which leads him to be at his lowest point in life because now he does not have anyone to rely on. But at the end of novel, I feel as if Billy hits rock bottom, and that is something that we as readers see because he is not getting anywhere in life. He promises to get back in shape so he can work on getting his life organized again because he says, "I'll be at the gym training tomorrow" (176). When he shows up, he is all covered in bloodstains and is not clean-shaven. Gardner is implying that Billy is trying his best, but it is not working out for him. In the film, we notice a difference. Of course, Billy still does not have any direction in his life. But he can figure things out by talking to Ernie. We



see in the film that Billy takes a minute to look around at the people who are in the café, he realizes that he can still fix his life and get better. At the end of the novel, I think Ernie will try his best to live a better life than Billy's. Billy and Ernie have a similar pathway of how they become boxers, but even then, I think Billy's experience will make sure

that Ernie does not turn out the way he did, and this is because of the hope that the film leaves us with. I believe through the novel, we see similarities between these two characters. Even towards the end of the novel, we see that Ernie is having sex with many other women and is not being loyal to his wife: "Ernie was picked up by sunrise by a soldier in civilian clothes, with sports shirts of all colors hanging from a metal rod across the entire width of a back seat, who owned two cars, had made love to innumerable women..." (191). Ernie starts to live life as if he has no responsibilities. The film has a different ending, so Ernie has a better character in the film compared to the novel since the film puts much of its focus on Billy. We can only hope that Ernie does not lose interest in fighting like Billy does, but as a person gets older, their will and strength to fight weakens, so maybe Ernie will not be the fighter he is today. In the film, they leave Billy and Ernie having coffee at a café, but they do not go into how their lives ended up. So, the audience of the film is left on a cliffhanger. Therefore, the audience cannot predict what will happen to Ernie and Billy after they watch the film, because it does not give the audience enough information on how the lives of the two characters turned out to be.

As entertaining as movies are to watch, some people believe that movies can ruin an entire book by not being able to follow the storyline of the novel. The same goes for *Fat City*. Gardner does an amazing job trying to explain the characters' feelings, relationships, and putting it all together to create a plot. *Fat City* is a novel about how people can create their own fate by making decisions that will either help them succeed or fail. Gardner presents us with characters like Billy Tully and Ernie Munger to show how individuals of the same career path were able to manifest two different destinies. They are both seeking successful boxing careers. In the film, Huston fails to capture many important scenes by only choosing to focus on Billy instead of both Ernie and Billy. The movie changes the plot of *Fat City*, by not giving the audience enough character analysis which makes the audience misinterpret Gardner's purpose for creating this story. This misleads the audience into thinking that *Fat City* is about the struggles of boxing and not about overcoming them and changing the direction of your life so you can become more successful. The film did not stay true to the original *Fat City* story that Gardner has given his readers because there is lack of empathy, character analyses and dialogues that are not portrayed in the film.

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A Hero and Trickster From Far, Far Away

By Hector Fuentes

When we think of the word “hero,” what usually comes to mind? The brave, courageous, and confident figure who will stop at nothing to protect what they love? Now apply that same understanding when thinking of a “trickster,” a brute. Predominantly associated with the antagonist; a nasty villain. Which in some cases may be true, yet a deeper view of these archetypes is necessary in recognizing how these stereotypical characteristics are similar to how we as humans acquit ourselves. Han Solo, one of the most important characters in the Star Wars franchise, is the perfect example of how a hero can also be seen as a trickster, how he emphasizes the cultural expectations of human behavior, and draws the line between our definition of good and bad.

Han Solo is the rebellious comedic relief in the Star Wars movies and is clearly portrayed as having spot-on characteristics of both the hero and the trickster archetypes. This is directly seen in each movie he’s had screen time with. Han Solo brings the energy of a trickster but has the heart and intentions shown by the typical hero stereotype. At times, he is defined as this innovative hero “...faced with the freedom and burden of choice; the hero makes wrong choices, suffers fatal consequences, and finds himself in ethical dilemmas; it is the very act of choice that makes a hero a hero” (Myths of the Hero Part 1 Pg 1.) Putting emphasis on ‘the hero makes wrong choices,’ Han Solo isn’t the perfect role model, but he does his best to protect Luke Skywalker even if they don’t always agree completely.

However, the trickster within Solo is also very apparent in each scene. The trickster sees the flaws in the status quo and the hypocrisy of the people around him. In the movies, he rolls his eyes at the idea of the force, questions Obi-Wan’s sanity and refuses to worship Leia just because she’s a princess. He keeps others in check even if he himself isn’t always honest. Like Loke, Han Solo can show selfishness when needed, as an example when losing the wager against the dwarf “Loke offered to ransom his head... ‘Take me then! Said Loke” (Loke’s

Wager with the Dwarfs.) The trickster exhibits acts of egotism or self-centeredness. It is evident in Han Solo as he is constantly looking after himself or his ship, and while it sometimes results in his downfall, other times it’s what drives him to be a valiant hero.

The expectations established by the hero and trickster archetype are majorly impactful towards the type of human behavior we see today, and Han Solo is the perfect example of that. He proves bravery and kindness all heroes should have, and the strong moral compass all humans should exemplify. The heroes and tricksters of the mythical world represent the process of overcoming obstacles to achieve specific goals and is exactly what we go through as people each day. Han Solo overcomes many obstacles throughout his journey with Luke Skywalker, like being frozen solid in carbonite. Yet, that doesn’t stop him from reaching his goal. He manifests this idea that “the myth of the hero is a mirror of our own heroic struggles for individuality, creativity, and self-expression” (Myths of the Hero Part 1 Pg. 6). A hero and a trickster both stand for what it means to be perseverant and what we see within ourselves. What we see with human behavior in today’s world is the direct result of stories like Han Solo, whose characteristics affect our humanity.

In a newsletter written by Aeon, they discuss the good guy/bad guy myth and how they affect our understanding of what it means to be good or bad. While referencing the Star Wars franchise, they observe how “the nature of a bad guy is that he does things a good guy would never do. Good guys don’t just fight for personal gain: they fight for what’s right – their values... good guys battle



bad guys for the moral future of society” (Aeon Pg. 1-2). While I believe nobody would consider Han Solo a bad guy, it’s not wrong to assume he hasn’t done things a hero would never do. He fights for what’s right even if he does it in his own reckless way. It’s clear at this point that Solo is a combination of both a Trickster and a Hero, so to say the difference between the two archetypes is the morality of good or bad is entirely false. He breaks that barrier between the two. A trickster is not, by definition, a villain, and should not be perceived as one. Han Solo proves that the obstacles of our human behavior cannot be defined by good or bad, but rather what we believe to be the right decision. To deduce the archetypes, Han Solo is setting the standard for what it means to be a hero and a trickster,

Han Solo is the rebellious comedic relief in the Star Wars movies and is clearly portrayed as having spot-on characteristics of both the hero and the trickster archetypes.

as he follows the guidelines to the end. Solo shows us humans what a hero is and the characteristics of both. To differentiate the two, we must realize what it means to be in their shoes. A hero is brave, compassionate, courageous, and overall faces many obstacles to reach his end goal of helping others. A trickster is a comedic relief, the person who upholds the honesty of others even if they themselves aren’t always truthful, yet they also try to do what’s right, whether for a selfish reason or not. This type of behavior, if shown by humans, will set the cultural expectations for heroes and tricksters alike.



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Sleeping Beauty

By Sarah Perryman

They say, "As long as it's healthy..." But, what if it's not?

No one prepares you for your world to be turned upside down, for you to be blindsided by the birth of your sick or disabled child.

My husband and I were teenage sweethearts, we have been together since I was fifteen years old. Two crazy kids who started their family young, having three amazing boys by the time I was twenty-five years old. I absolutely loved being a mom to boys, I absorbed everything dinosaurs, dirty, Tonka trucks, and Power Rangers. When I became pregnant with my fourth child, I already knew that it was going to be another boy, I was convinced that my husband and I could not create girls. Laying on that exam table, crisp white paper beneath me, bladder painfully full, the ultrasound tech moved the wand gently around my twenty week abdomen and asked if we wanted to know the gender. I already did, I didn't need her to tell me, but I answered her anyway, "Absolutely, yes please." She pointed to the three little white lines and said "This is a baby girl." I could not believe it. In fact, I didn't believe it, not completely. My cousin was told she was having a girl, only to give birth to a boy that became the proud owner of a hot pink bedroom and flower embroidered outfits.

I eventually trusted the imaging and went crazy with fabulous and exciting ideas of how I will do her nursery, what theme I wanted and the decorations. I wanted to go all out and throw Pepto Bismol pink on everything that would be involved with her. This was all new territory, and it was breathtaking. Her nursery was painted a light lavender, donning garden bugs, butterflies, and flowers on every wall. There were even large butterflies hanging from the ceiling. It was magical. The time came for us to meet our little girl. It was July third when I was admitted into the hospital. I had been in early labor for a few days prior, but I was an old pro at the tightening and relaxing of the uterus, I knew active labor had not yet begun. Still, during an assessment on that day, we could see that the baby's heart rate would dramatically decelerate with each contraction, so they decided to keep me and help labor progress. This was it! We had not yet settled on a name for this upcoming princess, my choice was Sophia, and I would often call her Sophie Bear

as I rubbed my tummy. My husband's choice was Kira, after the character Kira Nerys from Star Trek. He was a bit of a "Trekkie." I had some reservations with his choice of name. First of all, I can hardly pronounce it, my mouth wanted to say "Kara", and if her own mom can't say her name correctly, how can I expect anyone else to? Secondly, name her after a Star Trek character? I felt as though he had truly lost his mind. I felt the same when he, my own mother and his sister thought it would be a fantastic idea to name her Liberty, calling her Libby for short, when it was realized she would be born on the fourth of July. I looked at all of them like they had two heads, asking what was wrong with them! Looking back, that actually was an adorable idea, and I was the crazy one, with quite literally two heads laying in that bed. Her heart rate continued to drop with each tightening of my uterus. She was being squeezed and wasn't tolerating it. They gave me a little oxygen and assured me this is normal.

After about fourteen hours of active labor, she made her glorious debut into this world. She was perfect; so beautiful, and with SO much dark hair, nothing like her three bald big brothers. She cried a little, but it was weak. She moved a little, but not how a newborn typically moves once they are pulled from their snug, warm womb, into the outside world full of vast space and cool air. When she was fifteen minutes old, while still in the delivery room, my mom was holding her and I said, "Oh look, she's saying "no!" She was moving her head in a side to side motion. I jokingly thought it was so cool, my genius daughter was one in a million! Turns out she actually is, well, even rarer than that, if you can believe it. However, unfortunately not for being able to voice her disapproval with her newborn body language.

A few hours pass and she has yet to open her eyes, the nurse tells me that she is exhausted from the ride and simply does not have the energy. I accepted this answer. The length of time that I was in ignorant bliss would only last a few hours. During that time, we had family and friends arrive to meet our beautiful daughter, it was wonderful. When she was



around six hours old, she developed a fever. The doctor let me know this can happen when babies get dehydrated. He had me unwrap her from the receiving blankets covered in bears and bunnies, remove her tiny white t-shirt and pink and blue striped beanie. Although I was a breastfeeding mom, he wanted her to have a bottle of formula to get quick hydration into her. Alone in the room, I offer my girl the bottle, she instantly choked on the milk and her skin turned blue. I panic and call for the nurse. The nurse comes in and tries the bottle herself. Again with the choking, skin going blue once more, at that point, I insisted the bottle be taken away. An hour goes by, I have my baby in my arms snuggling peacefully when I notice that once again, she is turning blue. This time, there is NO reason for it. At this point, there are enough red flags for a neonatal intensive care unit (NICU) nurse to come get her and take her for an assessment. At that time, the thought was that her eyes were still closed due to swelling and that she must have an infection somewhere. In my head, while yes, I am very afraid, I am thinking I only have a couple of obstacles here: she has to become coordinated with a bottle, and they have to treat the infection... not too much to deal with, eh! Soon after they rolled her out of my room, a man knocked on my door for the third time to ask me to fill out the form for her birth certificate. I had asked him to come back twice before, as I was still undecided on her name. Kira or Sophia, Sophia or Kira? This had never happened to me. With my boys, they were named before they were born, and that was that. But now, looking at her, I didn't FEEL her being Sophia, as I had while she was my Sophie Bear for the previous four months. But my girl needed a name, so I sat there, in my hospital gown, pen in hand, hovering above the line that was screaming at me to write a name on it. I hovered for what felt like minutes but was probably seconds. I finally just put pen to paper and what was written read; "Kira Jean Beauty Queen Prettiest Girl I've Ever Seen." Okay, perhaps not all of that, but her name was going to be Kira.

A day passes, and she has become still and quiet. Her eyes have not opened, she is not reacting to the outside world, and people are taking notice. On day two, I noticed her body doing a strange, almost shivering-like action. I told the doctor what I noticed, not knowing that he had noticed as well and that he had a thought-out conversation in his head, that he wanted to have with me. He gently asked me to sit and talk with him. Now, before I tell you what this conversation entailed, let me tell you that I thank our Heavenly Father that I had my mom by

my side at that moment. She has been by my side from day one, and I really feel that I would not be who and how I am mentally and emotionally without her. She has been my rock throughout this entire journey. This unbelievable, agonizing, beautiful, painfully miraculous journey. My husband as well, we have to be each other's rock, something like this can break a person, and believe me, it has tried too many times to mention. When I start to crumble, they pick me up by my bootstraps, and I can only hope that I do the same for them.

The doctor sits me down and tells me that he suspects there is something neurological going on with Kira. He says he would like to do an electroencephalogram (EEG) on her brain. I had no idea at that time what an EEG was, but I was understanding that he thought there was something wrong with my daughter's brain... "WHAT?!"

They do the EEG, and I only had to wait a few hours before getting the results, the horrible, gut-wrenching, disgusting results.

Here again is where Jesus put another angel in my presence, my sister-in-law Kim. I had just walked into the NICU and was at the sink washing my hands when the neonatologist walked up to deliver the results of her EEG. If I remember verbatim, the conversation went like this:

"Are they in?"

"Yes."

"What are they?"

"It's very abnormal."

"What does that mean? What does that mean? What does that mean?"

This is where people talk about shock as being in a dream state. The room was literally spinning, everything went foggy, I went numb, and felt sick. My sister-in-law Kim walked in at that very second. Thank you, Lord. I sat down, and I remember the doctor having his hands on my knees asking if I can hear him. My husband Jim then came in, sat next to me, and I told him what the results were. All I needed to know was, "Would she make it?!" He could not tell me the answer to that. The doctor, my husband, and I continued the conversation back in my recovery room. We discussed what this could possibly mean



When I became pregnant with my fourth child, I already knew that it was going to be another boy, I was convinced that my husband and I could not create girls. Secondly, name her after a Star Trek character? I felt as though he had truly lost his mind.



for her, what tests they will be running, the labs they will be drawing, and he tried to answer the panic-stricken questions that were racing out of my mouth, to the best of his ability.

Reflecting on Kira's first fifteen minutes of life, it's now clear that she was not that prodigy child flowing out of the womb knowing how to communicate, it was the first of her millions to come, seizures.

Kira ended up being in the NICU for exactly one month. The entire time, she couldn't have anything more than a diaper covering her, as she kept her mysterious high body temperature. If you were to even drape a receiving blanket on her, her temperature would shoot up. She was placed on Phenobarbital for her seizures, and a nasogastric (NG) tube was placed for her feedings. During her first month, she would suck on a bottle or breast, briefly. She never did root, or open her mouth on her own, but, if you placed your finger in her mouth and pulled her tongue down, then worked the nipple in, she would start to suck, albeit not very strong or smooth. It was literally like trying to feed a sleeping baby, who started to suckle for a moment as they dreamt. I couldn't help but irrationally think that she would not be going through this, that she would be a "normal" (we don't use that word anymore, "neurotypical" is preferred) little girl if I had kept her name as Sophia. I was convinced that Sophia was not meant to go through this journey. I shared this with all of her nurses during our stay, who of course tried to rid me of this self-inflicting chastisement. I kept this ridiculous, unwavering belief for years.

Somehow, Kira came home on oral feedings. I wasn't educated enough, or even fully mentally available enough, to realize what a terrible decision this was. One month after being home, I had to take Kira to the emergency department for very scary behavior. She was breathing incredibly fast, her back was arched, her heart rate was in the 220s, she had a fever and was sweating buckets. It wouldn't come to an end. This was different from the seizures that I had been trying to accept. What she was experiencing is called an "Autonomic Storm." Our autonomic systems control our respiratory rate, heart rate, body temperature, and blood pressure. Think of it as your "automatic" system. She was also labeled as 'failure to thrive', not meeting the weight or nutritional standards that she should have. She of course was admitted into the pediatric intensive care unit (PICU), during this admission, the intensivist changed her anticonvulsant, and from that moment on, she lost what suck she did have. I would try the bottle here and there after this, but quickly became discouraged and depressed, and gave up my efforts. I very much regret 'throwing in the towel' on my girl, as her having any type

of oral behavior is pretty much all that she was able to do.

When Kira was three months old, she had a g-tube placed, a surgical procedure called a fundoplication (this prevents stomach contents from re-entering your esophagus), and a skin, muscle, and nerve biopsy done, in hopes of giving a name to what Kira was going through. During our first few months, we had just about every lab drawn, tested for every syndrome out there, all the assessments a professional can perform, but still, no answers. What EVERYONE agreed on, was that this child would not see her second birthday. Across the board, this was to be her fate. Even a doctor that I traveled to, to get 'new eyes' on her, told me and my husband to cherish every day, as she will not make it to two years old. What IS it with this magical number two, that doctors love to use?

Doctors have conferred with other specialists, and I, of course, have scoured the Internet, searching for someone else like Kira, but alas, she appears to quite literally be the only human being like her. Nobody can find another human in a sleeping state since birth. Even blind children have their eyes open. She is a medical mystery. Today, Kira is sixteen years old and remains in a sleeping state, never opening her eyes. She does however roll them briefly during her seizures. Rarely, she will slit them open ever so slightly for a moment. She has what is called 'intractable epilepsy', meaning that regardless of what medications or treatments she receives, her seizures are relentless, they cannot be controlled. Since her first day of life, she has had seizures all day, every day. Some days are better than others, but never a full day of peace. On average, we get about two-four hours of her brain being at rest before it sparks back up and she starts clustering; seizure after seizure, until the next medication dose knocks them back out and suppresses them for another two, three, four hours. She has never had a purposeful movement, she cannot move any part of her body, she cannot speak, cannot eat, and she can hardly muster up a cough. If she isn't seizing, she appears to be asleep. If you don't know her, you think she is, and at an early age, she was nicknamed "Sleeping Beauty." It is unbelievably frustrating and confusing that during a seizure, her arm will raise, her head will turn, her leg will lift, her larynx offers the sweet sound of a voice I will never hear speak, but if her brain isn't sparking, it's silence and stillness. What is being unlocked during those neurological sparks and why can't we locate that key?

I have fully, I think, accepted that I will never have an answer to any of this. I have finally stopped praying for her to wake up, but instead, to just have a good quality of life. While I know there are powerful forces at work, pulling her back to me as I beg and plead when she is teetering between worlds, I don't believe that she is receiving that quality of life that I wish so

badly for her anymore. I use to tell people that she is like an infant in the sense of tending to her daily needs. What an infant needs most is comfort, nourishment, security, and love. Kira could win awards for her cuddling skills. Unfortunately, she has been through and continues to go through excruciating, miserable things. Things that seem inhumane and so unjust. She has seen countless amounts of hospital stays, she has had a couple of handfuls of surgeries, and is now to the point where her body is just tired and not as resilient as it once was. This gorgeous, precious, amazing, innocent soul, does not deserve any of what she has to endure every single day of her life. In saying that, It also needs to be mentioned that I am so grateful to still have her with me, and trust me, I fully realize how selfish this sounds. I can't bear the thought of the alternative, though the rational part of my brain knows I will have to. I will let my heart and brain work that one out. In the meantime, I will continue to shower my baby with all the love that I have inside me. I am trying every day to find a way to get her back to the days when she was stable and cozy. But is it really possible to rewind time? If only.

Kira has taught so many people, so many lessons: lessons of love, of perspective, and rekindling or even lighting someone's low or non-existent flame of faith. Having been the lucky one to be called her mom, I am a completely different person than I was before this magnificent being was brought into my life. I have been molded into many different forms. Some for the better, some not that great, and in other ways, just changed - not for better or for worse. I want to say perspective has been one of the largest gifts that I have been given. This was imparted upon me by my mother when Kira was still in the NICU. Her words of wisdom hit me like a ton of bricks and have stuck with me, always bringing me back to where I need to be. Although my daughter is severe and our life gets unimaginably frightening, I now have the ability to be able to think, "It could always be worse." I am able to find the silver lining in the blackest of spaces. It is not always an easy feat, but

I keep searching until I find one, because, there always is one. Sometimes you have to dig just a little bit deeper. As crappy as life may seem at the moment, as unfair and painful, as much as it can knock you down and take your breath away - take a pause, take a breath, and eventually you will

find some good. If I find myself complaining of discomfort, I think about Kira, and what she has to endure, and tell myself to "Knock it off!" I have learned to treasure and really breathe in each moment. I make sure the people around me know how much I love them. Life is

but a feather floating in the wind,

never knowing how strong or calm the gusts will be. Never take people or moments for granted. This young lady is physically stunning. When she was younger, I would often find myself staring at her, wondering what she would look like with her eyes open, laughing, running, and playing, until it became too painful to picture. She has her dad's auburn hair, full, with soft waves. Her eyes are a beautiful grey-blue with lush eyelashes. Her eyebrows make women jealous, I'm jealous. I was a teen in the early nineties, when the pencil-thin brows were in, so I tweezed until the hair follicle finally said "Good

riddance." Her brows have that perfect arch that so many women pay to create. That perfect arch and those tranquil, beautiful "blues", are also a perfect complement to her daddy. Her lips are full, soft, and pink, almost heart-shaped. She has an angled chin and puffy Cabbage Patch doll cheeks. When in her presence, you can feel her, you know 'she's there'. On really amazing days, she will give me a little half 'Elvis' smile. Did you know that the act of one curling up a part of their lip could be the absolute best gift you could ever receive? Who needs all the riches in the world? No, this smile is it. When her mouth gives me that brief upward turn, my heart leaps with joy and gratitude. She is unable to respond to you, but I fully believe she understands, that she is aware. Her brain just doesn't allow her to respond. Have you heard of "Locked-in syndrome?" I believe Kira is similar to this situation, it's like a comatose patient awakening and repeating things back to you that transpired, or that were said while they were in the coma. Kira is not in a coma, she just won't "wake up."

We went on to have a fifth child, another boy. I know this sounds incredibly reckless and insane, but I needed to have another baby. I needed to see my infant crawl, grab for toys and reach milestones. I know that was a selfish state of mind, but my mind was not in a clear, rational place. Kira Jean has four brothers that love her to no end. They are incredible with her, and so understanding. With Kira's extensive medical issues and frequent hospital admissions, their lives have been dramatically affected. Now that the older boys are adults, we openly

An hour goes by, I have my baby in my arms snuggling peacefully when I notice that once again, she is turning blue. This time, there is NO reason for it. At this point, there are enough red flags for a neonatal intensive care unit (NICU) nurse to come get her and take her for an assessment.



talk about what their childhood looked like. It's no secret that they did not have a normal childhood. They missed out on a lot of things, and they often had a depressed mom. Depressed, anxiety-ridden, scared of literally everything-so never letting them go anywhere-for fear of something happening to them, and exhausted. They did get more love than a mom can give though, flooding them with verbal "I love yous," and hugs and squeezes all throughout the day. At the time, I thought this was enough. It wasn't. My sons are remarkable human beings. They acknowledge what I was going through, share with me their experiences of that consequence, but in the end, tell me that they know I did the best that I could do. I'm listening to their words and sincerely putting forth the effort, in not creating the same lacking with my youngest son, still at home.

Our second home has been the hospital PICU. I have developed friendships and bonds with the doctors, respiratory therapists, and nurses there and it made me realize my passion. My childhood dream was always to be a nurse or a veterinarian. When I was pregnant with Kira, I started attending community college, beginning my path to becoming a nurse. Of course, I stopped attending when she was born. I finally became a licensed vocational nurse (LVN) last year, and it feels amazing to be able to call myself a nurse. I am currently attending community college, on my way to becoming a registered nurse

(RN). The ways that the PICU nurses have been there for me in my darkest moments, shining even an inch of light for me, made me realize that if I ever put my RN license to work, PICU will be my home. Not only have they saved my daughter's life countless times, but they have also saved mine, figuratively speaking. It would be an absolute honor to be that same light for another parent who so desperately needs it.

I have seen my child stop breathing too many times to count. I have seen her lips, fingers, and toes as purple as fresh grapes. I have to put a suction catheter down her nose & throat often. Her spine is curved to 130 degrees. She hurts. I hurt for her. I am not sure whose pain runs deeper. There are no words to describe the love that I have for my daughter. What mother can put her love into words? It's such a powerful, unbreakable bond, and I know that she loves me just as much as I love her. I make sure that I tell her that I know. She and I have our communication, though the outside world will not detect it, we know. Kira has a strength that you could not imagine. How can someone, so incredibly fragile, be so strong? How can she be such a powerful warrior, yet so delicate? I am in awe of Kira Jean Beauty Queen every single day. I could not be prouder to be her Momma.

The Power of Visibility

By Shane Klump

When you hear the term “gender-affirming care”, what’s the first thing that you think of? Most would probably say something along the lines of surgeries for trans people, which would be a correct and fair assessment, but it’s only half of the picture. To simplify it, the Office of Population Affairs (OASH) website defines gender-affirming care as “treating individuals holistically, aligning their outward, physical traits with their gender identity” (2022, p. 1). Anyone, even if you are someone who identifies with the gender you were assigned at birth (also known as cis), can receive this sort of care. In our American society, cis people getting gender-affirming care is not visible on the same spectrum as trans or non-binary people because to be cis is considered the “norm” and most are not able to recognize products or procedures that are gender-affirming. Therefore, gender-affirming care is more socially acceptable if the product or service is provided to cis people.

Firstly, in order to identify the broad spectrum of gender-affirming care it is imperative to understand that gender is a social construct. Most of us have probably heard that saying and for some, it’s an indicator to stop listening, but I challenge you to continue reading because you may learn something new about yourself. What does it mean when we say that gender is a social construct? American sociologist and author of *The Gendered Society* (2017), Michael Kimmel, defines gender in various ways because “gender means different things to different people-it varies cross-culturally” (p. 3). When something changes from culture to culture, that means it was created through other people or “socially”. To create something that doesn’t derive from scientific fact is something that is constructed and can be deconstructed if the social part of the equation decides to do so. What Americans define as “male” or “female” is not universal because “gender is masculinity and femininity” (Kimmel, 2017, p. 3) meaning that gender

is not something that you are, it is something you do. It is an action, a performance such as the way you dress, how you walk, talk, move your hands, how you square your shoulders, etc. To perform something is an action that you consent to, but it’s not

something you have to do. If you are cis, when you leave the house do you ever ask yourself this question: “is what I’m wearing going to align with how I want others to perceive me? Is this shirt shaping my body in a masculine/feminine way so people will address me as a man/woman?”. If your answer is no then you are someone who has benefited from our society’s gender norms and is privileged in the sense that you don’t have to worry about your performance because you know that you are going to be addressed and perceived in ways that are comfortable to you without effort. As someone who is not cis, I ask myself these questions every single time I leave the house because I do not fall under the “norm” category. In order to assure that I am going to be addressed with the right pronouns or seen in a way that aligns with how I feel internally, I have to perform in ways that easily translate to others. Most of the time I wear pins that display my pronouns just so I feel like I am doing everything in my power to make my message clear. Naturally, I prepare for discomfort surrounding this topic because most people feel validated by gender norms and roles. While that is perfectly valid, that doesn’t mean you have to deny that gender is a social construct. If there is discomfort in regard to this topic and what it means to you, I ask, what are you holding on to?

Acknowledging that gender is socially built takes nothing from you except ignorance and I’d like to remind you that, “gender is not a property of individuals, some “thing” one has, but rather a specific set of behaviors that are produced in specific social situations” (Kimmel, 2017, p. 119). Gender does not define who we are, we as a society are the ones who define it time and time again. What we define as masculine can be viewed as feminine in another culture, it is all a choice that we have come to believe is set in stone which stunts our natural diversity. Humans are much more eclectic than we give ourselves room and credit for and the reason we are not open to the varieties of gender and how it can be changed is because those who are in power want to maintain gender imbalances (i.e. gender roles in the workplace and household). White, cis, straight, masculine males are the ones who have benefited the most in terms of gender imbalances. American culture favors masculinity and rejects femininity when it comes to places of power because of Hegemonic masculinity. Hegemonic masculinity is defined



as: “a particular variety of masculinity to which others-among them young and effeminate as well as homosexual men-are subordinate. We thus come to know what it means to be a man or a woman in American culture by setting our definitions in opposition to a set of ‘others’--racial minorities, sexual minorities, and so on” (Kimmel, 2017, p. 119). Someone who presents as feminine is synonymous with being weak or invaluable in American society. Anyone who is feminine is regarded as someone who is incapable of being in a position of power because they don’t meet masculine expectations. Inevitably, that puts women, effeminate men, and overall feminine-presenting people in positions where power is not easily obtained. Therefore they remain subordinate because “gender is about power that men as a group have over women as a group, and it is also about the power that men have over other men or that some women have over women” (Kimmel, 2017, p. 121). Since we live in a society that is ruled by gender expectations, stereotypes, and rules, it is critical that we understand that “social constructionism is inevitably about power” (Kimmel, 2017, p.120) or else we will continue to be blind to it. Here are some examples of what power imbalance looks like: there have been 0 female presidents, women are expected to be able to cook at home, but once it becomes a career it is a male-dominated field, female teachers dominate younger grades while men dominate universities because women are seen as caretakers that are “better suited” for younger children due to “mother’s intuition” while males are largely considered more logical therefore they teach more complicated subjects (science, math, advanced English courses), men who teach younger grades are regarded as creepy because a male who is a nurturer is expected to have something wrong with him or to have ulterior motives, male athletes get paid more than female athletes, men who work in female-dominated fields will be promoted faster than women who have worked there longer while women who work in male-dominated fields may never be promoted (this is called the glass escalator and the glass ceiling affect).

Since we are expected to perform in certain ways, we look to procedures to aid us in order to fit into our gendered society if it does not come naturally. If someone does not feel like they have to alter themselves to fit the norm, they have what Kimmel (2017) calls the “privilege of invisibility” which means “that the gendered standards that are held up as the norm appear to us to be gender-neutral” (p. 8). Privilege is not something someone sees until those who are not privileged point it out, therefore, if you have the privilege of invisibility, you have no

means to argue that you don’t have it. It is important to face these truths and accept them as truths so we as a society can move forward and dismantle gender constructs. If you benefit from privilege, it does not make you a bad person, but it does make it challenging for you to see a world without that privilege lens. The topic of gender equality has become much more prominent in the last decade, however, there are still those who believe we have come as far as we should and that the imbalances have been “solved”. This is a dangerous place to be because “the illusion of gender neutrality has serious consequences for both women and men. It means that men can maintain the fiction that they are being measured by ‘objective’ standards; for women, it means that they are being judged by someone else’s yardstick” (Kimmel, 2017, p. 8). Now that we have come to an understanding that gender is a construct that can, and should be, dismantled it is easier to identify what is considered gender-affirming care.

In our American society, cis people getting gender-affirming care is not visible on the same spectrum as trans or non-binary people because to be cis is considered the “norm” and most are not able to recognize products or procedures that are gender-affirming.

While gender-affirming care may sound like a specific set of procedures for those who are looking to transition, it can also be simply identified as plastic surgery or hormone enhancers.

Both of these products are advertised to cis people as just that: plastic surgery and hormone enhancers, but they are never labeled as gender-affirming care even though they are.

Testosterone enhancers are “supplementary substances that can be used for the purpose of increasing testosterone levels in the blood” (Almaman, 2018, para. 1) therefore they are meant to enhance masculine secondary characteristics that cis

men may lose as they age. If gender-affirming care is the alignment of outward physical traits to gender identity, testosterone enhancers could be advertised to trans-masculine people, yet they aren’t. Why is that? Aren’t trans-masculine people a part of their customer base? Why are all the commercials catered to only cis men? Some may ask how I know that they are catered to cis men, and I can only say as a trans person that there’s a cadence that’s painfully obvious when it comes to cis advertising that is hard to explain if you are not someone who sees the world through a trans perspective. Additionally, there is no verbiage or obvious outreach to the trans community in these commercials so it’s not easy to feel included. In our society, companies have to be obvious as to who their audience is, or else it doesn’t feel any different for those who are used to being excluded.

When it comes to plastic surgery, the way it is labeled changes depending on the audience. For cis people, it’s just cosmetic

or plastic surgery, but for trans people, it's "gender-affirming care". While the simple change in labels may seem small, the impact it has on the patient is heavy. The difference is that cis people who get plastic surgery don't have to provide proof that they are mentally reliable by going to therapy or going through the process of being approved by a psychologist as trans people do. When I got my top surgery in 2018, I had to get it approved by a psychologist when I was paying out of pocket, had already been going to therapy for 10+ years, and had spent a large amount of time weighing if I wanted to go through with the procedure or not. For people like me, it is discouraging to go through this process because it feels like asking for permission. At this stage, if a trans person is seeking out this type of care, they have gone through the painstaking process of giving themselves permission to want the procedure openly and most likely have spent a lot of time building up the courage to start the process. Having to jump through additional hoops feels like all that work means nothing because not enough of the right people were able to see that work. I think that this process should either be applied to everyone or no one, not a select few because a lot of plastic surgery patients go overboard with their procedures, and sometimes, it's very obvious that they rely on plastic surgery for their mental health. Yet, they can get more plastic surgery done with their mental health left untreated. I have witnessed countless people in my personal life and on television get one too many cosmetic surgeries. Most of the time they have no intention of stopping and that's when it becomes clear that there's something they're either trying to fill in that's missing or something they are trying to avoid. When I see this I can't help but wonder if they would have arrived at the same outcome if they had been forced to tend to their mental health in order to get permission to get surgery. An example of what I mean by going overboard would be the show *Botched*, a reality TV series where two surgeons fix plastic surgery mishaps. While some of the patients experienced genuine errors due to the unskilled hands of a surgeon, a lot of them simply had too many done and displayed symptoms of addiction to plastic surgery as well as suffering from body dysmorphia. Most of the time when the patient is putting themselves in danger, the surgeons turn them away but again, their mental health is still unchecked and usually they admit that they're going to look until they find a surgeon who says yes.

While plastic surgery is largely used to meet beauty standards, it is also a tool that's used to perform gender, but it is not recognized as such. For example, women get breast augmentations and Brazilian butt lifts to accentuate or enhance an hourglass figure that is classified as feminine. Getting these procedures makes them feel more aligned with how they feel inside. The most commonly requested plastic surgeries for men are Rhinoplasty or chin augmentations to make their facial structures

more proportionate and masculine (Lucas, 2015, paras. 3 and 7). In some cases, men will get Gynecomastia surgery which is the removal of excess fat and skin of the breast. This is a gender-affirming surgery because it removes tissue that has the appearance of breasts when men want a flatter, more masculine chest; much like trans people when they get top surgery. Because cis people are getting gender-affirming care, it needs to be labeled as such because if gender-affirming care is normalized for cis people, it will be normalized for trans people. That is unfortunately how the world works; once the majority normalizes it, then the minority can integrate and gain better access. Additionally, the more it is normalized, the more accepted the discussion surrounding gender-affirming care and gender as a whole will become.

When it comes to receiving gender-affirming care and being shamed by someone who has had gender-affirming care without knowing, I am someone who can shed light on that experience. When I first started talking about my surgery to my family (who are all cis), they asked the typical questions that I was prepared for: was I sure, was I positive that I thought about it long enough, did I know the risks, etc., but one comment stood out to me the most and has stuck with me all these years. It came from a family member of mine that had a breast augmentation, a face-lift, and Botox. The comment was along the lines of assuring me that if I had made a mistake or if my judgment was lacking, I could simply reverse the surgery (top surgery is irreversible). Not only does this invalidate my experience and minimize how I felt in this transitional period, but it also destroyed the possibility of us bonding together over a shared experience. Instead, they wrote me off as someone who was making an immature and rash decision, when I had been mulling it over for years. I had tried to explain this but my family generally sees me as someone who can't make sound decisions and because of the general topic regarding my gender identity, their discomfort was palpable. I could sense that they wanted to stop talking about it without ever asking how I felt, what this part of my journey meant to me, or even just asking for the sake of trying to understand. At the same time, they never acted this way about the person with a plethora of gender-affirming surgeries under her belt. Not once did they express discomfort or doubt when it came to her decisions. I never understood the difference other than the fact I wasn't respected on the same level as her. Over time and without resolution, I came to the conclusion that their disdain derived from transphobia. Those who are transphobic claim they just don't understand when, in my case, I wasn't asking them to. You don't have to understand someone





to support their decisions when it comes to their body and you don't have to understand why someone wants to make changes to their body to not wish harm or ill will on them. Furthermore, if you don't understand it's not anyone else's job to educate you. Admittedly, some

people feel that gender-affirming care

is accepted on a broader scale with the aid of recent social movements and that cis people do experience discourse when receiving gender-affirming care, much like trans people do. In comparison to American history versus the present, yes we are more progressive than we have ever been when it comes to the LGBTQIA community, specifically trans people. There's more representation in media, in positions of power, and across communities. With more acceptance has come easier access to gender-affirming care such as estrogen or testosterone hormone replacement therapy (HRT). Currently, there are companies that will deliver Testosterone Replacement Therapy to your home with a subscription if there are complications with your insurance or you simply can't get coverage depending on what state you're in. Finding such products is a simple Google search. One of the results is an article provided by the website, Healthline, titled "6 Best At-Home Testosterone Test Kits of 2022" where they provide a list of kits to choose from, one of them being LetsGetChecked. This company is described as a service that "offers testosterone testing kits that use a finger prick to measure testosterone levels in the blood" (Coward, 2022, para. 20) for \$69-\$199. The convenience speaks volumes about how far we've come. Granted, this method isn't better than going to a doctor, but for trans people that aren't located in a progressive state, it's better than nothing.

Another easy way to access hormone therapy is through Planned Parenthood. When my health insurance lapsed, I didn't have access to a doctor therefore I couldn't get prescribed testosterone, so I looked to Planned Parenthood to help me. My experience was extremely positive because it was very quick, and easy, and the staff at my local Planned Parenthood were extremely accommodating. These safe spaces are dire for trans people who need access to these treatments in order to feel sane in their bodies, so to have options for care is a grand improvement. It is evident that progress has been made, but it is a slow process, seeing as "64% of Americans say they would protect trans people from discrimination, even though as a growing share say gender is determined by sex at birth" (Mitchell, 2022, para. 2).

When it comes to altering a body in any way, whether it be from plastic surgery or body modifications, overall it is cast in

a negative light. Anyone, cis or trans, who alters their body in is subjected to some sort of disapproval and if their procedure has complications, they are treated as if they deserve it. This is ironic considering Americans tend to preach things like "if you don't like it then change it" and yet when someone applies that to their body, they have now "ruined" themselves. Recorded in 2021 by the American Society of Plastic surgeons, the United States has the highest number of surgical (1,465,116) and non-surgical (3,182,815) procedures in the world and yet the bias still stands. It's especially evident on the internet. I have seen my fair share of men (mostly) stating that they want to find a woman that is "all-natural" and that plastic surgery isn't something they approve of when they can't even decipher if a woman is wearing makeup or not. When I worked as a hair-stylist, I had a few male clients who got hair plugs, but one, in particular, stood out the most. This client told me that he had to get the procedure done twice because women could tell that he got the treatment and would tease him for it. As for me, I partake in body modifications of all shapes and sizes. I have piercings, tattoos, and have had one cosmetic surgery. When I did these things to my body I knew what I was setting myself up for and my family did as well. They would constantly ask me to stop modifying my body in permanent ways because they knew I would be treated differently because of it and yet, never had a conversation about why other people would treat me differently.

The discussion surrounding gender is not an easy one to digest, take it from someone who has had numerous ones both good and bad, but the important thing to remember is that it is something that is created. Gender can be validating for some, but also a box without holes for others, and because of that we are stuck in this cycle of following gender expectations and roles even when we really don't want to. I believe that humans don't necessarily want to fit in with each other, but rather the act of fitting in is how we are guaranteed safety. The way I see it, we are merely playdough in our own hands; molding, adding, subtracting, and whatever else we want until we're happy with the final shape. What we want, or what we need, is a space to spread out and act in ways that feel good with who we are, not what is expected or the easiest.

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The Eccentricity of Being a Woman

By Vanessa Camacho

Being the youngest of thirteen children undeniably leaves a mark on an individual. It was in 1940, at the age of four that my father, Jose Camacho, had lost two siblings to the macabre hands of poverty. Malnutrition and dehydration were all too familiar in the small town of Jamanducaro, Michoacan, Mexico. Herding sheep, milking cows, and fetching water from the stream were a few of the ways my father and his kin earned money; nonetheless, the demand was greater than the supply, leading to sleepless nights of dismal silence only interrupted by the occasional growling stomach. Beyond a shadow of doubt, this direful upbringing shaped my father into the man he is today.

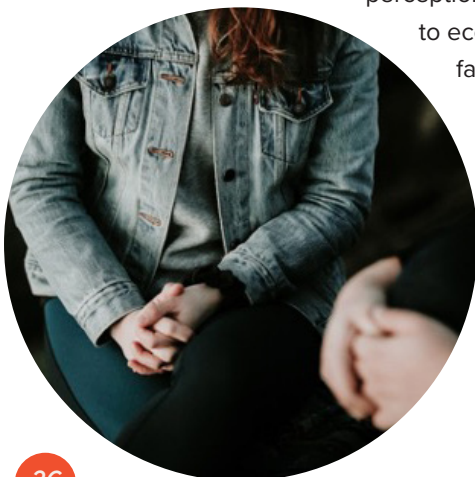
Considering myself blessed is an understatement for not having to mirror the struggles of my father's childhood. Although far from lavish, my family lived a comfortable lifestyle, where I associated the word "rich" with moments, as opposed to currency. My upbringing was not ideal; however, and ultimately it is narrowed down to this: I come from a culture of masculine dominance. The misogynistic mentality that my father inculcated on my older brothers from the moment they could walk was sickening, but was he to blame if it's all he had ever known? "A woman is to breed children, cook warm meals, and tend to her man's needs," my father would declare, so much so that I would question if a woman could possibly have a life outside of being a homemaker. Needless to say, I grew up with the distorted

perception of male superiority. Due to economic hardship, my father never set foot inside of a classroom. A family friend shared snippets of newspapers with my father, this sparking his interest and resulting in his learning to read, at the age of ten. Unlike my father, I had the luxury of obtaining an education.

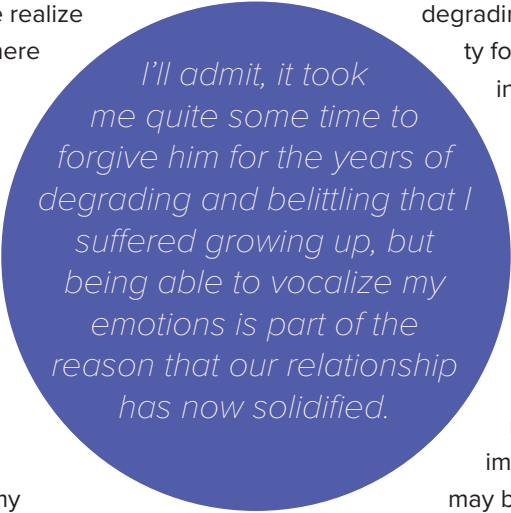
I find it enthralling that there is no limit to the amount of knowledge one person can have. Ever since I can remember, I have always been excited to go to school.

All the same, the night of my high school graduation, my father congratulated me, ending with, "Now you can go pop out children like you're meant to." My going to college and, after that, medical school would not have crossed my father's mind in a thousand years. I'll admit, it took me quite some time to forgive him for the years of degrading and belittling that I suffered growing up, but being able to vocalize my emotions is part of the reason that our relationship has now solidified.

Coming from a background of generational poverty, the outlook my father had on finances remained simple: spend the least amount possible at all times. Although I am far from an avid spender, I realize that having quality over quantity is essential. Going on family outings and taking trips to create valuable memories is important to me, whereas my father considers it a blatant waste of money and time. Undeterred by our disparate personas, my father and I have more in common than I would like to admit; being stubborn, short-tempered, and controlling, for instance. Yet, my bravery, leadership skills, and determination are also qualities I can attribute to my father. I acknowledge that our behaviors are heavily influenced by those of our parents', but certain traits and mannerisms are uniquely ours; in regards to religion, for example, my father did not believe in God. Taking after my mother's side in Argentina, I was raised believing in a higher power. I recall my father's questioning why we suffer so much if there is a God, and wishing for Him to forgive my father and help him believe. Much to my surprise, it was years of chronic medical issues and surviving a near death experience that coaxed my father into the arms of Catholicism. This, to my father, signified a fresh start, however hypocritical that may be.



Growing up in a toxic household made me realize how to not raise my children. Of course, there will be rules and boundaries in place, but I refuse to follow my father's tactics when it comes to discipline. It was at six years-old that I was scolded until his voice went hoarse. I had made the mistake of taking a bite of my dinner before father had touched his. I cried silently, for I knew better than to be loud, my feeble mother watching powerlessly from her seat. At that moment, I promised myself that my children would not relive my misery. I vowed to educate my children when a mistake is made, not resorting to



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degrading them. I will always give the opportunity for an explanation to be told, offering my insight and advice, without judgment or repercussions. Yes, having food and a roof over my head meant I had a house, but I did not grow up in a home. Therapy and counseling allowed for my family and me to overcome the emotional damage that had become orthodox in our daily life. Overall, I am thankful for everything I have endured, as it has built my character and made me realize the importance of family, as dysfunctional as it may be.

