HOMELESS VETERAN
ANYTHING HELPS
February seems to promise only the continued monotony of school and work, without the prospect of bonuses or breaks for holidays. Coupled with the biting cold and short days, it can be grueling. The wet cold and lack of daylight also create an opportunity (excuse?) to stay in, read, and inform yourself about the world around you. In the wake of the horrific violence in Paris, Nigeria, and Ukraine, violence bred by ignorance and intolerance, we hope that you will spend more of your time finding answers, asking questions, and learning as much as you can this month.

Nous sommes Charlie
Alex Skousen, Sub-editor
Early in December the Center for Disease Control (CDC) sent out a warning about the seasonal suite of influenza viruses. Namely, the A-H3N2 strain included in the recommended vaccine composition for the 2014-15 influenza season didn’t match the A-H3N2 strains causing nearly half of all the reported cases of influenza studied thus far. On top of that, the A-H3N2 category has been the most prevalent of all predicted categories this year.

According to the CDC Weekly U.S. Influenza Surveillance Report, by the beginning of January 2015 46 states reported “widespread flu activity, with predominance of influenza A-H3N2 viruses.” Vaccine effectiveness, a measure obtained by comparing laboratory-confirmed cases of influenza with those cases who previously were vaccinated against influenza, was at a low 23%: of all 950 patients studied with confirmed influenza, 916 (96%) had an influenza A strain. Of those 916 cases, 842 (92%) were of influenza A-H3N2. 413 of those cases (49%) had previously been vaccinated against A-H3N2.

What happened? To understand the problem more comprehensively, let’s begin with the basic concepts of vaccination – what it is and how it works.

The Vaccine Cocktail:
A vaccine for influenza contains low-virulence versions of the virus suspended in solution with stabilizers such as sucrose, to prevent damage by environmental conditions such as temperature fluctuation, and preservatives such as thimerosil to prevent contamination. The virions here are able to reproduce but unable to cause disease – just enough to trip a body’s immune response.

The Immune Response:
Once the vaccine is introduced to the body, chemokines, small signal molecules that attract leukocytes (white blood cells) by serving as their directional cues, are secreted by cells near the site of infection. Different types of the congregated leukocytes will perform different functions to destroy the weak virions: they will mediate inflammatory response, generate antigens to mark viral particles and infected cells for endocytosis (cell “eating”), engulf and safely digest the marked particles and cells, and form a kind of “cellular memory,” through retaining bits of the defeated pathogen for future recognition. The memory left is the reason for vaccination. Because the viruses contained within the vaccine were attenuated or inactivated, they were easily destroyed. When the real form of the virus infiltrates from the outside, the leukocytes will remember how they did it.

How the viral strains are chosen:
Representatives of different sectors of the World Health Organization (WHO) convene twice per year to examine recent data on the antigenic and genetic characteristics of seasonal influenza viruses that affect humans, ultimately deciding on which strains to recommend for incorporation into vaccines. The data is received from the Global Influenza Surveillance and Response System (GISRS), an extensive network of just over 150 WHO laboratories and centers spread across the globe. The data draws from constant surveillance of potential cases of the virus; WHO laboratories accept samples from patients with flu-like symptoms in their respective regions and keep record of the determined identities of each strain. In this way the WHO is able to monitor the mutagenesis and evolution of a given strain, and subsequently gauge the danger one may possess. The GISRS utilizes Flunet, the WHO’s repository for data regarding the subtypes and relative abundancies of each identified instance of influenza virus, the predicted transmission routes of the virus, and more. Flunet data is updated weekly and is readily available to the public in easy-to-comprehend formats from the WHO’s website.
Once the WHO has determined the strains expected to become most predominant in the coming year, they issue formal recommendations for those strains to be incorporated into vaccine developments— one set for the northern hemisphere, and one set for the southern. Each country, however, makes the final call on what strains are legally required to be incorporated by developers within their borders. In the U.S., the Vaccines and Related Biological Products Advisory Committee (VRBPAC), part of the Food and Drug Administration (FDA), makes that decision.

Why the 2014 A-H3N2 strain was ineffective:

It’s not that the A-H3N2 strain included in the vaccine didn’t leave its intended mark on anyone’s immune system. Certainly, if a vaccinated individual became infected by the wild type strain of the A-H3N2 virus included in the vaccine, then under normal circumstances the individual would remain healthy. Two factors may have caused the relative abundance of non-vaccine influenza cases:

1. Genetic drift: Genetic drift is characterized by a population’s random fluctuation in the availability of certain traits. This is not to be confused with natural selection, because natural selection is a non-random phenomenon that depends on multiple factors, such as environmental conditions and adaptations/deficiencies. In the case of A-H3N2, it could be that the hosts of the vaccine A-H3N2 simply did not transmit the virus very well, preventing much of the strain from propagating. Other, similar strains may have successfully been transmitted to larger portions of the population, allowing those strains more hosts and thus a greater chance for even further transmittance and propagation. This potential cause is categorized as genetic drift because the factors influencing the propagation of the strains are independent of how fit any strain is to survive relative to another.

2. Mutagenesis: Mutagenesis is the introduction of a mutation into a set of genetic material. These can be caused by environmental factors, poor internal conditions, or by chance, any of the three causing interruption of the genetic replicative machinery. Most mutations are deleterious or lethal, but occasionally a mutation will assist the organism in some way. A non-lethal mutation, in the case of A-H3N2, may have allowed a non-vaccine strain of A-H3N2 to propagate more successfully than the vaccine strain, effectively out-competing the vaccine strain.

Moving Forward:

While the 2014 influenza vaccine remains largely ineffective against influenza A this year, virus tracking and prediction methods continue to improve in innovative ways.

DNA vaccination, for example, is a relatively new technique of immunization that involves transfection of a host genome with a plasmid containing a sequence coding for the antigen—the kind of “cellular memory mark” aforementioned— of interest. The plasmid integrates into the host genome, and is translated by the host cell machinery to produce a polypeptide antigen outside the host cell. DNA vaccination has merit for several reasons: plasmid vectors are comparatively easy to engineer, they have no potential to gain virulence as some attenuated viruses do, and are less temperature-sensitive than viruses, just to name a few.

Adeno-associated viruses (AAVs) are another fairly recent mode of carrying viral infection resistance genes into a host. As in DNA vaccination, the AAV’s genome can be modified to confer different kinds of resistance onto its host upon integration. AAVs are particularly attractive as such gene therapy vectors for their lack of pathogenicity, their long-term transgene expression (allows host cells to utilize the new resistance genes for a long period of time), their unique site-specificity (AAVs integrate their genetic material into the host’s at a specific DNA location—most viral genetic material does not appear to do this), and their low induction of the immune response.

There is also expansive research interest in discovering mutational patterns of viruses, places in the viral genome where mutations are less likely to be lethal—and perhaps even very genetically flexible, an explanation that would contribute to the ability of influenza to evolve as rapidly as it does. Indeed, it has been shown by the Bloom lab of the Fred Hutchinson Cancer Research Center that influenza is able to change many of the amino acids composing its hemagglutinin (HA) protein, a strategy effective in evading a host immune response because HA is a primary target of host antibodies. By remaining able to frequently alter the amino acid sequence of HA, it becomes more difficult for host antibodies to consistently recognize the virion. Further, understanding what points influenza has preference to mutate at allows virologists to better predict the manners in which it evolves.

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Understanding Influenza (Flu) Infection: An Influenza Virus Binds to a Respiratory Tract Cell

Illustration by Dan Higgins

Shedlock DJ, Weiner DB. DNA vaccination: antigen presentation and the induction of immunity. Journal of Leukocyte Biology vol. 88 no. 6 793-806
We Can Do It!

STUDENT EFFORTS TO ERADICATE SEXUAL ASSAULT ON CAMPUS

by Madi Hinze

Emma Sulkowicz’s “Carry That Weight” performance. Obama’s recent “It’s On Us” initiative. Rolling Stones’ article on University of Virginia, followed by a call for justice. Sexual assault on campus is one of the most widely discussed topics in the media today, and the pressure is now on universities themselves to provide a solution. While Portland State University has several initiatives in place to help prevent and handle sexual assault cases, there is still a debate around what more can be done.

As a result, student activism centering around sexual safety has been escalating at PSU in the form of student groups and listening forums that are dedicated to sharing methods of prevention and discussing how to put them into action.

One of the first steps to prevention, however, is recognizing the foundation of the problem.

“The root is gender norms; there’s a lot of literature on how we go from oppressions like sexism, along a continuum that includes gender stereotypes in the media and street harassment...to assault and rape,” says Jocelyn Wagman, co-president of the Student Alliance for Sexual Safety (SASS).

At the listening forum for sexual assault prevention hosted by Students Active for Ending Rape (SAFER) and Associated Students of Portland State University (ASPSU), the general consensus was that stereotypes are one of the primary issues that need to be addressed to help end sexual assault on campus.

Rape culture, the term most often used by media outlets, can carry an extreme connotation to some people. One student at the listening forum challenged this perception by saying, “Rape culture is everything; it’s a sexist joke, it’s someone following you, it’s feeling uncomfortable walking somewhere it’s not just rape.”

Another association frequently made with rape culture is its exclusivity to women.

“I have noticed from people talking to me about SASS that they often wonder why we’re focused on women, and it’s interesting because we aren’t, the word ‘woman’ isn’t even in our mission statement...Anyone of any gender is put in a box...and eventually that box leads to violence,” Wagman says.

There are multiple resources across campus that are actively involved in ending sexual assault, such as SAFER and SASS, but the Women’s Resource Center (WRC) continues to be one of the main providers of tools available to students.

“We [the WRC] are the only providers of direct service sexual assault advocacy on campus in partnership with the Queer Resource Center. We have a 30,000 student population and we only have one fulltime advocate...so we’re pretty busy,” says Jessica Amo, director of the WRC.

In addition to their advocacy program, which is classified as tertiary prevention (a long-term response that happens after a sexual assault), the WRC is involved with looking at campus policies and practices, including the response to and prevention of sexual violence. They also offer “secondary prevention in the form of outreach and awareness-raising events such as Take Back the Night,” Amo says.

Amo still acknowledges the lack of primary prevention on campus, however.

“We have a gap on campus in terms of having substantive ongoing primary prevention. I’ve been really excited to see more student energy around this, and I’d love to see student-led efforts that address these issues,” she adds.

The recent push for primary prevention spurred a mandatory Campus Climate Survey for all universities receiving government funding, and while the survey is expected to gather quantitative data regarding sexual assault on campus, SASS believes there should be more of a focus on personal experiences.

In response, SASS has drafted a survey that will allow students to share “experiences that aren’t captured by typical surveys [that] we feel are being left out of the conversation in ways that are detrimental to prevention initiatives,” Wagman says.

Once the responses have been recorded, SASS will then take the narratives received and turn them into scripts that will be performed in a Theater of the Oppressed format (a type of theater used to promote social change). The survey functions as a supplement to the Campus Climate Survey and will be distributed to other groups interested in supporting primary prevention programs.

Students looking to get involved with sexual safety on campus can participate in consent workshops at the WRC, attend events during Sexual Assault Awareness Month in April, become familiar with PSU’s code of conduct and sexual assault policy, join student groups such as SASS and SAFER, or even take a capstone class during Spring term that functions as an interactive primary prevention workshop.

The Institute of World Politics has the only graduate program in national security and international affairs that gives its students an understanding of American founding principles and the Western moral tradition.

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* Contact Jessica Amo at jamo@pdx.edu for more information on consent workshops and the Spring capstone class.
Imagine a world where your favorite A-list celebrities rigged the subway with C4 as casually as shooting a scene from their latest blockbuster, killing hundreds with wanton brutality. Where the hottest models live a life of casual sex and meaningless publicity by day just as readily as they execute and dismember their targets by night. Where terrorism is cinema and severed limbs are props. Where the carnage is fueled not by any given ideology, but by sheer, unremitting solipsism.

Glamorama, written by Bret Easton Ellis and published by Knopf in 1998, is a deeply satirical, persistently vapid thriller that revels in the excess of celebrity culture. Marrying the often numbing effects of a society saturated in consumerism with chilling depictions of violence, the novel, narrated by the spectacularly unreliable, largely unsympathetic, and possibly schizophrenic Victor Ward – model turned wannabe actor turned inadvertent terrorist – guides the reader through a surreal tapestry of conspiracy and horror blanketed under layer after layer of Hollywood flair and misdirection.

Anyone familiar with Ellis, who most famously penned 1985’s Less Than Zero and 1991’s American Psycho, will find themselves intimately familiar with much of the subject matter in Glamorama. Nihilism, excess, anxiety, an irreverent narrative structure, and a deliberate disconnect from the ‘real world’ – recurrent themes throughout Ellis’ body of work – operate in Glamorama with all the subtlety of a sledge hammer. As with American Psycho, Ellis painstakingly details the minutiae of a hyper-superficial world, dropping brand names and celebrity cameos in typically excessive fashion. The extreme to which Ellis details these meaningless signifiers is an exercise in density. The novel is cluttered to a chaotic extent with these trivialities to mirror Victor’s own perception of the morbid reality around him; a reality mired in a hallucinogenic haze of drugs, sex, misinformation, identity, conspiracy, and aimlessly misanthropic, mounting horror. Ellis’ obsessive focus on the superficial serves to distract the witless Victor as he grows increasingly involved with a terrorist cell led by former male model Bobby Hughes, simultaneously casting the reader’s own interpretation of events into a state of sardonic disarray.

Somewhere around the mid-way point in the novel, a “film crew” is introduced with little in the way of introduction, following our hapless protagonist from one ‘scene’ of his life to the next, establishing a uniquely dualistic meta-narrative that further complicates Victor’s unwitting involvement in increasingly gruesome acts of violence. To further discuss this unique literary mechanic runs the risk of venturing into spoiler territory, but it should be noted that this twist essentially marks the turning point of the novel. The bulk of the plot’s gravitas, as well as Ellis’ commentary, is substantiated through this device. Glamorama, like much of Ellis’ other work, is by no means for everyone. It is a polarizing, potentially frustrating read that will almost certainly put off impatient readers within the first hundred pages. Ellis wields redundancy, misinterpretation, and a highly stylized, somewhat alienating narrative voice as his authorial weapons of choice with no apologies. But existing fans of the author or those with an insatiable appetite for uniquely stylish postmodern fiction have much to look forward to in Glamorama.
A Review by **Alex Skousen**

Written by David Benioff, head writer for the everpopular Game of Thrones series on HBO, City of Thieves is the gripping mostly true story of the author's grandfather.

Set in Leningrad 1942 during the city's infamous 900 day siege against Nazi aggressors, we follow Lev (Benioff's grandfather) who is 17 near the beginning of the siege. He is detained by the NKVD for being out after curfew, and through a set of unusual circumstances, is paired with an army deserter named Kolya and ordered to find a dozen eggs for a wedding cake in the starved, bludgeoned city, or be executed for their collective crimes against the state.

The four page preface to the book explains how Benioff got the story from his grandfather, which adds depth and awe to the already adrenalinecoursed horrors depicted in the book.

While Benioff admits that some of the story is madeup (he quotes his grandfather telling him, "it was a long time ago, I don’t remember what I was wearing… you’re a writer, make it up") perhaps the most compelling aspect of the novel is that it's based in truth.

The stranger–than–fiction premise and extreme atrocities (cannibalism, rape, torture) depicted seem too fantastic to be real. On any given page the characters are in peril, yet the human aspect of Lev's pubescent sexual frustration, or Kolya's obsession with Russian literature as a university educated aspiring novelist is never lost, which is a testament to Benioff's writing ability.

A relatively short read at only 258 pages, the novel is hard to put down, the characters are immediately charming and rich, and the overall intensity is wonderfully juxtaposed to their quirks. The Russian stories of WWII don't get as much attention in the United States, possibly as a consequence of the Cold War, but stories such as these are important, and fascinating.

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A Review by **David Sherman**

The Great Book of Amber by Roger Zelazny is a series of fantasy novels split into 2 arcs across 5 books each. The first arc begins as the amnesiac Corwin wakes up lashed to a hospital bed. The book follows his escape from the hospital and his attempts to discover who he is. As you read into the story you are taken down a path of political intrigue, aristocratic schemes, war, magic, and familial revenge drama that would captivate Shakespeare and make Machiavelli blush.

We learn that the Amber universe is divided into two metaphysical worlds which are controlled by the two poles of order and chaos. Everything in between these places of order and chaos are shadow worlds (our earth included). Corwin and his royal family are able to traverse the infinite worlds though they have an inordinate penchant for the echo of our own earth. Zelazny really shines when his characters travel between these shadow worlds. The descriptions of which often give the feeling of traveling between a rainbow infused psilocybin trip and the beautiful perfection of a silver owl perched on a single tree under a balmy starry night.

Zelazny published the first book of the series in 1970. Because of this some of the elements of the Earth world will seem rustic to our generation or nostalgic to some older readers. Being set in a recent past before most of our readers were born gives it the feeling of reading an old Hemingway novel but once you get passed that it's still as vibrant and telling a story as any I have read.

Unfortunately due to the sheer size of the story there are few of us who have read or even heard of it unless you regularly seek out the classic fantasy novels of Robert Heinlein or the more contemporary Neil Gaiman. Additionally, the current trend in fantasy books seems to be to wait until someone gets a TV or movie deal before going about reading the great novels. It took 15 years after Game of Thrones was released before the first TV version hit HBO. It only took 4 years for Harry Potter to go from its initial release to its first movie. Unfortunately Zelazny died in 1995, at age 58, from kidney failure and colorectal cancer so it is unlikely that we’ll see his work make it onto the silver screen.
The Dispossessed
by Ursula K. Le Guin

The Dispossessed is a 1974 science fiction novel about the philosophical, political, and intellectual transformation of Shevek, a brilliant physicist from the planet Anarres. The novel is set between two planets, the politically divided Urras and the collectivist Anarres. Anarres represents a culture of cooperation and austerity, while Urras is separated in three states—the United States is symbolized by A-10, the capitalist state characterized by its attention to material wealth, the Soviet Union is symbolized by Thu, an oppressive authoritarian state, and Benbili remains the underdeveloped state at the mercy of the more advanced two. The two planets refer to each other as their “moon.”

Anarres began as a faction of the followers of Odo, an anarchist philosopher who promoted ideas of collectivism and anti-propertarianism. Her followers, the Odonians, were able to generate enough popularity and civil unrest that the Urrasti governments allowed them to colonize their “moon.”

Shevek’s work as a physicist revolves around his development of a general theory of time. Throughout the novel he explores concepts of instantaneous communication and the nature of motion as a relationship between space and time. Taking advantage of his intellectual reputation, he is able to travel to Urras to teach in university and advance his research, where he acts as the reader's first-hand mode of cultural comparison between Anarres and the states of Urras. He comes to understand that the holistic, collectivist ideals of Anarres are slowly fading, and finds motivation for his travel to Urras in closing the political disparity that his home nation was born of.

While at times difficult to follow (both in chronology and concept), The Dispossessed makes a unique contribution the utopian sub-genre of science fiction. The novel incorporates heavy themes of temporal philosophy, political philosophy, metaphysics and ethics. In addition, the novel explores elements of theoretical physics and mathematics. Not one political or social culture is presented as supreme, allowing the reader to draw realistic comparisons between ideals. LeGuin experiments with the socio-political cultures she’s modeled from history by placing the differing nations in various proximities: she writes through the lens of an individual Anarresti in contact with all three states of Urras, investigates the political ideals through the proxy war in Benbili started over a Thu-supported revolutionary outbreak by the oppressed Benbilians (an allegory of the Vietnam War), and explains the fictional historical context of the separation of Anarres from Urras, among other methods of contrast.

A flaw in The Dispossessed could be that the political caricatures LeGuin depicts are notably radical, subtracting from the amount of realism or relatability otherwise found in her writing. In total, however, The Dispossessed is an intriguing and complex read in every domain of thought it reaches, from the scientific to the political.

Death with Dignity
by Jordan Earls

In early October, Brittany Maynard couldn’t help but chuckle as she told CBS This Morning that she didn’t want to die. November 19 would have marked her thirtieth birthday. Last spring Maynard was diagnosed with a terminal brain cancer, glioblastoma multiforme, and was told she had only six months to live. Maynard never made it to her thirtieth birthday. Instead, she ended her life using Oregon’s Death with Dignity Act on November 1.

“If anyone wants to give me a magical cure and save my life so that I can have children with my husband… You know, I will take them up on it,” Maynard remarked.

Maynard used her remaining time to advocate for death with dignity rights. Death with dignity acts have been passed in three states; Oregon, Washington, and Vermont. On November 13th New Jersey’s State Assembly passed the Aid in Dying for the Terminally Ill Act.

The legislation passed in all four states sets differentiations between euthanasia, physician-assisted suicide and Death with Dignity. In accordance, lethal injection is considered a Class A felony. In an Oregon provision it’s ruled that patients cannot receive any sort of assistance in consuming their lethal medication if they are rendered physically incapable.

Staunchly conservative eighty-four-year old Raymond Carnay of Eugene opposed Oregon’s Death with Dignity act until he was diagnosed with throat cancer in 2007. His doctor told him that the only treatment was to have his voice box removed. A proud former radio announcer, Carnay refused.

“My doctor said, ‘Ray, I want you to be prepared. You are going to have a horrendous, painful death,’” Carnay told filmmakers during the making of the documentary, How to Die in Oregon.

Carnay’s condition deteriorated quickly. Left physically unable to give himself the lethal dose of Secobarbital, he died at Sacred Heart Hospital on October 5, 2007. Carnay is not the lone patient to die from his underlying disease because he was physically incapable of ending his life.

According to annual statistical reports produced by the Oregon Department of Human Services, physicians in Oregon had written a total of 1,173 lethal prescriptions since the act was passed in 1997 through the end of 2013. Of these, 752 patients died after ingesting their prescription while 288 patients died from their underlying diseases.

Despite evidence that the provisions aimed to prevent euthanasia and suicide, the use of prescribed lethal medications is still largely considered physician-assisted suicide. The first annual report produced by ODHS elected to use the term ‘physician-assisted suicide’ rather than ‘death with dignity’ because, the report says, it’s the term widely used by the public.

Opponents argue it is ultimately suicide and that flawed administration of the act hasn’t provided enough preventative measures. Not only could elders and poor be abused but the state could enable those with serious mental illnesses.

The New Jersey Alliance Against Doctor Prescribed Suicide laments that patients are not required to consult a psychiatrist. They purport that less than 7% of Oregonians seeking lethal prescriptions are referred for psychiatric
evaluation. They assert that this provides people with treatable depression access to life-ending prescriptions.

Cases like Cerny's alarm opposing organizations who worry that patients may not be in the best mindset to make such decisions. It concerns them that people who have objected to physician-assisted suicide for years, when faced with a moment of adversity, can turn against what they believe without a second thought.

“I think, certainly, that as physicians we want to help and assist our patients in their suffering. Alleviate, but not prescribe the suicide. I don’t think there’s dignity in suicide,” Dr. Ana Gomes, New Jersey General Practitioner, told New Jersey Today. Death with dignity advocates argue that those applying for lethal prescriptions aren’t simply facing a moment of adversity and that the decisions aren’t made without a second thought. Death with dignity advocates, such as the Death with Dignity National Center, insist that it shouldn’t be called “assisted suicide,” but “assisted dying.” The patient, they say, is seeking to hasten an already impending death in order to end their suffering, whereas someone who commits suicide is seeking a permanent end to a foreseeably open-ended life. In addition, the center cites the act which permits patients to rescind their request at any point without regard to moment of ingestion.

Still, Dr. Gomes is not alone in her stance against death with dignity. Even though death with dignity has been legal in Oregon for seven-teen years, only 62 physicians wrote prescriptions in 2013. Furthermore, many patients reported to their prescribing physician that they had to seek out multiple doctors to have their request fulfilled. Under Oregon law, both physicians and health-care systems can refuse to participate in the act. “The dignified way is to take care of your patients, be their advocate, help them with their suffering and we have palliative care. Many institutions are available and do a wonderful job. I think that’s where we need to have our focus,” Dr. Gomes added.

Opponents of death with dignity often offer up palliative care as an alternative to prematurely ending a life. While palliative care centers provide compassion and pain medication to alleviate the dying, some patients aren’t afforded all of their options by doctors. According to a 2014 Mayo Clinic study of 95 physicians and nurse practitioners working with heart failure patients, 52 percent of physicians reported hesitation to initiate palliative care discussion with patients.

Of that percent, 21 percent said they didn’t believe the patients were ready to have the conversation, 11 percent felt uncomfortable bringing it up and 9 percent said they felt it would destroy the patient’s sense of hope. According to American Heart Association statistics, half of the 5 million people diagnosed with heart failure will die within five years of diagnosis. Perhaps if there’s anything that might be agreed upon, it’s that death with dignity has illuminated how difficult of a subject death is to cope with, let alone talk about. While our own health care officials avoid the topic with their patients, self-appointed talking heads within our country are left to decide the ethics of dying. Perhaps it’s too close and too personal to hold a real, insightful debate.

During her interview with CBS This Morning, Maynard was asked whether her loved ones had asked her to not use death with dignity. Whether her loved ones had begged her for just one more day and, before the interviewer could anything more, Maynard cut in.

“My mother is not selfish enough to say, ‘I want one more day where you’re suffering,’” she responded. Glioblastoma multiforme can cause migraines so painful they induce vomiting, nausea, seizures, memory loss and hemiparesis—paralysis of the entire left or right side of the body. It is the most aggressive type of brain tumor according to the American Brain Tumor Association. Median survival while undergoing radiation therapy is about 14.6 months.

Faced with her options, Maynard moved from California to Oregon in order to seek a swifter and less painful death. ODHS doesn’t collect information on length of patient residency for the annual statistical reports, so there’s no official measure of those who, like Maynard, came to Oregon from out–of–state. However, because there’s no timetable requirement, establishing residency in Oregon isn’t necessarily difficult. A person needs only a state issued ID, a state voter registration card, a recent state tax return or proof of renting or owning property in Oregon. Getting a state issued ID can take as little as five business days.

The biggest loss, Maynard bemoaned, was the opportunity to have a family and create a legacy through her children. However, she said she wasn’t afraid of making Death with Dignity her legacy before she departed from her friends and family.

“The is avoid to attach my name to what I think is a right that should belong to all terminally ill Americans. I really do,” she said. ■
The Mayor’s Challenge
ENDING VETERAN HOMELESSNESS
by Jeremy King

“In our society, every individual, and every veteran, should have a home”, said Ralph Elihu Becker Jr., mayor of Salt Lake City, Utah, in a press conference on June 4th, 2014 in which First Lady Michelle Obama announced an ambitious initiative aimed at ending veteran homelessness in the United States by the end of 2015.

“Roughly 58,000 veterans are experiencing homelessness in America today”, said the First Lady as she addressed the room. “...even one homeless veteran is a shame, and the fact that we have 58,000 is a moral outrage. We should all be horrified.”

The Obama Administration first proposed an initiative to end veteran homelessness by 2015 in 2009. In the years following this initial proposal, statistics taken from the National Alliance to End Homelessness’ website estimate that there has been a 25% decrease of veteran homelessness throughout the U.S. The more recent initiative, referred to as The Mayor’s Challenge to End Veteran Homelessness, is an effort to hasten the eradication of veteran homelessness through a more concentrated city and state–wide alliance.

The response from the room is appropriately resounding and resoundingly one of solidarity as those gathered burst into applause. The very notion of any man or woman who served our country in the line of duty coming home only to find themselves thrust into the throes of destitution is, after all, an affront to the patriotic ideals that serve as the foundation for our country. So how, then, have things gotten so bad?

According to the National Coalition for Homeless Veterans, “12% of the homeless adult population are veterans”, with an additionally estimated 1.4 million veterans considered “...at risk of homelessness due to poverty, lack of support networks, and dismal living conditions in overcrowded or substandard housing.”

In addressing why many veterans are homeless, the Coalition states that “...a large number of displaced and at-risk veterans live with lingering effects of post-traumatic stress disorder (PTSD) and substance abuse, which are compounded by a lack of family and social support networks.”

For many, homelessness, veteran or otherwise, is an inevitable and deeply intrinsic aspect of our modern lives. And here in Portland, we are often confronted with the reality of homelessness on a daily basis; more so than almost any other city in the United City, as it turns out.

According to Our Homeless Crisis: A close look in Oregon starts this weekend, an article written by Anna Griffin for the Oregonian on January 16th, 2015 and the first story published in what is to be an ongoing project to examine the issue of homelessness throughout Oregon, “...the crisis of homelessness is unusually visible here. A higher percentage of long-term homeless live outside here than almost anywhere in the United States. Illegal camping has become the accepted and practically government–endorsed practice.”

In addition to Portland’s general lack of emergency shelter spaces in which the homeless may find refuge, the article cites formerly proposed and subsequently failed initiatives to end homelessness as another explanation as to why the homeless issue in Portland is so visible; “A decade ago, federal leaders made a deal with more than 300 U.S. cities: Let’s work together to end chronic homelessness. Most failed. Nowhere has that failure been more obvious or galling than Portland.”

So it comes as no surprise that the Mayor’s Challenge, the most recently proposed initiative, has garnered its fair share of skepticism and cynicism. What’s so different about this one, where so many others have failed?

For starters, there’s the fact that one major city has already ended the issue of veteran homelessness a full year ahead of schedule; according to the official website for the city of New Orleans in a statement taken January 7th, 2015, Mayor Mitch Landrieu “...put together a coalition of nonprofits, homeless service providers, U.S. service members and Veterans, and federal, state, and local agencies – a coalition that has now permanently housed 227 homeless Veterans in New Orleans.”

Salt Lake City, meanwhile, is hot on New Orleans’ trail, having been well on its way to eradicating homelessness for nearly a decade. In the wake of the city’s proposed ‘ten year plan to end chronic homelessness’, an ambitious effort that went into effect on January 1, 2006, the issue of chronic homelessness has been handled so well that, according to an article written by Kevin Fagan on June 29th, 2014 for the online publication SFGate entitled Salt Lake City a model for S.F. on homelessness, “Salt Lake’s hard-core street population shrank so drastically it is expected to be statistically gone by next year”.

On August 12th, 2014, an interactive map outlining and charting the progress of the effort to end veteran homelessness throughout the United States was added to the National Alliance to End Homelessness’ website.

The initiative has garnered a great deal of support across the states, with a number of cities actively working towards achieving this lofty goal, and President Obama further addressed the issue on January 23, 2015 at the annual U.S Conference of Mayor’s Winter Meeting, which hosted “...over 200 bipartisan mayors”, according to a fact sheet released by the White House.

While homelessness remains particularly pervasive here in Portland, and Portland has yet to officially commit to the Mayor’s Challenge, it’s hard not to feel some measure of optimism at what has been accomplished throughout the rest of the country during this period.

...when a Veteran comes home to sleep on the ground, it is unacceptable that he should ever have to sleep on it”, Michelle Obama said in the closing remarks of that June 4th, 2014 press conference, “So let’s get to work.”

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