



THE SCRIBLERIAN

Fall 2012 Edition

Sponsored by the English Department and the Braithwaite Writing Center, the Scriblerian is a writing contest and on-line journal for students by students. Revived during Fall Semester 2004 after a two-year hiatus, the essay competition is organized each semester by Writing Center tutors for ENGL 1010 and 2010 students. Winning essays are published on-line on the English Department website and past winners were also published in the print textbook SUU Guide to English Composition 2010-2011. The Fall 2012 Scriblerian Contest was planned and supervised by Chair Wes Van de Water with the help of Abbie Pipes, James Pollard, Jared Komoroski, Rebecca Tuft, and Violet Wager. A total of 24 essays were submitted for the Fall 2012 contest.

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Expressive- English 1010

1st Place Winner: Ryan M. Bailey, "Chasing the Dragon"

For Dr. Julia Combs

At it again. It seems like it will never end. The turbo of our F-350 was humming as we sped up the highway towards Camp Williams. We'd been chasing the dragon all summer, and no matter how many times we got her under control, she always came back. It only takes one storm to blow in and send lightning dancing through the sky before she rises. It starts out as a mere smolder or some small flames, but then the wind decides to play, and before you know it thousands and thousands of acres of forest are encircled with flames that can only be described as hell on earth. Most of the world calls this phenomenon forest fire, but those of us who battle her know what she really is: the dragon. Fire is a strange creature. That means as a firefighter, one never knows what to expect.

The average day for a firefighter is pretty simple, a game of waiting. We wait for winter to end, so we have some landscape to work with. Then we wait to hear when we start work. When we finally get to work, we show up and do busy work, waiting for a fire call from the dispatch center. We hope these calls come soon, but this waiting game can take hours, days, weeks, and even months before they come. The fire calls will eventually come though. They always do. When a firefighter is at home, local fires are the priority. Where I work, that consists of small, one-tree fires, usually started by lightning. We spend a day or two securing and eliminating all the flames and heat we find and collect all the overtime we can while we are on our own district. Chasing smoke is our main task, and we do that until we get the call for a two-week tour of duty, where we can go on the "big boy" fires. That's the gig, for the entire summer. We try and stay busy, we wait, and when we are needed, the call comes.

This time the call came from the State of Utah, to assist with the suppression of the Pinion Fire at Camp Williams Army base. As we came into the Salt Lake Valley, the sky had been painted grey. It seemed like it had been that way the entire summer. Due to the lack of moisture, fire has been ripping for months on end. First Arizona and New Mexico burned, then Colorado, and now it was Utah and Idaho's turn.

The adrenaline started to fill my body. The Pinion fire was fairly large, three hundred acres and burning in grass and pinion-juniper trees. I shouldn't have been nervous. I've been on much larger fires and fought them through grass and pinion many times, but this time it was a little different. As we drove through the security of the base, soldiers saluted us. We parked at base camp, and I immediately evacuated the vehicle, ready to climb to the highest mountain if necessary. I, instead, went to a table and sat down for a briefing of the incident. A firefighter, who seemed like he could've been fighting the dragon when the dinosaurs roamed the earth, sat down and began to tell us the details of the fire.

Lightning, no surprise there, started it; the Wasatch Front had just been plastered by over two hundred lightning strikes just days previous. It was burning exclusively on the base, which was good, and potentially disastrous. Good because it wasn't threatening Herriman or Saratoga Springs, and potentially disastrous because it was moving towards an impact area on the base full of thousands of unexploded artillery that was used for training purposes. After the briefing concluded, "Watch where you step," was the only advice the old man muttered to us. The adrenaline began surging in me even more than before.

The crew was rounded up, shoved backed into the vehicles, and began to move closer to the target. The drive in was pretty mild; all the fuels were nuked out black, completely burnt to the ground. As we followed the column of smoke, we ran into our division supervisor. He informed us that due to the

efforts of the firefighters already there, along with assistance from helicopters and single engine air tanker (SEATS), the fire was nearly contained and winding down. There wouldn't be a lot of work to do, and we might be in charge of monitoring the fire for the duration of the incident. The adrenaline that had previously occupied every fiber of my being was quickly replaced with resentment and disappointment, as we now seemed destined to "babysit," or sit and watch a dead fire. My only thoughts were, there goes our chance at exciting fire behavior and sixteen-hour days. We hiked up the hill towards the other crews. Armed with shovels, hoes, chainsaws, and pulaskis we engaged the fire line with the goal of securing it before the wind decided to change. I had a pulaski myself, an ax that has been fixed with a hoe opposite the blade of the ax. It destroyed any root that dared threaten the fire line. The work was almost pointless due to the fact that a bulldozer had just put a twelve foot fire line days before. With the assistance of some fire engines, we eliminated the three, and only, smokes we found. A couple hours passed with no change, the line was secured, and we began to settle into our role as the babysitters. I decided to do a little recon hike, and ran into another crew. The crew boss and I began to shoot the breeze, but it was hard for me to pay attention because I kept thinking about how much he looked like Ralph Macchio from the Karate Kid. Get your head in the game, I screamed at myself in my mind, but it was no use. This was a dead fire, we're going to sit here for who knows how long, and I was starting to get a little hungry. Just as my guard had nearly been laid down, a fifty-mile per hour wind shot up like a bat out of hell. Forget that, it was more like a blue whale out of hell. I checked my balance and popped my hand to the top of my head to save my hard hat from becoming like a balloon that a four-year-old accidentally lets go and never sees again. The wind caused a green island of trees to torch out; good news was that this torching was fifty-plus feet away from the fire line. The wind left for about 30 seconds, and then it came back with a vengeance, this time at sixty miles per hour. Instead of gusts it was a constant flow of wind, forcing its will on those trees that began to surge orange and black with fire. The dragon had come back.

"Spot, it's spotting over the line," was all I could hear over the wind. Squeals over the radio began coming in great force. I looked toward the top of the mountain, but I couldn't see the spot fire. The wind died down, and it seemed like the closest crew would be able to catch the fire before it got out of control. The dragon, however, she had different plans. She had been toying with us the whole time. The wind returned, and I watched as ten or more acres of trees were completely engulfed with the biggest flames I had ever seen. Then the fire grew legs and began to run; there was no catching her now.

We began to run as well, toward the vehicles. The fire had gobbled up more than five hundred acres in the ten minutes it took us to gather back up at the trucks. It was time to reevaluate the plan: so much for a dead fire. The other crews began to file in as well. We looked at our fellow fighters as they hiked in, wearing the same yellow shirts and green pants, caked in the same ash that we all knew would take hours in the shower to get rid of. The Copenhagen smiles began to show. Bewilderment was upon everyone. We waited and watched as hundreds, and then thousands of acres of forest were chewed up by a giant wall of flame. We all knew what this meant: two weeks of sixteen-hour days, shoulders that would feel like they were just massaged with sand paper due to hauling our packs for that long, and of course it meant we got our wish, no more dead fire. We got to fight the beast, for at least one more day. The night would be spent burning off a road with torches in hopes it would slow the dragon while the cooler air was available. Only time and the wind would tell if this tactic would work.

Sometimes, we are able to destroy the dragon, as in this case, we beat her into submission. Like I said earlier though, she always comes back. If there was a sure fire way to knock her down and keep her there, it would be implemented on every forest fire. However, the dragon is never the same, she has a mind of her own, and there is no guessing where or when she'll reappear. So as a firefighter I'll do what I do best, wait for her.

2nd Place Winner: Megan Benner, "Alone in the Crowd"

For Professor Eric Morrow

Mrs. Curtis was not only an English teacher, but also the director of speech and debate club. She had a booming voice and raging red hair. Many compared her to a dragon, not only because of her wild hair but because she had a snappy do-as-I-say attitude for those freshmen who slacked off. Because of Mrs. Curtis' student eating reputation, I was intimidated entering her classroom the first day of high school. However unlike other teachers, she opened my eyes to the influence a book can have on its reader, though its threaded theme. I never was a fan of reading. English is not my strongest subject. I have the vocabulary and spelling of a fourth grader, not to mention my fear of reading out loud. But I was maintaining a solid B, which I was very proud of, in my freshman English class first semester. However, Mrs. Curtis' next challenge for our class was *Of Mice and Men*. But after how long and torturous the *Odyssey* was, the feeling of holding the small bindings of our new read with one hand was wonderful.

The novel, *Of Mice and Men*, similar to life, illustrates true friendship through the characters' actions. The main characters Lenny and George travel together during the Great Depression in search of money to better their lives. Although Lenny has a mental disability, George stays loyal to his friend. George does not keep this friendship because he is obligated to, out of pity for Lenny and his disability, but because George himself needs a friend and Lenny loved George unconditionally like true friends do. I had a couple of these "true friends" going into high school but I had no clue I would form countless more throughout my journey.

I am not going to lie. High school was different. Clicky and humungous. Unlike my middle school, everyone was not friendly. I was thankful I had a group early on to hang out with, eat lunch by, and complain about homework to. Without those initial friends I know I would have felt lost and lonely.

"What are you doing after class?" my friend Maddie asked.

"I don't know, the usually. Probably just sit outside the dome with Lacy and eat lunch. Why? Do we have something due next period we should be working on?"

"No! You stress yourself out too easily," she laughed. "I was wondering if you'd come to the Ban the R-Word Assembly with me. I don't want to go alone. There will be free Pat & Oscar breadsticks?"

I pondered, "Of course! It's in the New Gym right? I think I've seen signs around campus. I'll go and maybe Lacy will come too!"

Lacy did not come. Maddie and I took a breadstick on our way in and sat down. Only the bottom middle section was occupied, which made the gym feel extra empty. Homemade square posters hung around the walls. I was glad I came to support because Maddie had been talking about joining Best Buddies during class nonstop. She was very passionate about the club and constantly chatted about the friendships she was making with mentally challenged students during Best Buddies meetings. We were introduced to the student club president Natasha and many other active members at the start of the assembly. Speeches were prepared, to inform the audience of the emotions felt by the use of derogatory phrases such as "you're gay" and "you're retarded." I was very moved and found myself remembering

when I would joke around calling a friend retarded. I had to think, was I really replacing the word retarded for stupid. Did that mean I was insinuating that a “retarded” human was also stupid? As defined,

stupidity comes from the lack of intelligence or common sense, not from a disability someone was born with. I compared the R-word to someone calling me blonde. Yes, I am blonde but by using this stereotype, they are trying to hurt my feelings by calling me stupid. I needed to stop this wild fire of hurtful words. I needed to stick up for my peers and new friends in Best Buddies club.

At the end of the assembly, right before the obnoxious lunch bell was about to ring, Natasha and a few Best Buddies students held up a paper banner with the words “BAN THE R-WORD” bolded in black paint. They were asking students to sign the banner and promise to pledge to eliminate the use of derogatory words. I signed.

A couple weeks later I attended my first homecoming dance. The gym was painted with bright lights. My ears echoed with popular pop music and awkward conversations. I felt like I was in a sea of fish with older unfamiliar faces taking pictures to my left, munching on sugar cookies and lemonade to my right, and straight in front of me a DJ surrounded by mobs of dancing shadows in tight sparkly dresses and button down shirts paired with matching ties. My friends scattered with their dates as I stood hand in hand with mine.

“Hey Meg wanna dance?” Usher’s voice filled the gym. I did not hesitate because I loved the song. “I’d love too!”

We pushed our way into the crowd not too far from the membrane of the mob. An hour passed, many songs had been played and I was pooped. Heels can tire a dancing diva out. I gathered up the strength to

ask Garth if we should get some water, when out of the corner of my eye I spotted Manuel. Manuel stood

at six feet; one inch taller than myself in heels. He looked pretty spiffy, taking formal attire to the extreme

with a full on black and white prom costume. His roots were in Mexico City, Mexico therefore his accent was thick in Spanglish. He was an autistic student I had met through Maddie during the Ban the R-Word Assembly. He was throwing his body all over the place, in time to the music, in a circle with other members and adults from Best Buddies club. I waved and he ran over to me. Garth looked threatened

when Manuel forcefully asked me to dance. I waved Garth off to get something to drink and let Manuel jump around me a few times. His face grew brighter as I eventually mimicked his awkward jumping.

“Are you having fun at the dance Manuel?” I asked.

“Ya, si! I like dancing with you!” he replied breathing hard still jumping up and down.

“Are you having fun with your friends Manuel?” I questioned him again, louder this time, trying to get my voice over the music.

He ignored me, threw his head back and continued jumping but added to his dance moves—hand clapping. An adult from the Best Buddies circle calmly walked over to us. She placed her hand on his shoulder and pointed over back to his group. In that moment he opened his arms and bear hugged me. He followed the woman back to his friends with a fat smile painted all over his face.

I was alone now and I felt uncomfortable, hoping Garth would return soon or maybe I would run into a friend. Consciously I was wondering, were those really Manuel’s “friends” dancing in that circle? The group only consisted of mentally challenged students and adults. Sure, some of the group must have been his friends, but they were more likely forced friendships because of their similar situations. If I felt alone in a gym, full of people who were my fellow classmates, then Manuel must have felt alone in his secluded circle. Just because someone is surrounded by peers does not mean they are getting the love and friendship they need to be happy.

Garth finally returned. He was jealous and I was tired from constant jumping, so we took a 20- minute break. After the dance I forgot about Manuel and only played over my remembrance of Garth and my romantic night like a digital camera to my girlfriends. I did not realize then how significant my role in Manuel’s happiness was until I found myself back in Mrs. Curtis’ classroom discussing the theme of, *Of Mice and Men*.

“Children, what is John Steinbeck’s message in this novel?” The heated discussion began—students flung their hands in the air and supported their ideas with Steinbeck’s words. Our class settled down with the theme of loneliness/friendship. Lenny and George built a loyal friendship throughout the novel. George stood up for Lenny and loved him despite his disability. George treated Lenny equally. They both strived for the same goal of living the American Dream, and George believed Lenny could get there just as much as he thought he himself could. However, the typical rancher life is lonely. And most mentally challenged humans are outcasts, looked down to, and picked on. This is much like the cliques at my high school. But, George and Lenny’s relationship was true—selfless and honest.

I found a correlation between the book and my current life. A true relationship is produced by continuous love, honesty, and loyalty. Friendship does not discriminate by differences. Manuel does not make up his stereotype of a retard—he is a human being just like me, who also feels loneliness. He gave to me the same happiness I gave to him that night at the dance. We both felt lonely and secluded but together we felt at ease and enjoyed a fun night. This message I plan on carrying with me for as long as I live. And just like *Of Mice and Men*, you’ve always got a friend in me because “a guy needs somebody-to be near him. A guy goes nuts if he ain't got nobody. Don't make no difference who the guy is, long's he's with you. I tell ya, I tell ya a guy gets too lonely an' he gets sick” (80).

Work Cited

Steinbeck, John. *Of Mice and Men*. New York, N.Y., U.S.A: Penguin Books, 1994. Print.

Honorable Mention: Amy Greenwood, "Downtown Freak Show"
For Professor Charles Cuthberston

Speeding on a dimly lit downtown side street, I peer into the rearview mirror to see if I'm being followed. My heart is pounding and I'm shaking all over. "Shit!" I notice there is a huge chunk of my hair that's been pulled out. It's knotted and tangled into a rat's nest on the side of my head. At this point I just want to get home, so I'm speeding in that direction. Thank God I have Dan's damn car.

There I was, just a few short hours before getting ready for work, carefully putting on eyeliner and mascara, making sure every hair lay just so around my face. The phone rang. It was my good for nothing boyfriend, who, as usual, had a thousand and one excuses as to why he couldn't drive me to work that night. I plopped down on the couch, arms crossed, pouting and annoyed. That's when my roommate Dan walked in. He was definitely an interesting person. Dan's dream was to invent something amazing. Often we wrote random words on 3x5 cards then put them together and, instant invention. My personal favorite was carbon fiber scrub brush. Dan was a nervous person by nature who often paced about the house muttering and smoking. He actually smoked so much it had turned his mustache, lips and tongue a permanent shade of brownish yellow.

"Not going to work, again?" he asked. His condescending tone hurt my feelings. "You could drive me," I replied, and gave him my best puppy dog eyes. "If I don't go, I'll get fired," I told him. "Then how will I pay my half of next month's rent?" Dan nervously lit up a smoke and threw me his car keys. "If anything happens to my car..." I was out the door before he could even finish.

Dan's Cadillac was parked out in front of our apartment. I loved to drive it. It made me feel free. It had been given to him as a gift from his parents. An eighties something relic in mint condition, long, boxy, and maroon with chrome all around. The interior matched the exterior, a deep red, with wood like paneling, soft leather seats, and power everything. Driving it was like driving a cloud, all billowy and soft. People seemed to notice it too; I felt good behind the wheel.

I got in, started her up, and drove until I'd made my way downtown. I had always loved the energy there even though it's seedy and dirty. The lights, the signs, the people had a vibe I levitated to like a moth to a flame. Suddenly, I slammed on the brakes, almost running a red light I came to a screeching halt. The light turned green, and I made a left into the parking lot where I worked.

Inside the bar faces lit up left and right as I entered, I lived for my work and everyone knew me. The locals inside greeted me one by one. I made my way into the office. It's drab, dark, and in the distance I could hear the jukebox playing a familiar tune. I put my things inside my locker, grabbed my till, and got to work. All night long, I mixed drinks and they drank drinks. One by one, I watched everyone in the room lose their inhibitions. One by one, their senses became dull, they got loud and rowdy. I had seen it all a thousand times before. Closing time came slowly, but it came. When it did, I was happy. I remembered Dan's Cadillac, and knew I'd enjoy the ride home. Little did I know what was to come.

Standing in a completely dark, quiet bar, I waited for the green light on the alarm system to come on so I could put in the code that would set it. As soon as it appeared, I quickly pushed #2 and began my thirty second escape. I locked the back door, and as the cool night air hit my face I knew I was free. Dan's Cadillac was all alone in the parking lot now, and the street lights glowed in the shiny chrome parts. I got

in, started her up and drove away. What a shame to feel so free and have nowhere to go but home. I decided to pull over and call my boyfriend. The streets were desolate and empty as I turned into the twenty four hour gas station. I got out of Dan's Cadillac to make my call, leaving the driver's side door open, engine running and lights on. The number I dialed began to ring and the countless options for the rest of the evening swam through my thoughts. The possibilities were endless. Suddenly, I felt startled and jumped at the sight of a man to my left. He motioned to me with one arm to stop, while the other arm was behind his back, and I knew he had a gun. I was paralyzed with fear, completely motionless and frozen.

"I just want to use your car lady," he said. I felt afraid; I just wanted him to go away. I realized how easy I had made it for him to escape with Dan's car, and my fear turned to anger. There was no way I was going to let him get away without a fight. The man's eyes twinkled with delight when he sat down in the driver's seat. An evil grin appeared on his face. I ran around to the passenger side and opened the door. He put it in reverse and began to roll back slowly toward the street. Running alongside, I begged and pleaded. "Please don't take this car mister, it's not even mine." With that he hit the break and came to a jerking stop. "You want to come along?" I was so desperate, I said yes, and jumped in.

Without a plan, and without thinking, I was in the car. That's when I noticed he really didn't have a gun. My anger sparked at my toes, and when it reached my ears, I felt hot and I had had enough. In one graceful motion, I snatched the keys out of the ignition and threw them out onto the asphalt of the brightly lit gas station. The man looked stunned. He realized what I had done as I tried to make my exit. I was too slow, and he got a handful of my hair. I could feel and hear the hair being pulled from my scalp; it sounded like a crackling fire on my head, and it felt like one too. He threatened to kill me, so I screamed. My life flashed before my eyes as the blood curdling, glass shattering scream escaped my lips.

All I remembered is that he disappeared; ran off in fear, I guess. I was left in the car, which was still rolling backwards, face down on the front seat. Realizing the car was still in motion, I reached down and put my hand on the brake pedal, then put the car in park. Just in time too, before I rolled out into the street. In complete shock, I got out of the car, and with an air of disbelief in my demeanor, I retrieved my keys. Unexpectedly, the gas station attendant ran up to me. "Are you okay? That was crazy, I saw the whole thing." Out of pure frustration, I barked, "Thanks for the help!" "Sit tight," he said, "I called the cops." *Oh hell no*, crossed my mind, as I picked up the pace, jumped in the Cadillac and drove away.

Speeding on a dimly lit downtown side street, I peered into the rearview mirror to see if I was being followed. My heart was pounding and I was shaking all over. "Shit!" I noticed there was a huge chunk of my hair that had been pulled out. It was knotted and tangled into a rat's nest on the side of my head. At this point I just wanted to get home, so I was speeding in that direction.

Thank God I have Dan's damn car.

Argumentative- English 2010

1st Place Winner: Whitney Harrison, "The Effects of Sleep Deprivation on the Body"

For Dr. Julia Combs

Sleep is a complex biological process that is an essential component of human health and well-being. The way that sleep is regulated in the body is similar to the manner in which other necessary bodily functions are controlled, such as eating and breathing. Sleep plays a vital role in promoting physical, mental, and emotional health. Receiving adequate sleep each night ensures proper maintenance of bodily processes. Unfortunately, sleep deprivation is becoming an increasingly common problem in society today. Many individuals in society suffer from illnesses resulting in severe sleep loss. Many other individuals, however, disregard the need for sleep in order to accommodate the daily activities of life. Sleep deprivation is becoming especially prevalent as longer working hours and longer work shifts are becoming an acceptable part of world culture (AlDabal & BaHammam, 2011). Insufficient sleep time is particularly common in undergraduate students. Pace-Schott et al. (2009) found that the average sleep duration among university students has drastically decreased over the last 30 years. Countless studies have been performed that indicate bodily organs and systems are greatly affected by such sleep loss. Sleep deprivation is a common problem in society and can have serious consequences on both physical and mental health.

Functions of Sleep

Sleep is a state of rest in which consciousness and responsiveness are greatly decreased. Sleep consists of two stages, rapid eye movement (REM) sleep and non-rapid eye movement (NREM) sleep. REM and NREM sleep alternate in cycles throughout a night of sleep, with each cycle lasting between 90 and 110 minutes. On average, adults go through four to six cycles each night (Chokroverty, 2010). During REM sleep, individuals are easily awakened because this stage is similar to an awake state. This is the stage in which dreams usually occur. NREM sleep, on the other hand, is considered to be the deepest stage of sleep. Heart rate and blood pressure decrease significantly during this stage (Vallido, Peters, O'Brien, & Jackson, 2009). NREM sleep is broken down into four stages. Stages 1 and 2 of NREM sleep are light sleep stages defined by little to no eye movement. Stages 3 and 4 are deep sleep stages consisting of slower brain waves and functioning. It is during stages 3 and 4 of NREM sleep that essential restoration of bodily functions occurs. A few of these rejuvenating processes include the regeneration of new tissue, a strengthening of the immune system, and the constitution of stronger bones and muscles. NREM sleep accounts for 75 to 80 percent of human sleep (Chokroverty, 2010). Because of the important bodily processes that occur during this lengthy period of sleep, it is crucial that individuals sleep long enough to allow the body to respond to the changes that occur. The most damaging effects of sleep deprivation are from inadequate NREM sleep. If possible, individuals should avoid working night shifts, smoking or drinking near bedtime, or being disturbed by outside factors while sleeping (Marzano, Ferrara, Curcio, & Gennaro, 2010). By following these guidelines, individuals can reduce the chances of experiencing the negative effects of sleep deprivation.

Patterns of sleep and waking are controlled by two biological processes, which are the circadian rhythm and hormonal secretion. The circadian rhythm is based on 24-hour intervals, and it is regulated by the suprachiasmatic nucleus located in the area of the brain known as the hypothalamus. The circadian

rhythm is influenced by components within the body such as temperature, as well as factors in the environment. Daylight and mealtimes are common external factors that affect the circadian rhythm. The production of melatonin, a hormone produced by the body that induces sleepiness, is controlled by the suprachiasmatic nucleus. The body becomes tired at nighttime because when there is less light present, the suprachiasmatic nucleus tells the brain to produce more melatonin (Vallido et al., 2009). Certain types of sleep disorders are related to circumstantial circadian rhythm disruptions. Such disruptions can be caused by jet lag or shift work, such as individuals who work night or rotating shifts. Individuals with such disorders are unable to sleep and wake at normal times that fit social standards (OrzelGryglewska, 2010). It is important that individuals try to minimize disruptions to the circadian rhythm in order to maintain a healthy sleeping schedule.

Diagnosis

Sleep deprivation can be diagnosed when sleep has been disturbed for an extended amount of time, and it begins to have a significant effect on daily activity (Vallido et al., 2009). Sleep deprivation can either be acute or chronic. Acute sleep deprivation occurs when the amount of sleep an individual receives is significantly decreased for a period of two days. Acute sleep deprivation can be associated with severe conditions that are sudden in onset. This type of sleep deprivation can be caused by everyday stresses, such as illness, work-related stress, or extreme temperatures. A chronic condition, on the other hand, is a long-lasting syndrome. Chronic sleep deprivation occurs when an individual develops a routine of decreased sleep. These individuals typically get less sleep each night than what is necessary for ideal bodily functioning. Such long-term sleep deprivation is usually caused by factors such as depression, chronic stress, and discomfort at night (Pace-Schott et al., 2009).

Causes of Sleep Deprivation

Whether the sleep problem is acute or chronic, there are countless causes of sleep deprivation. Although many causes of sleep deprivation involve the brain and nervous system, it is often environmental and behavioral problems that cause insufficient amounts of sleep. According to Thacher (2008), stress is a leading contributor to sleep difficulties. Common circumstances that may trigger stress-related sleep deficiency include demanding school requirements, work pressures, relationship troubles, or a death in the family. Typically, when the stressful situations pass, the sleeping disturbance is resolved within a few days. If an individual does not take care of the sleep problem immediately, however, it can develop into a long-term ailment that continues to disturb sleep long after the original stress is resolved.

According to Orzel-Gryglewska (2010), the most common causes of sleep deprivation are associated with lifestyle and work-related factors. College students in particular are faced with countless social and emotional adjustments at the beginning of each school year. Adjustments such as new living conditions, roommates, academic expectations, and jobs can be taxing on college students (Liguori, Schuna, & Mozumdar, 2011). Students are often required to find a balance between schoolwork, social activities, and careers. In many cases, sleep is sacrificed for other activities. A study conducted by Pace-Schott et al. (2009) suggested that most university students accumulate sleep debt over time. Often this debt is compensated on the weekends. Although an individual cannot catch up on sleep once sleep debt has been acquired, healthy sleeping patterns can return with time. It is a common myth that the body can be trained to not require as much sleep. This is not true because sleep is an essential process that regenerates the body so that it can function optimally. Studies done by Chokroverty (2010) show that

most individuals need an average of eight hours of sleep per night, but many people can tolerate an average of six hours. Usually, however, such sleep habits result in a decreased effectiveness in production and performance. Continual loss of sleep by receiving less than six hours of sleep over the duration of days or even weeks results in sleep debt. Individuals, especially college students, should take steps to avoid this unhealthy pattern of sleeping in order to limit the negative effects that sleep deprivation can have on the body.

Effects of Sleep Deprivation

In modern culture, many more people are experiencing the harmful effects of sleep deprivation than in previous years due to the recent trend toward maintaining a 24/7 lifestyle (AlDabal & BaHammam, 2011). Cultural norms of today's society include longer working hours and sacrificed sleep time. As a result of this trend, sleep deprivation has become a worldwide problem. In society today, the effects of sleep deprivation on the body are often underestimated. The negative effects of a lack of sleep can be detrimental to an individual's health and body. Studies show that sleep deprivation has been linked to both mental and physical complications. A lack of sleep can negatively affect mood, performance, and overall health (Shulan, I-Chen, & Ling-Ling, 2007).

Physical damage. The physical damage done to the body as a result of sleep deprivation is often the most overlooked aspect of sleep complications. Physiologically, a reduction in the amount of sleep received each night results in damage to each of the bodily organs and systems. For example, sleep deprivation can lead to an elevated risk of high blood pressure and heart attack (Marzano et al., 2010). Individuals may not even know the damage that is being done to these internal systems as a result of sleep deprivation. According to AlDabal and BaHammam (2011), sleep is essential for certain bodily functions such as learning, cellular repair, and memory processing. Without sleep, these processes do not function properly. These studies also show that there is a strong correlation between the immunity of the body and adequate sleep. When adequate amounts of sleep are not received, the overall immunity of the body is significantly damaged. A weakened immune system increases the likelihood of contracting infections, viruses, and diseases. This evidence demonstrates the true importance of sufficient sleep.

Not only is the immune system affected by sleep deprivation, but also the metabolic and endocrine systems of the body. The endocrine system secretes hormones into the bloodstream in order to regulate certain processes such as metabolism, growth, development, and tissue function. Of these processes, metabolism is affected the most by sleep deprivation. Metabolism is the process that controls the conversion of fuels from food into the energy necessary for proper bodily function (Shulan et al., 2007). Studies done by AlDabal and BaHammam (2011) show that there is a relationship between obesity and sleep deprivation. Sleep deprivation causes a decrease in metabolic function, causing the metabolic rate to slow. Slower metabolic rates result in an increased likelihood of obesity. Over recent decades, there has been a global increase in body mass index (BMI) due to shorter sleep durations. This research also indicates that the average length of sleep in the world has decreased substantially in the past decade. The average is now less than seven hours of sleep per night. The increase in obesity due to this decrease in average sleep time is worrisome. Obesity is strongly related to serious medical illnesses such as diabetes mellitus and obstructive sleep apnea. Health care providers are alarmed at the increase in such illnesses and have been taking steps in recent years to inform the public on the dangers of sleep deprivation.

Mental damage. Aside from the physical damage sleep deprivation causes to the body, there are also severe mental and behavioral side effects of inadequate amounts of sleep. According to Vallido et al. (2009), results of sleep disturbances often include irritability, reduced vigilance, and lack of energy. Anxiety and depression are also commonly linked with sleep deprivation, which can lead to feelings of hopelessness and worthlessness that last for long periods of time. Often when an individual becomes depressed, the likelihood of sleep deprivation is increased significantly. The fatigue that is present due to a lack of sleep results in less physical activity and exercise. Individuals with such circumstances find themselves in a vicious cycle of inactivity and sleep deprivation. This research also shows that individuals who are sleep deprived are at an increased risk of suicidal behavior. Individuals, especially adolescents, who sleep less than eight hours per night are about three times more likely to have suicide ideation than those who receive more than eight hours per night. The knowledge that sleep deprivation can lead to suicide ideation has provided important information for suicide prevention programs.

Although suicidal thoughts usually only occur in extreme cases of sleep deprivation, there are a few common health risk behaviors that are associated with poor sleep quality. According to studies conducted by Vail-Smith, Felts, and Becker (2009), individuals who receive less than six hours of sleep per night are more likely to smoke and drink alcohol more than five times in a day. These studies also indicate that college students are at an especially high risk for the negative effects of sleep deprivation. There is a strong relationship between sleep deprivation and student risk behaviors, such as voluntary lifestyle choices. These choices may include unhealthy drinking patterns, drug use, and smoking addictions. Students involved in this study also showed an increase in physical aggression. Sleep deprivation causes irritability and an increased desire to fight. Students should be cautious about their sleeping patterns in order to avoid these unhealthy life choices.

Effects on others. It is evident that sleep deprivation can have serious consequences on the health of an individual. Most people do not realize, however, that a lack of sleep can also be detrimental to those who associate with a sleep-deprived individual. Sleep deprivation causes a lack of concentration, longer reaction times, increased errors, and a lack of coordination. As a result, sleep loss can cause impaired performance (Chokroverty, 2010). According to Goldich et al. (2010), insufficient sleep is becoming a public health concern because the lack of sleep has been identified as one of the leading contributors of traffic accidents. Sleep deprivation causes slower reaction times, which ultimately slows down reflexes. Therefore, vehicle operators who are sleep-deprived are often unable to stop in times of danger. A decrease in concentration can also cause traffic accidents if an individual falls asleep at the wheel. Finally, information processing is severely impaired by the influence of sleep deprivation. Therefore, sleepiness causes a reduction in mental and psychomotor skills. Drivers are continuously warned not to operate a vehicle when they have experienced a loss of sleep. If drivers would heed these warnings, there would be a significant decrease in traffic accidents.

Academic Performance. In society today, undergraduate students are faced with the need to manage the countless demands of college life. It is not surprising that students often push the need for sleep aside in order to meet the demands of school, work, and social activities. However, this is not the best course of action. Studies done by Thacher (2008) show that both quality and quantity of sleep are associated with academic performance of undergraduate students. This research shows that there is a correlation between sleep loss and decreased grades and academic achievements. Many undergraduate students experience countless sleepless nights. This actually results in lower levels of alertness in the following days. As a result, students experience a lack of motivation for schoolwork. Sleep loss interferes

with the consolidation of memory and the learning process. Therefore, sleep loss has implications on students' ability to process and retain information. With this knowledge, it is interesting to consider why students continue to believe that poor sleeping patterns are a harmless and normal part of a college career.

Treatment and Prevention

Due to the countless physical and mental damages that sleep deprivation can have on the body, there are a variety of treatment options available for individuals who suffer from sleep problems. According to Chokroverty (2010), health care professionals must follow a certain protocol when assessing patients with sleep complaints. Physicians must obtain a proper sleep history of the patient before any treatment plans can be created. Such a report would include details about sleep habits, a complete history of current or previous neurological or psychiatric illnesses, and details about drug and alcohol consumption. Sleep history reports should also include family history information to diagnose any genetic disorders that may appear. Physicians should pay specific attention to the frequency and the time of onset of the sleep deprivation symptoms. This can aid greatly in determining the source of the sleeping disorder.

Once the source of the problem has been identified, health care professionals can take the proper steps to provide appropriate care to the patient. Many doctors will prescribe sleeping medication to individuals with sleep complaints. This is not always the best solution, however, because sleeping pills do not allow individuals to receive the proper amount of deep sleep, or NREM sleep. Individuals who take sleeping medications often feel tired and drained of energy in the mornings. The medication can also cause side effects that can be more troubling than the actual sleep ailment. Sleeping medication can actually make the sleep condition worse by causing a vicious cycle of constant sleepiness (Orzel-Gryglewska, 2010).

In order to avoid the use of harmful sleeping medications, some doctors will advise patients on how to make lifestyle adjustments that aid in minimizing sleep deprivation. According to the studies of Marzano et al. (2010), one adjustment recommended by doctors is to practice daily relaxation techniques. One popular relaxation technique is meditation. Such techniques allow individuals to relax both the mind and body. This is an excellent way to reduce stress and encourage better sleeping habits. Doctors also strongly advise patients to practice healthy diet and exercise routines. Studies show that sleep can be affected when food is consumed within two hours before bed. Alcohol and caffeine are also substances that should be avoided before bedtime (AlDabal & BaHammam, 2011). Along with the proper diet, 15 to 30 minutes of daily exercise is recommended to individuals who suffer from sleep ailments. Exercise can help release muscle and nervous tension, which can greatly reduce the side effects of sleep deprivation (Liguori et al., 2011). These simple and useful guidelines are crucial to the reduction in sleeping problems that many individuals experience.

Although sleep deprivation is a growing concern in the world today, it is evident that there are ways it can be prevented if members of society stay informed. Sleep is a vital process that is required for the optimal health and well-being of the body. Many individuals overlook the damage, both physical and mental, that a loss of sleep can do to the body. In recent years, sleep deprivation has become a rampant problem in the United States due to the country's fast paced lifestyle. Many others in the country unfortunately suffer from sleep disorders, which usually lead to severe sleep deprivation. If steps are taken to raise public awareness about the dangers of sleep deprivation, individuals in society will be

more informed about the seriousness of this rapidly growing problem. If society members are informed, individuals can understand the importance of sleep to the body. They will then be able to take steps and make lifestyle adjustments to prevent sleep deprivation. Also, individuals who are unable to prevent sleep deprivation, such as those who suffer from chronic sleep disorders, will be more informed about the treatment options that are available. By increasing public awareness throughout the world, the amount of accidents, hospitalizations, and losses in production that result from sleep deprivation can be greatly reduced. Once the public becomes aware of the shocking harmful effects of sleep deprivation, individuals will be more willing to set aside proper amounts of time for sleep, which will result in an increase in the nation's overall health.

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2nd Place Winner: Maria Smith, "Dear Dr. Fish"

For Dr. Jessica Tvordi

Dear Dr. Fish,

After reading your essay, "Aim Low," I had many thoughts about the issues you addressed concerning teachers and how they should be more relaxed about their duty as a teacher. Your essay was not only entertaining for me to read, but also got me thinking about issues in the education system that I had not thought of before. Instead of just thinking as a student and with the viewpoint of a student, your essay switched my focus to the teacher and what their responsibilities are. You mentioned that some concepts being taught at universities are a "mishmash of self-help platitudes" (4), and how those concepts are not academically advancing. This led to your main idea concerning academic and democratic values, and how the confusion of the two can easily damage the quality of education. Although your thoughts were interesting, and brought ideas to the forefront of my mind, I do not agree with some of your positions. The main issues I disagree with are: how teachers should not try helping people become better than they were, the fact that only academic teachings can be taught and learned in a classroom, and that academic and democratic values cannot intertwine.

There may be examples of students coming away from classes with a new perspective on life that might not be the best. But how many students, in contrast, come away from a class and teacher with a better perspective of themselves and the world around them? Sometimes there may be the classroom and teacher who are just a place that, as you say, seems like a "locked room" (2) where the students just have to wait until they can "escape" (2). Although this may be a good example of the mindset of some students, this example certainly cannot be true for all students. As a student myself, I do not fit this example. School is not a place where I feel trapped and unable to leave of my own free will. I feel eager for class on behalf of the fact that I am excited to learn more and increase my own understanding. School is a place where students go to receive an education and become a better person through experiences and knowledge. Every experience shapes people for good or for bad. Knowing this, how does viewing the classroom as a "locked room" (2), like a jail, help add to the character of the student in the class? Making the classroom seem like a jail benefits neither the teacher nor the students.

Teachers have and continue to shape me into the person I am. Whether they have been a good influence or a bad one it does not matter. Teachers who present themselves and their classroom as a safe, comfortable, and open place help students have a better experience. These classes are enjoyable, and these teachers change lives for the better. One such class changed the life of a friend of mine. She took AP Chemistry in high school and struggled through it, but the teacher was always there for her and even gave my friend her phone number to make her help more accessible. As my friend is at college now, she still calls this teacher to get advice about classes, obstacles in life, and help with understanding chemistry assignments. This teacher has truly changed her life for the better. With such great potential for this positive influence for students, why would we want to tell teachers that they "can't make students into good people, and they shouldn't try" (3)? I think that if a teacher has potential to help at least one student, then why would someone try to prohibit that teacher from trying? I do not understand why prohibiting them from helping is a good idea.

The second issue I do not agree with you about is that only teachings considered fully academic can be taught in a classroom, nothing else. You claim that teachers are “responsible only for the selection of texts, the preparation of a syllabus, the sequence of assignments and exams, the framing and grading of a term paper, and so on” (1), and not “responsible for the effects of their teaching” (1). I agree that teachers are responsible for many things and not others, but I think they are greatly responsible for the effect of their teaching. When teachers educate students in concepts that inspire them to change their major or even their whole lifestyle, the teacher has definitely had an effect on that student. There are many other lessons a person can learn from a class other than what is written in the textbook, lessons like the ones you mention in your essay:

“Self-understanding or self-knowledge; understanding of the relationship between the self and community; awareness of and willingness to take responsibility for the consequences of one’s actions for others and society; informed and responsible involvement with relevant communities; pluralism; cultural awareness and respect; ability to understand the value of one’s own and other cultures.” (3-4)

All these lessons are not considered fully academic, but that does not mean that they are not important enough to be addressed. There is more that can be learned in a classroom than just academic based principles.

I agree that teachers should maintain a close relationship with what they teach to the subject of their class, but I feel strongly that any student without the basic skills quoted above is less likely to succeed in their class. I do agree with you that teachers should be careful as to how much attention they give towards broadening goals, especially towards personal development, for fear that students might lose interest “in the disciplinary training teachers provide” (4). However, teachers should be able to take a small amount of time away from normal lecture and use it to brief students on these “not so academic” teachings to make sure their students have the necessary skills to do well in their class. Especially if the class has at least one freshman, this approach would greatly benefit the class. If teachers are allowed to do this, the students in their class will be more successful and well rounded.

The third issue is about the relationship between academic and democratic values. According to Kevin McGrew, the definition of academic values is “a person’s desire, preference, or “wanting” for certain academic goals and outcomes.” (1) This means that academic values are peoples’ preferences, desires, and goals. According to the article “Learning to Give”, the definition of democratic values are “a system of beliefs and actions that give all people a voice, and are founded on the practice of equality of opportunity, rights, and treatment.” (1) Meaning that to acquire democratic values we have to gain equal opportunity to put for our opinions of our rights and treatments. The definitions of both are certainly not parallel in meaning, but do interconnect. Contrary to what you think and how “the confusion of democratic values and academic values can easily damage the quality of education” (5), I think that using both values can enhance the quality of education. Both values intertwine because in order to express our preferences and desires, academic values, we must be granted our democratic values, which are the equality of opportunity and freedom to speak.

When students become comfortable with feeling like they have an equal opportunity to share their opinions, I think the number of students involved in class discussions will increase. As a student, the first way I start getting comfortable with a class, and the teacher, is by feeling confident about my opinion, beliefs, and preferences. Once confident about my academic values, it becomes the teacher’s

responsibility to invoke democratic values by giving students an equal opportunity to discuss each of our beliefs and opinions in a non-threatening environment.

The experiences that help everyone feel comfortable with having their own voice, and being treated equally, lead to classroom discussions centered fully on academic goals and outcomes. There are facts to support that some bad classroom discussions have formed from teachers and students being disrespectful when sharing their opinion or focusing on an uncomfortable topic for a full day of class. However, there are far more times when memorable discussions take place fueled from not only a student's desired preference of what they want to learn, but also the feeling that they have freedom to be able to speak about what they want. If the classroom environment closes away from everything but focusing on academic values there will not be a way to reach the potential of what the class could learn.

From knowing many people who are students and being a student myself, I do not think that teachers should be relaxed about their duties because we are not relaxed about our duties as students. Teachers deserve to have diligent, hardworking, attentive students that are putting forth their best effort to excel in the class. Likewise, students deserve to have a teacher that will teach valid, applicable information, as well as care about the student and how they are doing in class. If teachers refrain from trying to help students shape themselves into better people, focus on just the academic lessons during class, and cut out the democratic values in a classroom, the experience for both the student and teacher will be mediocre.

There will not be an opportunity for the class to be great, life changing, or prolongingly influential. It will have become just one of the many classes students check off their list as having attended that day. It is at this point that teachers have given up because it "is simply not within their power to do... and they shouldn't try" (2-3). If it is not in a teacher's power to enhance the classroom for the students or even just one student, then who will? How are we, students and teachers alike, going to be able to reach our full potential if we eliminate these steps to get there? Teachers are critical to the academic success of their students, and they are also critical to influencing the student's overall success in life. Yes, teachers should be less scrutinized and given more leeway to control what goes on in their classroom, but teachers should not be left to aim so low that they miss the mark entirely.

Sincerely,

Maria Smith

Expressive- English 2010

1st Place Winner: Grant Oxenrider, "The Walking Dead"

For Dr. Julia Combs

"Mom, my arm hurts," I said. It started with a mild pain in my shoulder. For a few days it was nothing more than a nuisance to an active nine-year-old boy who, ate, drank, and slept sports. The pain continued, each day getting slightly worse. A trip to the doctor revealed a consensus of growing pains or a possible pinched nerve. The pain and discomfort continued to increase. Another trip to the doctor revealed nothing in the blood work and nothing new to report. The prescription was physical therapy as my arm became immobile. Another test was to remove fluid from the affected area, which returned no results. With my arm unable to support itself, I began to wear a sling. The physical therapy consisted of electrical shock and repeated movement. As physical therapy continued, my condition worsened. One task I remember in particular consisted of stacking cups up as high as I could while remaining seated. When I would reach a couple cups high my arm just refused to go any higher. Doctors were puzzled, and with no improvement in sight my dad suggested a trip to the Minneapolis Children's Hospital.

Children's Hospital proved to be a wise choice on my parents' behalf. This shoulder was nothing more than a stubborn criminal suspect refusing to give the slightest hint of motive. I underwent many tests, most showing nothing to explain my immobile shoulder. Finally, a test produced a positive result to my ailment. My parents sat next to my bed, tears rolling down their faces, noses sniffing, while my nine-year-old brain tried to decipher what was happening. My parents looked at me and said the words that no one wants to hear, "Grant, you have cancer," and my mom broke down in tears. My head was spinning out of control and my body numbing as seconds felt like minutes. My mind went blank; I felt like I was entering a deep dark hole and tumbling wildly out of control, the room narrowed and began to go out of focus. I knew things were bad at that moment, as I watched my parents crumble in front of me. I had heard the word before, but what did it mean? Raw emotion filled the room. Looking back, I cannot imagine the feelings my parents' had to endure to get the word "cancer" out of their mouths.

I learned I would be undergoing a series of harsh medications for the next three years. The disease I would begin to battle to the death had a name, A.L.L. or Acute Lymphoblastic Leukemia. The reason for my immobile arm was cancer cells clumping in my shoulder, which was a rare symptom to have. Treatment would begin immediately, and I was moved from the 4th floor to the 8th floor, which was known as oncology (whatever that meant to a nine year old). Here I lay a mere nine years old and already in an intense fight for my young life. I learned of the imminent and possible side effects of the battle. Death was the worst side effect, others included losing my hair, fatigue, and plain out getting my ass kicked in every way imaginable.

The hospital and doctor's office became a familiar place and often seemed more of a permanent residence than my own home sometimes. It was not so bad; there was an awesome playroom, filled with all the movies, toys, and games I could think of. My poor sister, who is two years older than me, spent a lot of time in that playroom. She became a master of the arcade game Pac-man. She spent hours upon hours conquering the game, her name on nearly every line of the high score list. The kitchen area had all the amenities of a five-star hotel, including all the soda, juice, popsicles and cookies I could eat. There was even a jetted bathtub I could use. This place really knew how to make a child feel

comfortable. The sacrifices my family made were as courageous as the battle I endured. I was never alone; someone was always there looking after me.

I was fitted with a strange device called a portacath. This was inserted under my skin on the right side of my chest; it connected to the arteries that led straight to my heart. This was to be used to administer intravenous drugs, and to remove blood when needed. This device bypassed being poked in the arm by a needle, and was far easier to find than a vein in an emergency. Every time they used my portacath to get blood, or inject medicine in it, it had to be flushed with a saline solution. Every time they flushed it I could taste the saline in the back of my mouth, and to this day if I catch a scent of the saline solution when I go to the hospital, or even just think about it, it brings back the taste to my mouth. It didn't taste good then and it sure doesn't now.

My condition seemed to worsen by the day. I began to lose energy, my face puffing up from the hardcore steroids, and my body began to show the effects of the harsh drugs. On certain nights I would take as many as 15 pills. I was now in fourth grade, I attended the first few weeks of school pretty regularly; however, as the weeks passed my body just could not do it alone. I got permission to use the elevator, and I was given a walker. I was using the same device a ninety-year-old man should be using. This was not right; I was only ten years old! I kept my head held high and attended school when I could. I began to miss so much class that I had begun using a tutor. I missed my friends, but some came by my house to check on me, and some with their shaved heads to make me feel better about my hairless head. My head was as smooth as a baby's bottom, and my sense of humor never let it bother me. My favorite thing to do was polish it while in the shower with hair conditioner. I was not going to allow this opportunity to pass by without some fun. Halloween rolled around and the list of possible costumes was awesome! I dressed as Uncle Fester from the Addams family movies. This inspired my sister to play the role of Cousin It; I won a Halloween costume contest and she came in second.

Some days were better than others. Certain days I looked full of life, others I felt like a sea sick fisherman on a never ending set of sea swells. Life was tough for my family, but we always made time for fun. I had my blood checked at every doctor visit, and we always played a game with it. We would guess what my blood cell counts would be and in a short time the results showed the winner. It became a ritual, which the nurses and doctors sometimes joined in with or would inquire about who won that round. My many complications began to drag me further into the abyss of darkness. I often felt alone, scared, and depressed. My dog Snoopy was often the remedy for these situations.

My treatment was rigorous, I had to receive spinal taps every couple months to inject medicine into my spine to make sure no cancer cells were hiding there. I had to have a couple blood transfusions, and I had to have intravenous drugs at home sometimes. The spinal taps were often something that really plagued me. Being so young, they generally put me under anesthesia to do the procedure. I always came out of anesthesia so sick I would have to stay at the hospital for hours trying to recover. I began dreading it as every single time it was the same case. They finally gave me the option to do them awake, and I took it! I would listen to music while curling up in a ball and staying as still as possible. If I would have moved, it could have possibly paralyzed me. It was rather intimidating seeing the giant needle that would pierce my skin and into my spine while not being able to watch. I was never sick after the procedure so I continued doing it this way the rest of my treatment.

One of my major complications arose while on my grandmother's watch. The right side of my face went numb, and I could not talk clearly. I was rushed to my mom, and after instruction from the doctor I was

taken to the clinic. They found I was having a series of ministrokes. I was put in ICU and many tests were run. Whatever caused this was uncertain, but I was in bad shape. For several weeks I remained in the ICU, and had several more stroke type episodes. At one point I can remember trying to signal that I was hungry. I was unable to talk, so I motioned for a pen and paper. My mind could picture the letters clearly, but I could not transfer them to the paper. I was temporarily paralyzed. The weeks in ICU drug on and the nights were sleepless. I would lay awake watching black and white episodes of the original Little Rascals all through the night. In the next few weeks I was taken out of ICU and soon was able to go home. I was able to walk out of the hospital with no permanent effects.

Several months later, on one particular night, I took a turn for the worst. I forgot to take a pill that my body had become dependent upon. This sent my body into a severe shock. I began to have trouble breathing and chest pain. I told my mom we had to get to the hospital. She did not realize the severity of the situation until halfway to my hospital, which was a 45 minute drive. I began to know something was very wrong. On the way I began swearing like a sailor from the pain jetting through my chest; I saw a hospital off the freeway, I said "Pull the \$%#% in there". She refused, not knowing if they had the equipment to take care of me and didn't want to waste precious time. She was scared and proceeded to the hospital she trusted. When we arrived I was able to walk in to the ER, I remember feeling faint and saying I needed to sit as my knees buckled and I dropped to the floor. I was rushed back to a room, where they began frantically working on my body. The pain through my entire body was enough to make the toughest of men cry. My blood pressure was dropping to fatal levels and I was in a fight for my life. The bright lights of the room engulfed me. I couldn't tell what was going on, staff rushed around me like a NASCAR pit crew around a car. I remember cussing at everyone I saw, as the pain was climaxing. We were later told that it was a fairly normal thing for someone to use profanities in such a situation and often uncontrollable.

The night wore on; I was stabilized and put in ICU. I later found out that the doctors had told my parents the next 48 hours was critical and would decide whether I lived or died. I was kept heavily sedated and only remember little things from there to the next couple weeks. I awoke sometime in the middle of the night to my mother's sobs. I remember turning to her and telling her in a gruff, abrupt voice "QUIT CRYING, I'll be fine!" I continued to fight off this round of complications and later in the week I was moved out of ICU and back to the 8th floor. I was kept in the hospital for several more weeks. I had a feeding tube in my nose and was kept on clear liquid diet. I had an unquenchable thirst and kept track of the time, as I was allowed only a little bit to drink per hour (smaller than a shot glass). I was constantly bugging my dad throughout the night to retrieve a drink of the refreshing 7-Up that lay on the counter across from me. At the same time as this, my grandmother was in the ICU of another hospital, with a broken back and severe complications. My mom was constantly running from one hospital to the next. I cannot imagine what she was going through. Her mother, and her son lying helpless in hospital beds simultaneously. She was nothing short of Superwoman!

I had a close family friend, that was a few years older than I was, come down with a similar disease. She was diagnosed before I was and had fought for a while before I began. She had fought a good fight, but in the end the cancer took her life. I found strength from her last words she spoke to me from her deathbed. Never give up! Those words fueled a fire in me, and I vowed to beat this awful disease for the both of us. She was laid to rest roughly half way through my treatment. What a blow that was for me. I began to realize I could receive a similar fate. My family has never been very religious; however I wanted to learn about God, just in case I did not make it through. At the same time my sister was struggling with

making good choices and this could benefit her. We started to attend different churches every week until we found one we liked. Eventually, we were baptized in the LDS church. My sister had turned over a new leaf and this religion saved her from a lifetime of bad choices. She was on a collision course of uncertainty and was able to overcome the friends that drug her down the wrong path. If only one good thing came from my cancer it was saving her from her own destruction.

I began to fight through my complications and the worst looked to be behind me. I was not out of the woods yet, but I could see the clearing through the trees. I began to build strength, I was growing hair again, and my daily medications were reducing. I was starting to become "normal" again. The last year of my treatment was far better than the first year and a half. I was able to play sports again; I was strong enough to play little league football, so my mom sewed a piece of foam onto my shoulder pads to protect my portacath. Life was returning to normal, I was still often sick, usually when I had to take certain medications, but for the most part I felt pretty good. I was able to receive a wish from the make-a-wish foundation. I chose to go on a week-long fishing trip to Canada. Everything was paid for and I even had a guide. Of course my family was there too. It was one of the greatest experiences I have ever had, and memories that last a lifetime.

My body was nearing the end of the pure hell that the medications threw at it, but I always came out on top. By the end of the third year my status went from cancer patient to cancer survivor. I am currently going on 16 years since I ended treatment. Every day since then I have felt grateful to be alive. I feel like the walking dead, I should not even be here today. I try to make every day interesting. If I want to do something I do it, and I do it the best I can, because who knows what tomorrow will bring.

2nd Place Winner: Jesse Hyatt, "The Last Goodbye"
For Dr. James Aton

Withheld by student's request