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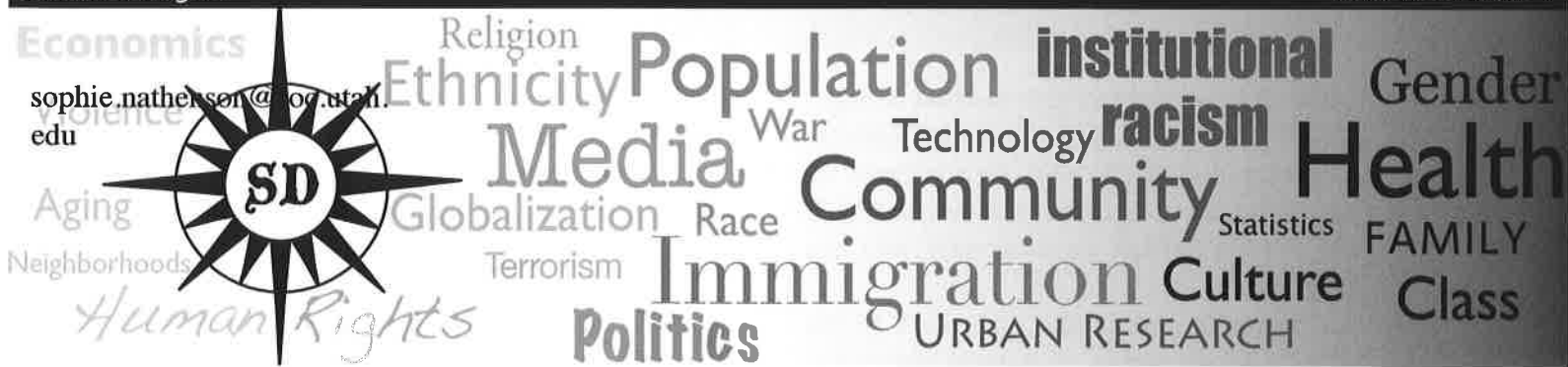
## Letter from the Editor

This edition of *Social Dialogue* marks an exciting turning point for the journal. Beginning in 2012, the editorial team at *Social Dialogue* opened up the call for paper submissions to other colleges and universities in Utah. This endeavor extended the opportunity for undergraduate publications to more college students across the state and also forged relationships among graduate sociology students.

The current issue contains articles from a wide variety of students, representing the University of Utah, Westminster College and Utah State University. Additionally this edition brings two articles written by graduate students, and a special section dedicated to a special event on higher education from a non-traditional perspective. Articles cover expansive topics that are relevant locally, nationally and globally. Grant Holyoak from Utah State University describes the rise of Utah and the rest of the Mountain West as new immigration destinations. Nicole Berdera of Westminster College investigates the social causes and consequences of medical trials in developing countries. University of Utah graduate student Peter Loebach reports on the long-term demographic implications of both the aging Baby Boom cohort and current national migration trends. Fellow grad student Tom Quinn discusses the challenges associated with studying religion from the social science perspective. Justin Babbel writes on the criminalization of homelessness, an article he developed from a term paper for an Urban Sociology class here at the University of Utah. In addition to these articles, the 2012 issue of *Social Dialogue* showcases the winning students' essays as part of a special event headed by sociology professor Julie Stewart on the challenges and benefits of going back to college later in life.

We hope you enjoy this edition of *Social Dialogue*. Our goal has always been to create dialogue between undergraduate students, graduate students, professors and community members with regard to local and global social issues. To contribute to the dialogue, send comments to [socialdialogueinfo@gmail.com](mailto:socialdialogueinfo@gmail.com) or consider submitting at paper to *Social Dialogue* for our next edition!

Sophia Lyn Nathenson  
Editor-in-Chief  
July 1, 2012



## Utah and the Rise of the New West

### Grant Holyoak, Utah State University

#### INTRODUCTION

In recent decades, deindustrialization and the relocation of jobs from the Rust Belt to the Mountain West have sparked a new wave of geographic mobility that promise to alter the nation's demographic and employment distributions in dramatic ways. Due to structural economic changes and uneven job growth across geographic regions since the 1970s, the Mountain West has experienced major economic and population growth while the Rust Belt has experienced continuous population and economic decline. Despite these trends, most scholarship has focused on in-migration to the Mountain West of wealthy second-home owners and Latino immigrants. Much less research has focused on trends related to interstate labor migration of native-born workers seeking economic opportunities. Thus we know relatively little about the size, demographic characteristics and human capital of individuals driving migration flows from former manufacturing hubs to rural and emergent sectors in the West. This project fills an important gap in the literature by tracing the temporal, demographic and skill-based characteristics of interstate migrants to the Mountain West.

Although the Mountain West has been experiencing significant regional growth since the 1910's (Otterstrom 2003), growth accelerated significantly following the deindustrialization of the Midwest, which began in the 1970s (Plane 1992; Frey 1996). In-migration began and grew steadily throughout the 1970s and continues until today (Johnson 2009; Perlich 2006; and Frey 2006). While the recent recession and housing bust slowed domestic migration to states such as Arizona and Nevada, several states in the West, including Utah, continue to experience

significant population growth (Census 2008). In fact, between 2007 and 2008, Utah was the fastest growing state in the nation (Census 2008).

#### MOTIVATING FACTORS

There are a variety of factors that motivated these changes. The four most prevalent factors include: the post-war baby boom, deindustrialization, amenity richness and county diversity.

First, the influx of migration correlates with the growing up of the Baby Boomer generation. When Baby Boomers reached the age when they were searching for jobs in large numbers, there simply were not enough jobs available in their native regions to sustain them (Plane 1992). Importantly, women of this generation entered the workforce, and job competition increased. Second, the Midwest's decline in production during the 1970s led to a severe lack of jobs in the region, sparking an exodus to more affluent areas, particularly the South and the Mountain West (Nelson 2003).

The decline of industries in the Midwest was due to several factors, including an increase in global competition and outsourcing. The South and West, however, experienced growth, which created economic opportunity for migrants (Perlich 2006). Thus the decline of jobs in the Midwest led to the growth of migration to the Mountain West (Frey 2005a). Migrants of all backgrounds began to gravitate towards regions with high employment rates, rapidly expanding labor markets, and low housing costs (Frey 1996). Even during the recession of the 1980s, regions like the Evanston, Wyoming and Delta, Utah areas were experiencing boom economies, attracting migrants to the region (Hunter 2002). The Mountain West has

also successfully attracted a significant number of high-tech headquarters. Boise, Boulder, Denver, Colorado Springs, Albuquerque, Phoenix, and Tucson have all increased their high-tech economies in recent decades, thus attracting highly skilled professionals into the region (Smutny 2002).

A third factor that motivated migration to the Mountain West is the presence of natural amenities. These involve environmental, community, and other “quality of life” benefits of a non-monetary nature. Surveys taken in the 1970s reveal that, if given a choice, people prefer to live in small towns or even rural areas rather than large cities, with environment and pace of life being more important to migrants at that time (Rudzitis 1999). In these same surveys, when asked what attracted incomers to Mountain Western states, only 30% cited employment as an important factor, while other categories like scenery, pace of life, outdoor recreation activities and climate received response percentages from the high forties to low seventies. Importantly, communities experiencing the most rapid growth were often situated within or adjacent to scenic mountain landscapes, suggesting that natural beauty serves as an attraction to the region (Beyers 2000). In addition, many newcomers to the Mountain West state that they were motivated to move to the region by a desire to raise their children in an area not heavily affected by gangs, crime, drugs, or other darker sides of the urban environment (Beyers 2000). Importantly, the pull of natural amenities strengthens economic pulls of migration. The construction and maintenance of ski resorts, tourist towns, and state parks requires a large low-skilled labor force. Thus, it is likely that jobs follow people to the natural beauty of the region, increasing the migration on both fronts (Beyers 2000).

The county diversity of the Mountain West region is the fourth major factor motivating in-migration. Johnson identifies five county types in the region: Farm, Urban, Commuting, Recreation, and College Counties (Johnson 2009). Each county type drew its own specific demographic into the region. The numerous types of attractions afforded migrants in these counties do much to explain why the Mountain West is receiving new residents of all ages and backgrounds. For example, urban or commuting counties (defined as counties adjacent to a metropolitan area or containing an interstate highway) appeal to the economic “pulls” bringing migrants into the region (Otterstrom 2003). Farm and recreation counties pull in amenity-seeking

migrants, whether they are looking for a reduction in crime or more scenic beauty. Services required to maintain these attributes also exerted economic pulls (Nelson 2003).

### WHO IS MIGRATING TO THE NEW WEST?

While the factors reviewed above identify the various pull factors motivating migration to the Mountain West, we now turn to an analysis of the demographic characteristics of recent migrants. Critical demographic characteristics of recent migrants include age, education, and race/ethnicity.

The trend for all three general age demographics (young adults, families with children, and retirees) followed the migration trend described above. Migration from all demographics began in the 1970s, declined in the 1980s, and had a resurgence in the 1990s that continues to the present (Johnson 2009). As a rule, age is inversely related to movement towards a metropolitan destination. As people increase in age their migration tends to move them towards more and more nonmetropolitan areas (Nelson 2003). The amenities of the region, however, do not seem to be polarized to attract one age cohort over another. Natural amenity regions appear to be universally attractive to young adults, families, and retirees alike, sometimes even at the expense of opportunities for better incomes (Rudzitis 1999).

In almost every migration stream, the propensity to migrate is highest among young adults, usually from rural to urban areas for economic or educational reasons. Metropolitan areas exerting strong pulls on young migrants in the Mountain West include Tucson, Denver, Salt Lake City, Colorado Springs, and Fort Collins (Nelson 2003). Commuting counties in the Mountain West exerted the strongest pulls for families with children due to their balance of amenities and employment opportunities. Specific regions in the Mountain West showing young family in-migration include the outskirts of Tucson, Phoenix, Denver, and Albuquerque. The influx in such commuter regions reveals another desire of young families- they follow housing market characteristics. Higher home values and more owner-occupied residences are associated with these middle-aged cohort shifts, generally reflecting a shift from renting to owning a residence (Nelson 2003). Finally, the Mountain West has become a new “retirement mecca” for the nation (Shumway

1996; Johnson 2009). One of the greatest amenities for retirees was access to family members, representing 24% of the reason that persons over age 65 moved to the Mountain West- likely to be nearer family that had moved for partial economic reasons. Other attractive amenities for the age group include outdoor recreation, pace of life, scenery, and climate (Rudzitis 1999).

The Mountain West's attraction for different education demographics is consistent with migration research across the nation as a whole. College graduates show a higher rate of migration than those with lesser education. At the same time, the most educated movers tend to be more focused toward a select set of destinations- usually destinations promising economic opportunity. A state's per-capita income is a particularly strong factor playing into a college graduate's considerations (Frey 1996). College graduates are, on average, more willing to move across large distances seeking employment because they are more likely to have information regarding economic opportunities than less educated migrants.

While it is clear that the Mountain West region as a whole is experiencing net gains from all educational groups, two of its states—Nevada and Arizona—were among the top five states experiencing growth in migrants with a high school education or less prior to the recent recession (Frey 2005a). Though migration to the West has slowed during the recent recession, Western metro areas continued to grow at a faster rate than other regions during this period (Frey 2010). This observation is consistent with the Mountain West's "pulls" for low-skilled migrants who lost employment opportunities when the Midwest experienced deindustrialization.

In terms of race/ethnicity, the Mountain West is currently receiving migration influxes of all large racial demographics in the United States (Frey 1996). There is no racial/ethnic-specific "flight" of one race or another from the Midwest or into the Mountain West, but rather a "multiracial middle-class flight" due to greater incentives to leave deindustrialized regions and migrate towards economically prosperous ones (Frey 2005a). More educated migrants tend to move to more prosperous regardless of race. Because of this, the United States has become much more of a "melting pot" than it was a few decades ago, when there were only pockets of port-of-entry minorities who largely migrated together. Since 2000, the spreading out of racial/ethnic minorities to large parts of the country has

continued (Frey 2006). Nevertheless, important racial/ethnic trends have occurred in recent decades.

Of the top ten communities in the United States experiencing growth in white population, five are in the Mountain West, and both of the top two are in the region. Clearly, the Mountain West is receiving a large portion of the United States' white population shift, mostly into these metropolitan areas or in regions directly adjacent to metropolitan areas (Frey 2006). In fact, the areas surrounding major cities (suburbs) have expanded outward significantly since 1970, with many white families choosing to live in these regions. Furthermore, while minorities are spreading out to every region, whites are the least affected by the attraction to move to a region with a large population percentage being occupied by other white people, likely because they feel certain that there will be a predominately white community wherever they choose to move (Frey 1996). In addition to the influx of white migrants, the Mountain West's non-Latino white population is also increasing due to high fertility rates among the region's Mormon population (Perlich and Downen 2011). In fact, Utah currently leads the nation in population growth of non-Latino whites (Perlich and Downen 2011).

Large numbers of Asians and Hispanics have begun to disperse away from their traditional port-of-entry metropolises such as New York, Los Angeles and San Francisco (Frey 2006). Generally, lower-skilled migrants (Hispanics particularly) move to fast-growing areas, such as the Mountain West, while higher-skilled minority migrants follow the same migration patterns as educated whites. These national trends have led to growing racial/ethnic diversity throughout the Mountain West region. Between 2000 and 2010 population growth in six states (Arizona, Colorado, Idaho, Nevada, New Mexico and Utah) outpaced the national average and much of this growth was attributed to minority population increases (Damore 2012). Even states such as Idaho and Utah, which are predominantly white, have experienced significant growth in non-white populations (Damore 2012).

Finally, record numbers of black Americans are migrating away from traditional residential regions and moving for much the same reasons that white migrants are- economic prosperity based on per capita state income. This causes blacks, particularly the more educated blacks, to migrate to major metropolitan areas in the South and the Mountain West. The two metropolitan areas in the United States that



experienced the highest growth amongst blacks from 2000 to 2004 were in the Mountain West: Las Vegas and Phoenix (Frey 2006). This economic pull seems to be strengthened by the deindustrialization of the Midwest, a region that for decades provided large numbers of blacks with low-skilled work and hosted large percentages of the national black population (Frey 2005a). Due to Midwestern deindustrialization many blacks, both highly educated and otherwise, are forced to migrate in search of work, drawing them to the diverse economic opportunities of the Mountain West. Less-skilled workers are drawn here to work for the tourist or amenity industries while the educated are drawn to the metropolitan boom areas (Frey 1996). All of these factors have led to the Mountain West's increase in black population since 1970. While the recent recession seems to have increased black migration to the South to destinations such as Atlanta, Dallas, Houston and Washington, DC, there continue to be modest migration growth to the West, particularly California, Arizona and Nevada (Frey 2011).

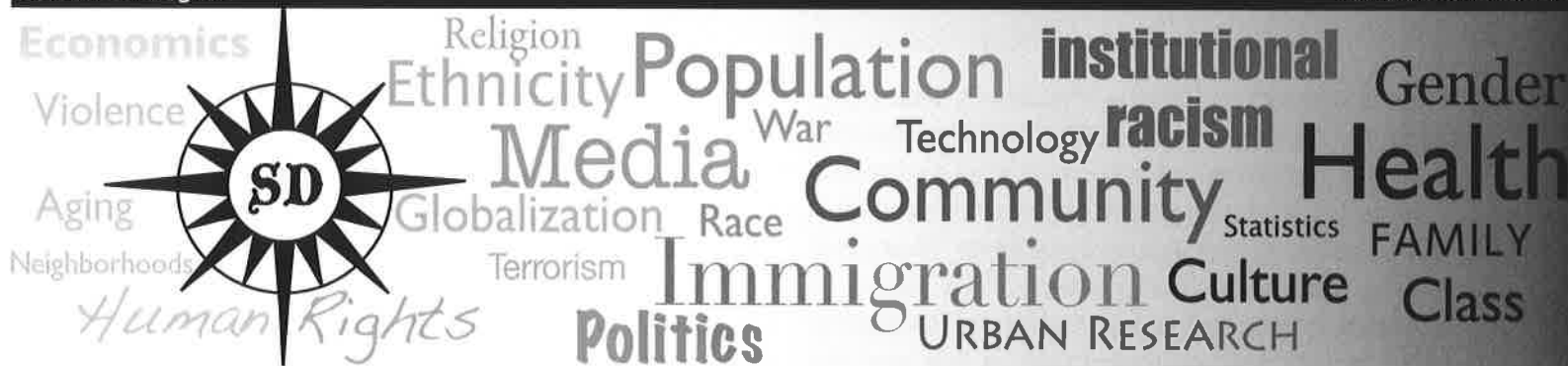
## CONCLUSION AND POLICY IMPLICATIONS

Clearly the presence of tens of thousands of new citizens of all ages, education levels and ethnicities will require states like Utah to take action to accommodate the needs of a large and increasingly diverse population in a historically monochromatic region. The next twenty years of lawmaking will be crucial in determining the quality of life for these migrants as well as long-time residents of the region. Several areas of state and local policy will be of central importance; social programs (including healthcare) will need to adapt, as will programs dealing with housing, schools and general infrastructure to support an increased population. Also, policy makers must act to ensure that there are sufficient opportunities for workers migrating to the region in search of jobs.

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## Doing Anything for the Cure

Nicole Berdera, Westminster College

### INTRODUCTION

Only 20% of Brazil's population has health insurance, but the entire population will need medical attention during their life spans (Virk 2010). In a place where adequate health care is unaffordable and difficult to come by, one of the only ways that impoverished Brazilians can receive health care is by enrolling as human test subjects in clinical trials.

Sadly, Brazilians aren't the only ones in this situation. Developing countries all over the world have become the preferred location to conduct clinical trials. The lack of access to adequate health care in developing countries has created a desperate environment in which many populations can only receive the treatment they need through clinical trials. In their desperate condition, other nations' impoverished and sick can be easily exploited, and American pharmaceutical companies are capitalizing on the chance to save money through the manipulation of a deficient regulatory environment to conduct clinical trials despite ethical concerns. By using economic disparity to coerce human test subjects, the American pharmaceutical industry can develop new treatments among populations who will probably never again be able to afford them, perpetuating inequality across the globe in an abrasive way: demanding wealth in exchange for good health.

### GLOBALIZATION AND CLINICAL TRIALS

Globalization is the only way for American pharmaceutical companies to find enough viable human test subjects to conduct clinical trials. As a whole, the modern American population is unwilling to participate in clinical trials when they need treatment for a disease

(Cekola 2007). Even patients with the most dangerous and mystifying of diseases hesitate to volunteer for a trial. Only 1.7% of eligible cancer patients in the United States enroll in drug trials, regardless of the stage of their disease. The likelihood of an individual to volunteer for a clinical trial is dramatically lessened by American physicians' unwillingness to suggest that their patients enroll. In America, enrolling a patient in a clinical trial is very expensive for individual doctors' offices and requires a staggering amount of paperwork that few doctors are willing to deal with. Furthermore, the fear of having a patient placed in a placebo group deters doctors and can be a convincing argument to deter their patients as well. Americans, unlike other populations, have access to a myriad of choices in their medical care and the possibility of receiving no medical care at all while taking a placebo for a clinical trial seems ridiculous when so many other choices are available.

Beyond these challenges, of all the Americans who are willing to participate as human test subjects, many will be disqualified from the study because they already take drugs that may confound the experiment (Cekola 2007). In order to find a large enough pool of test subjects, pharmaceutical companies move their studies to countries whose populations are more vulnerable and thus more willing to participate.

American pharmaceutical companies have found an abundance of viable and willing human test subjects in countries with large populations who lack access to adequate health care. Today, over half of all registered clinical trials are conducted internationally between 145 nations, and countries where sufficient medical care is scarce make up the majority of that list (Adashi 2011). Between 1995 and 2000, the number of clinical trials conducted in Brazil, Mexico, and

Argentina increased by 1000% (Virk 2010). The appeal of these three countries is a function of the availability of health care, which is both expensive and inadequate. As a result, the majority of the population hasn't had access to treatment or drugs, making them "treatment-naïve" and "drug-naïve," respectively (Virk 2010). In such populations, the likelihood of additional treatments or drugs confounding an experiment is low and the population is desperate to treat their medical conditions through clinical trials. For unscrupulous researchers, this situation is ideal.

India, in particular, offers a climate in which clinical trials can thrive, a fact that has earned the nickname of the "guinea pig of the world" (Nundy 2005). Unlike many of the other favorite destinations for clinical trials, India offers reputable institutions with a sophisticated technological infrastructure that can house foreign studies. Additionally, these facilities are staffed with well-trained medical professionals who speak English and are willing to aid clinical trials for a fraction of the price of an American with similar training (Bhatt 2004). Clinical trials in India often cost only 40% of the price of an American drug trial (Cekola 2007). Most importantly, India is stratified. The medical facilities available are too expensive to cater to the poor. The majority of India's population is just as desperate for affordable medical attention as the populations of countries that lag behind in medical developments (Cekola 2007). This part of the population is just as drug-naïve and willing to participate as the populations in South America, but with more advanced medical facilities to ease the transition into a developing country.

For many sick individuals in developing countries, clinical trials are their only access to health care (Bhatt 2004, Cekola, 2007, Glickman 2009, Petryna 2004). If a particular study offers treatment, receiving some treatment is alluring, regardless of whether the study will be conducted ethically (Cekola 2007, Glickman 2009, Petryna 2004).

For individuals who are not searching for treatment for a certain condition, clinical trials often include regular check-ups, which the poor populations of developing countries could not afford otherwise (Cekola 2007). The compensation of standard check-ups can also persuade the individuals to sign up for unethical clinical trials that may be unjustifiably risky or lacking in crucial details. Additionally, populations that do not have access to health care are often unaware of what good health care looks like (Glickman 2009, Virk

2010). Many are unable to understand the differences between available treatment options and ultimately trust their doctors' opinions without asking a single question (Virk 2010). Many Brazilians trust their doctors so much that they will sign clinical trial informed consent forms while admitting that they do not understand what method the clinical trial will use to treat them or the potential risks of choosing that treatment (Virk 2010). While some Brazilians have misgivings about working with American scientists, they trust their own doctors so completely that they will participate in any clinical trial that their doctors advise.

## ETHICAL ISSUES

Researchers take advantage of naïve populations and place them in unethical clinical trials. As outsourcing clinical trials has become more popular, the FDA has conducted regular inspections of clinical trials taking place in foreign countries and found a myriad of deviations from legally mandated procedures that protect the rights of human test subjects (Bhatt 2011). Investigators have observed researchers failing to follow the approved investigational plan and conducting their studies by a plan that has little to no resemblance to the study described in the associated informed consent documentation (Bhatt 2011). FDA investigators also noted a failure on the part of researchers to submit progress reports to the regulatory administrations that oversee studies in every involved country (Bhatt 2011).

Because of the lack of regular communication, ethical violations often aren't caught until they have already had an adverse effect on the human test subjects. One of the most dangerous and most common violations has to do with researchers' failure to adequately make risk determinations, which entails explaining all of the possible negative side effects that could be associated with the trial treatment. In the most extreme cases, deviations from stated risk determinations result in vulnerable populations' acquiring new health problems over the course of a study. Some subjects have even been intentionally introduced to new diseases to be able to test possible remedies (Adashi 2011). In addition to the previously mentioned issues, FDA investigations found that many clinical trials lack qualified monitors, which exacerbates all of the problems previously described because violations cannot be caught in a timely manner (Bhatt 2011).

Beyond simply breaking the rules, investigators also discovered that many studies forgo obtaining FDA or Institutional Review Board (IRB) approval and conduct their studies outside of any kind of administration that protects the rights of human test subjects (Bhatt 2011). One study found that 56% of 670 studies in developing countries had never had their research reviewed by an IRB (Glickman 2009). Another study in 2004 found that 90% of published clinical trials conducted in China had not been reviewed by an IRB or an ethics committee (Glickman 2009). The same study found that only 18% of researchers involved in those clinical trials discussed informed consent with their research participants. Even in cases in which researchers obtained approval from a regulatory body, the IRB and ethics committee investigators in the developing countries housing clinical trials often do not realize that they have the right to look at the work of researchers (Glickman 2009). In many of these cases, no regulation takes place once a study has begun, fostering an environment in which ethical violations thrive.

Ironically, at the core of the failure of global regulation is an overabundance of interested parties. Researchers outsourcing their clinical studies are subject to the regulations of every country involved, including every country where they may want to distribute the tested drug (Cekola 2007). Between the 145 nations Americans use to conduct clinical trials, there are over 2000 international IRBs (Adashi 2011). That calculation does not include the regulatory administrations in the United States or Western European countries where the tested drugs will most likely be marketed.

Regulatory bodies are usually designed to monitor the quality of clinical trial data and the safety of drugs in their domestic markets, and the adaption to better investigate global markets and international trials has been a slow one (Glickman 2009). Modern regulatory administrations have limited access to information on many aspects of research conducted outside of their immediate jurisdictions, including information on the sites, researchers, human test subjects, and the quality of trial data (Glickman 2009). Additionally, with so many regulatory bodies working together on international clinical trials, many groups struggle with understanding how much attention they need to offer a specific study and many lack the oversight necessary (Glickman 2009).

Even if the existing regulations were properly enforced, the United States has systemically created

an environment for clinical trials in which the rights of foreign human test subjects lack adequate protection. United States' regulatory bodies permit drugs tested in foreign countries to be sold in America under conditions special to these kinds of trials. While the United States demands that foreign studies permit on-site inspection of their clinical trials by the FDA, this particular stipulation is not necessary for all trials conducted in other countries (Cekola 2007). The biggest deviation from standard American regulatory procedure is that clinical studies conducted in foreign countries do not need to meet full IRB and American regulation standards.

If researchers conducting a study choose to rely on a foreign Investigational New Drug Application (IND) for their approval, they may encounter similar demands as in American INDs, but with a different execution. In more medically advanced countries, the processes involved in a foreign IND may be even more strenuous than for an American IND. In India, to complete an IND, a researcher must complete four phases of testing on human subjects, whereas American standards only require three, and the Indian requirements for how to get informed consent from potential participants are more extensive (Cekola 2007). However, studies of other developing countries have found that the inadequate regulations placed on researchers within those nations often permit unethical studies to take place (Glickman 2009).

On many occasions, even countries that do have adequate regulation policies similar to the United States' lack experienced regulatory investigators (Glickman 2009). Many regulatory investigators in developing countries do not understand the concept of transparency. They do not understand their right to look at the work of researchers operating in their countries and instead leave studies uninterrupted with no enforcement of the country's legal regulations after their initial approval (Glickman 2009, Bhatt 2011). Without the necessary oversight, many clinical trials have been conducted and completed without any communication between the researchers and regulatory investigators, as well as with major deviations from protocol and inadequate informed consent from human test subjects (Bhatt 2011). Many foreign INDs are not particularly effective or trustworthy, but they still control whether a clinical trial can be completed and whether the resulting drugs can be sold in the United States.

If American researchers decide to circumvent

using an IND to get approval, they only need to conduct studies “in accordance with ethical principles acceptable to the world community” as defined by Helsinki V of the Declaration of Helsinki (Cekola 2007). The Declaration of Helsinki offers global stipulations for how ethical studies should be conducted. The largest problem with using Helsinki V is that it is outdated. The most recent Helsinki declaration, Helsinki VI, includes a section on protecting the interests of economically and medically vulnerable populations that Helsinki V lacks. Helsinki VI has more stipulations for how informed consent can be “freely given” in light of the financial compensation and medical treatment that clinical trials offer participants in developing nations that may coerce them into joining an unethical study.

Helsinki VI also requires that the drugs tested on a population will benefit the same population. The medications that Americans rely on are too expensive for the poor populations of developing countries, a fact that challenges the interests of American pharmaceutical companies. The United States’ adherence to an outdated Helsinki declaration permits a broad range of ethical violations that are particularly prevalent in today’s outsourced clinical trials, including coercing individuals into giving their consent and offering treatment that only lasts as long as each phase of the study.

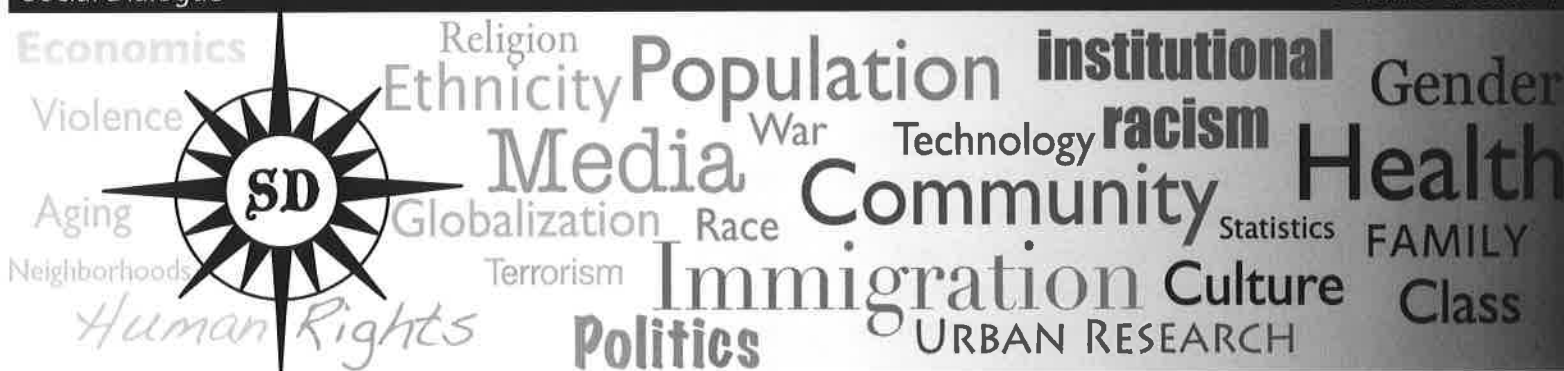
Furthermore, the benefits from clinical trials are only temporary for the poor populations of developing countries. After the clinical trials are over, the populations of developing countries don’t receive the benefits of medical breakthroughs despite the fact that said breakthroughs would not have been possible without their participation (Cekola 2007, Glickman 2009). Although a significant number of countries adhere to Helsinki VI, the stipulation requiring that the drugs tested in a country will be accessible to the country’s population afterward is realistically almost never followed (Cekola 2007). Even medications that seem relatively accessible and affordable to Americans are still extravagantly expensive for the poor populations of developing countries (Cekola 2007, Glickman 2009). For example, a prescription of Cialis in the United States can cost as little as \$9 depending on one’s insurance coverage, but the same prescription costs 400 rupees in India--the equivalent of four days’ salary (Glickman 2009). As a result of the economic disparities between industrialized and developing countries, the drugs tested in the latter tend to benefit the former (Glickman 2009).

## CONCLUSION

Outsourcing of clinical trials relies on inequality and perpetuates stratification while American pharmaceutical companies prosper. Outsourcing has created an environment in which the poor populations of developing countries only have two options: participate in a clinical trial or endure a medical condition without treatment. If they choose a clinical trial, they often face treatment that would be considered unethical in the United States, but such treatment goes unnoticed or is even condoned when dealing with vulnerable populations. Once the trials are over, the inhabitants of developing countries have access to the same inadequate health care as they did before, but the populations of wealthier nations have the means to be healthier than ever. Through the current system of globalizing clinical trials, people of developing nations participate in broadening the wellness gap between themselves and developed countries in order to receive the sort of medical attention many Americans take for granted.

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## Migration and Aging: National Demographic Trends

By Pete Loebach

The composition of the United States is in the midst of an unprecedented transformation largely driven by two separate demographic processes: the changing impact of the Baby Boom and the second great wave of immigration at the end of the 20th century. This paper will highlight how these forces have affected the composition of the US and will demonstrate that immigrants help to fill gaps in the nation's age structure left by the aging Baby Boomers.

In the United States, Baby Boomers are identified as those born from 1946 until 1964. This generation is largely defined by their high birth number—a demographic “boom” in births—due to birthing activities of their parent generation. The American late baby-boom cohort was a full 90% larger than the WWII era birth cohort (Myers 2005). The phenomenon of the baby boom is not an altogether American one. A bulge in births and a rise in fertility rates occurred following World War II in the US, Ireland, Britain, Australia, New Zealand, France, and Scandinavia (Caldwell 2004).

Generally identified causes of the boom are the return of war soldiers, patriarchal family models that did not yet include women in the work force, the non-availability of contraceptives and a period of unprecedented economic growth and high job security (Caldwell 2004; Easterlin 1973; Myers and Pitkins 2009). Following the baby boom birth years, change in sexual mores, the availability of contraceptives and opportunities for women to participate in the workforce all contributed to a drop in fertility and the valley that followed the baby boom peak.

The implications of the Baby Boom are extensive and long-lasting. For one, Boomers influenced the size of later birth cohorts because they themselves became parents. While they had a markedly low birth rate compared to the preceding

generation, because of their large numbers they still drove an echo boom in births, although this echo boom did not reach the peak in terms of sheer number of births of the baby boomers themselves (Perlich 2008).

Immigration trends in 20<sup>th</sup> century America are twisted and non-linear. Immigration levels and compositions have been irregularly shaped by political policies, national ideological factors, and international economics (Massey 1988; Massey et al. 2003). Immigration in 20<sup>th</sup> century America has been variously conceived according to general epochs, defined by the composition and level of migration. Charles Hirschmann conceived of two major epochs in American migration. Hirschmann refers to 1880-1924 as the “Age of Mass Migration” (Hirschmann 2006). During this period, immigration to the US was composed primarily of Europeans from the southern and eastern regions of the continent. Hirschmann claims that following this period there was a relative lack of migration until 1965, the beginning of the second epoch of migration. Hirschmann is correct in emphasizing these two periods as those of greatest migration in 20<sup>th</sup> century America, although in emphasizing these periods, Hirschmann neglects the very significant wave of Mexican migration beginning in 1942 and peaking in 1955 largely due to the Bracero program. Under the Bracero program, the US national government negotiated with Mexico the admittance of temporary agricultural workers. Large numbers of illegal workers accompanied these legalized workers. During the 1942-1955 period, a not insignificant 4.6 million temporary workers (the bulk illegal) and 565,000 permanent immigrants entered the US from Mexico, pushed by a rapid increase in the size of the Mexican population (Massey 1988; Massey et al. 2002). After a 1955 peak, migration levels

plunged until 1965.

A resurgence of immigration primarily from Latin America and Asia began in 1965. A central pull factor driving this migration wave was enactment of the 1965 Amendments to the Immigration and Nationality Act. Push factors contributing to this wave included displacement of Mexican agricultural workers due to modernization of the Mexican agriculture sector and the establishment of Mexican migrant networks during the Bracero era from 1942-1955 (Massey 1988; Massey et al. 2002). This migration wave has very significant demographic implications. The vast majority of new entrants are racial and ethnic minorities, with the implication being an increasingly more racially diverse America. In the year 2005, more than 60 million Americans enumerated in the census were either 1<sup>st</sup> or 2<sup>nd</sup> generation Americans, with more illegal immigrants likely undercounted.

The effect of migration on the demographic composition of a destination population does not end with the addition of migrants to the population. Migration adds to a population not only the migrants themselves but also their children birthed in the new destination. These numbers are often high due to the migrants' being of child-bearing age (Massey 1992). According to the year 2000 Census, 79% of new arrivals in the country were under the age of 35 and squarely in the fertile, 15-44 age range (US Census Bureau 2000). The young age of migrants combined with the high fertility rates of Hispanics (Sutton and Hamilton 2011), has increased minority births. The 2010 census found all birth cohorts under the age of 40 to be more than 40% composed of minorities and those under 5 years old to be 49.2% composed of minorities (US. Census Bureau 2010)

Despite the drop in birth rates after the Baby Boom, the 1990 birth cohort is estimated to exceed the population peak of the baby boom cohort at the same age (Carlson 2009). The reason? Immigration. Those born in the US in the year 1990 are not only the children of the baby boomers but also the children of migrants. The long-term demographic implications of this fact are significant. Due to the number of minority youth, groups now considered minorities will approach population levels of whites as older cohorts die off. The US Census Bureau projects that by the year 2050, minorities will actually exceed non-minorities, and the US will become a country that is a

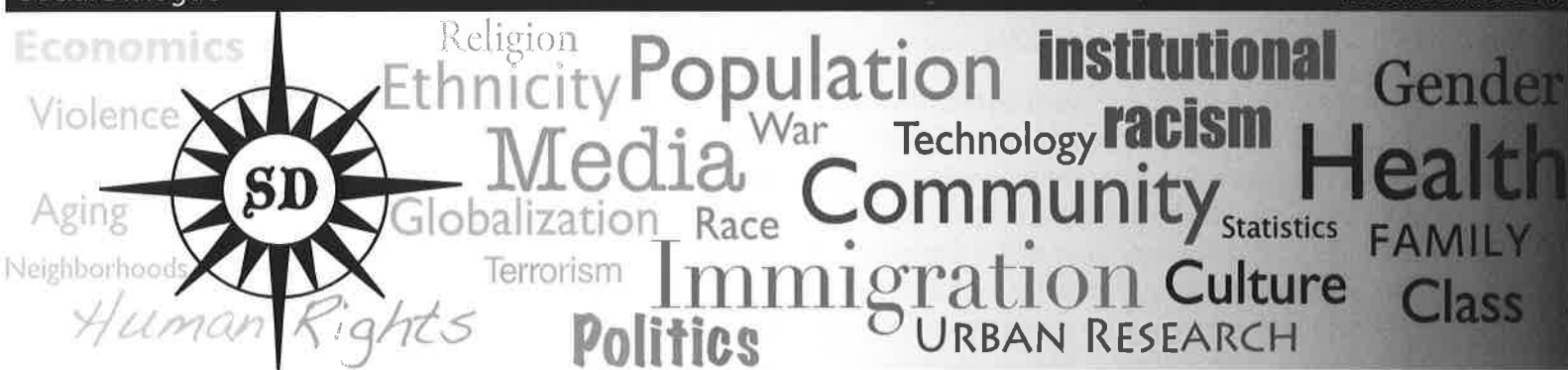
majority, minority (U.S. Census Bureau 2008).

A proportionately large, aging generation poses a challenge to a society. The Baby Boomers are nearing retirement age, which has serious implications for a society that will have to support them. Advancements in health care are resulting in higher life expectancies—a blessing and a curse. Projections indicate that the US will have a climbing dependency ratio until the year 2050, with fewer working-age adults for each non-working age adult over the age of 65 (Perlich 2008). Fortunately for the US, immigrants have helped fill a devastating gap in our age structure, a boon not present in many of the countries of Western Europe and East Asia that also have an aging baby boomer generation. While migration has mixed impacts on sending countries—providing vital foreign currency reserves at the heavy cost of brain drain (Page and Plaza 2006)—it is a godsend to developed countries with an aging social structure and a need for labor in domestically undesired jobs.

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# The Criminalization of Homelessness

Justin Babbel

## INTRODUCTION

Outside of the homeless themselves, few people truly understand the challenges associated with being homeless in the United States. This paper seeks to shed light on the plight of the homeless population by explaining the extent to which such individuals are demonized and punished for no other reason than their being down on their luck. Potential solutions are also offered.

The focus of lawmaking in recent years has been on criminalizing homelessness, an approach that has proven ineffective in decreasing the number of homeless individuals living on our streets. Persons experiencing homelessness are often seen as the problem, rather than what they really are: the byproduct of dysfunctional economic and social structures.

While there is no real consensus as to the root causes of homelessness, many social scientists and advocacy groups recognize the need to do something other than prosecute those experiencing homelessness. Local policy, however, often centers on criminalization via the prohibition of sleeping in public places, panhandling, camping and in some cases even the feeding of persons experiencing homelessness (Fang 2010).

In addition to laws that outright criminalize homelessness, many other factors, such as an inadequate social safety net and prejudicial beliefs regarding the homeless, exacerbate the situation (Deverteuil et al 2009). The homeless population features disproportionately high rates of disabling conditions when compared to the general population, yet many of them lack the resources to obtain much-needed treatment.

## HEALTH AND HOMELESSNESS

One major issue of particular concern to the homeless population is the negative attitudes toward the homeless, especially those suffering from some form of mental illness. This problem is discussed in Kurt Borchard's article "Between Poverty and a Lifestyle: The Leisure Activities of Homeless People in Las Vegas." Borchard discusses the misperceptions of homeless people as being lazy and living a decadent "homeless lifestyle" (Borchard 2010: 441).

Inaccurate portrayals of the homeless as lazy or dangerous lead some politicians to try to make persons experiencing homelessness effectively disappear in order to please their constituents. This phenomenon is discussed in a study by Amy Donley that found political orientation, structural causes and social desirability to be negatively correlated with the belief that homeless people are dangerous.

As mental health issues seem to be a major contributor to homelessness, mental illness serves as an appropriate jumping-off point. In the 1980's, new policies decentralized nationwide and statewide initiatives designed to care for persons experiencing homelessness, effectively putting more emphasis on neighborhood centers. While this transition looked good on paper, such facilities lacked the capacity to care for the subsequent influx of patients. As a result, many homeless were left on the streets to fend for themselves.

What little government aid that does exist today is woefully inadequate. While some housing is available, it is primarily directed toward helping families or accessible only on a night-by-night basis.



Despite recent efforts to expand the mission of such housing, shelters designed to help the chronically homeless or those experiencing mental illness are few and far between. Many shelters, despite the best efforts of dedicated employees and volunteers, unintentionally exacerbate the problem by keeping those experiencing homelessness out of the public eye. Furthermore, even the most best shelters lack the capacity to address the social and structural causes of homelessness, and the demand for their services is almost always greater than their capacity to provide them.

### STRUCTURAL ISSUES

In addition to the lack of a roof over their heads and a dearth of regular meals, persons experiencing homelessness face persecution at the hands of the very government charged with protecting them. Anyu Fang discusses some of the laws that essentially punish the homeless population for little more than being homeless. Among the most egregious laws are those that forbid citizens from feeding those experiencing homelessness, which Fang views as “an incredibly disturbing trend” (Fang 2010: 1).

Fang also points to laws such as anti-sleeping laws which prohibit persons experiencing homelessness from sleeping in public spaces despite their having nowhere else to go. Fang details one law in Eugene, Oregon that actually requires the homeless population to register in order to beg. This attempt to restrict the rights of the homeless clashes directly with the Supreme Court ruling that established panhandling as a “protected form of free speech” (Donely 2008: 102). Not only does the government persecute persons experiencing homelessness, efforts at urban revitalization further restrict access to affordable housing by allowing small, cheap apartments to be turned into “gentrified family dwellings...causing the poor to either move or become homeless” (Fang 2010).

Once people become homeless, they find their personal problems becoming increasingly politicized by local politicians, many of whom often try to save face instead of fixing the problem. In her recent article titled “The Cruel and Unusual Criminalization of Homelessness: Factoring Individual Accountability Into the Proportionality Principle” Elizabeth O’Connor tells of an anti-sleeping law that was repackaged as

a more politically viable “no camping” law after the former was struck down by a Florida judge. This law makes it illegal in Sarasota, FL to sleep in public spaces or anywhere without city approval while “Atop or covered by materials” (O’Connor 2007: 234).

Many similar laws have since passed throughout the United States. Geoffrey Deverteuil et al, in an article titled “Complexity, not collapse: recasting the geographies of homelessness in a ‘punitive’ age” refer to such “quality of life” laws as being “designed to make survival on the streets as difficult as possible for the city’s homeless” (Deverteuil 2009). The article addresses the concerns of the homeless population in a geographical context as the areas to which they used to flock are now being retaken and gentrified through a process the authors refer to as “Revanchism,” a word used to describe the process whereby a group or tribe regains lost territory (Deverteuil 2009).

With a new spate of laws that do not allow persons experiencing homelessness to eat, sleep, or ask for money, new programs will be needed to address their concerns. In an article titled “Addressing the Needs of the Street Homeless,” Chau et al discuss a study of street-level outreach programs that target the street homeless, as they are the hardest percentage of homeless to reach. This program gave food, medicine, shelter and other provisions to the homeless population. At the end of the study, the authors determined that “street level outreach programs are very effective and should be implemented with collaboration between health, housing and social services agencies” (Chau et al).

While street level outreach is beneficial and would vastly improve the problem of homelessness, a major issue regarding homeless interventions is that the services are short term solutions (Culhane 2008). Culhane and colleagues discuss the ramifications of trying to hide homelessness by outlawing it and state, “It is likely that only interventions for the most costly cases of homelessness can be completely offset by reduced use of acute care services” (Culhane 2008: 117). Given the expenses associated with widespread homelessness, state and local governments would do well to develop housing approaches through HUD and other agencies instead of the current practice of merely rearranging the deck chairs.

These issues are serious concerns for persons experiencing homelessness, and as such they try to

adapt by hiding in plain sight. While they cannot hide in parks or public spaces, some homeless have turned to public transportation as a place to stay safe and warm.

The homeless population in cities such as Santa Barbara, California have attempted to gain some "social legitimacy" (Wakin 2008) by converting old RV's into places to sleep and to call home. This is discussed in Michelle Wakin's article "Using Vehicles to Challenge Anti-sleeping Ordinances." Many said they took this approach as "The RV keeps us here and also warm, dry and somewhat respected" (Wakin 2008: 318). As is the case of persons experiencing homelessness however, Wakin describes that the cities start to over enforce vehicle regulations such as maintenance, which the homeless population cannot afford to keep up with.

In light of all this information, it seems logical to conclude that the problem does not solely rest with the homeless population. The government does not provide adequate assistance, and in some cases it even transfers the responsibility--often informally-- to NGO's, a practice that allows the government to cut its budget accordingly. Some governments go even further by passing laws that make it impossible for persons experiencing homelessness to eat, sleep or just be.

It is obvious that homelessness is a real problem, but the criminalization of it should not be the solution. Policies need to be implemented at every level of government--from townships and municipalities all the way to the federal level in order to decriminalize homelessness. With federal monetary backing the states could perform studies and determine real numbers in regards to the homeless population, while building larger facilities to house them.

Welfare to work programs had success in the past and a similar approach may be beneficial to persons experiencing homelessness. If the state were to implement something similar while providing jobs and medication as well as accommodations to the homeless population, they might just be able to get back on their feet.

Criminalizing homelessness to hide the problem is not the best approach and serves only to harm the homeless population. When coupled with the gentrification of urban society and the ongoing economic crisis, the problem of homelessness could

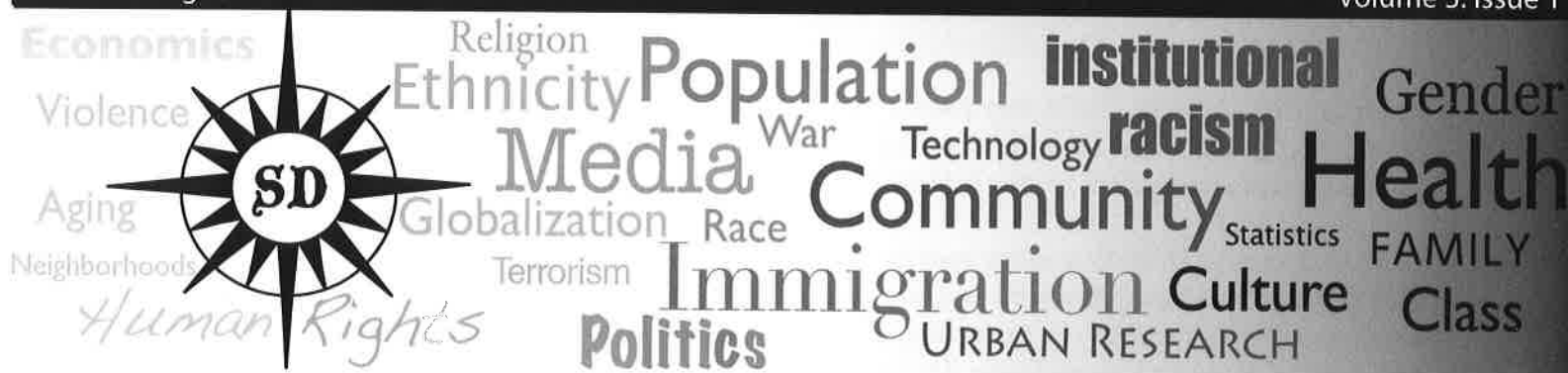
turn from a significant but manageable problem into a crisis of epic proportions.

## CONCLUSION

In sum, the anti-homeless laws need to be reconsidered with an emphasis on better assistance and public ads that promote understanding rather than fear. We need to turn the attention of public policy to the plight of the homeless population so they can be helped rather than continue with policy that criminalizes them. If policies such as welfare to work or more government assistance are implemented it would be a start in the right direction to ending the systemic failures that only add to the problem of homelessness.

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# Measuring Religiosity in the Social Sciences

Tom Quinn

## INTRODUCTION

One of the challenges associated with studying the effect(s) of religiosity on mental health has to do with the conceptualization and operationalization of religion. Religious practices and beliefs are highly subjective and vary widely even within a single tradition. The operational definition of religiosity is of particular concern to those seeking to quantify the relationship between faith and mental health, as similar studies have been shown to produce dramatically different results depending on how religion was measured in a one study vis-à-vis another.

McCullough and Smith (2003), for example, performed a meta-analysis on approximately 150 peer-reviewed articles that found that the relationship between religiosity and depression ranged from moderately negative to faintly positive depending on the type of religious behavior examined. In the past, researchers have attributed such contradictory findings to a failure to properly and consistently classify different types of religious behaviors (Bergin, 1987).

Aside from simple grouping by denomination, the most common means of classifying and/or analyzing the aspects of a given religion involves separating them into two domains: one that encompasses the comparatively private aspects of religion, and another that encompasses those that are more visible. The former, which is analogous to the concept of being "spiritual," comprises prayer, meditation and a feeling of closeness to God. The latter category, for which "religious" or "organizational religion" is used as a catch-all, comprises church attendance, involvement in voluntary associations and participation in activities

outside of formal services (Hill, 2003). Admittedly, the boundary between these two categories isn't always clear. Consider the matter of prayer. Would saying a silent Hail Mary fall on the spiritual side of the spectrum for its silence or the religious side for its connection to a particular organized religion? The answer would likely depend on the opinion of the researcher. Further complicating the issue is role of denomination, which is often seen as one of the major components of organizational religion despite its tendency to influence purely spiritual practices as well.

Although the religious/spiritual paradigm is generally accepted and widely used, recent research has encouraged those studying mental and physical health to move beyond the traditional either/or viewpoint and reframe the discussion in more nuanced terms (Hill 2003, Cotton, 2006). This paper seeks to critically evaluate the utility of the religious/spiritual dichotomy in the study of mental health by examining the relevant findings from within each domain and discussing the advantages and limitations associated with its use. Finally, this paper considers denomination both as a stand-alone measure and as potentially having a mediating effect on measures that fall within both the religious and spiritual domains.

## SPIRITUAL BEHAVIORS AND MENTAL HEALTH

Comprising such concepts as one's relationship to God and one's place in the universe, spirituality represents what some would consider the essential aspects of faith. Considerable evidence seems to support its centrality, as the effects of spiritual attitudes and behaviors on mental health are generally among the most positive and statistically significant

even after controlling for other types of social and psychological resources. Krause (1995), for example, found that adults who described themselves as having strong religious faith reported greater life satisfaction, lower levels of depression and higher self-esteem than those who expressed indifference toward religion. Similarly, Ellison (1991) concluded that the unique point of view associated with spirituality—which christened “existential certainty”—was associated with greater personal happiness and an increased ability to cope with negative life events. Finally, Koenig et al. (1998) noted that clinically depressed adults who reported high levels of spirituality recovered more quickly from depressive episodes than did their less religious counterparts.

In addition to attitudes and beliefs, behaviors like prayer and meditation tend to be included within the spiritual domain. Like the abovementioned attitudes, these behaviors are widely thought to have a positive effect on mental health. Frequency of prayer, for example, is thought to be negative correlated with both depression and suicidal ideation among adolescents (Nooney, 2005).

As convincing as such findings may be, there is still debate regarding what effect, if any, spirituality and/or spiritual practices have on mental health outcomes. Some researchers, for example, have found that intrinsic religious behaviors have no effect whatsoever on mental health outcomes and can even exacerbate depressive symptoms in some circumstances (Strawbridge et al., 1997). Other researchers have concluded that the effects of spirituality on mental health are contingent on the extent to which an individual has internalized a given belief system (Pargament, 2009). Still others have argued that the positive effects of religious involvement on the lives of believers follow a curvilinear pattern, and that those on either end of the spirituality spectrum benefit the least from spiritual behaviors and/or practices (Ross 1990).

One possible explanation for such divergent findings has to do with context. Some research suggests that the effect of spirituality on mental health varies from one situation to the next, a fact that could explain conflicting outcomes without necessarily invalidating the main effect in question. Maton (1989), for example, concluded that the salutary effects of a perceived relationship with God are more pronounced in times of stress or crisis. In other

words, inconsistent findings could merely be the result of a failure to adequately control for mediating variables, particularly those that are extrinsic to the individual.

An equally plausible—though more problematic—explanation has to do with inconsistencies in measurement. Many aspects of spirituality are unique to the individual, a fact that makes measurement particularly challenging—especially when one considers the imprecise measures on which researchers rely. Strength of belief is often assessed via 4–5 item scales in which respondents answer questions about their beliefs or state the extent to which they agree or disagree with a religion-oriented statement. Such items are rarely represent the focus of the study and thus rank somewhere between designated control variables and obvious afterthoughts in terms of their utility (Hill, 2003). While some such items are relatively straightforward (i.e. “Do you consider yourself a spiritual person?”) others are somewhat more open to interpretation based on an individual’s religious orientation (i.e. “Angels are present to watch over me.”). Furthermore, the wording of questions designed to measure intrinsic religiousness is not always consistent from one study or one wave to the next, a fact that undermines direct comparison.

## RELIGIOUS BEHAVIORS AND MENTAL HEALTH

Formal religious behaviors—such as frequency of church attendance and participation in activities outside of traditional services—are also thought to be related to mental health outcomes. Witter et al., for example, found that church attendance was more strongly correlated with subjective well-being than were religious salience interest in religion, a fact that suggests that the social aspects of religious involvement are more important in determining positive mental health outcomes than a strong commitment to one’s chosen faith. Similarly, activity within a religious organization has been shown to be negatively correlated with suicidal ideation, particularly among the aged (Nisbet et al 2000).

One advantage to measuring religiosity in terms of formal religious factors has to do with their relative concreteness. The difference between

“once or twice a month” and “several times per week,” is significantly easier to quantify than is the difference between “somewhat agree” and “strongly agree.” Furthermore, unlike the subjective notion of being “born again,” questions regarding attendance frequency generally do not require an elaborate explanation.

This method, however, is not without its drawbacks, as outward behaviors are not necessarily indicative of intrinsic motivation. Frequency of church attendance may not accurately represent one’s commitment to a given faith, especially where adolescents are concerned (Miller 2001; Wallace and Forman, 1998). As Dillon (2005) points out, someone could attend a church several times per week without ever exhibiting any kind of deeper spiritual connection to the congregation or church doctrine.

Although religious behaviors tend to be more quantifiable than their religious counterparts, there is little consensus on the extent to which the effect of religiosity on mental health is unique to faith-based associations. While research has shown that those who attend church regularly tend to have larger social networks and more frequent contact with friends and acquaintances (Ellison and George, 1994), it is not clear whether an individual could derive similar benefits from, say, a fantasy football league. According to Ellison et al. (1995), the association between service attendance and subjective well-being remained significant even after controlling for other sources social support. Nooney (2005) in contrast, found that the effect of attendance frequency on depression weakened considerably when controlling for other sources of social support, and its effect on suicidal ideation disappeared altogether.

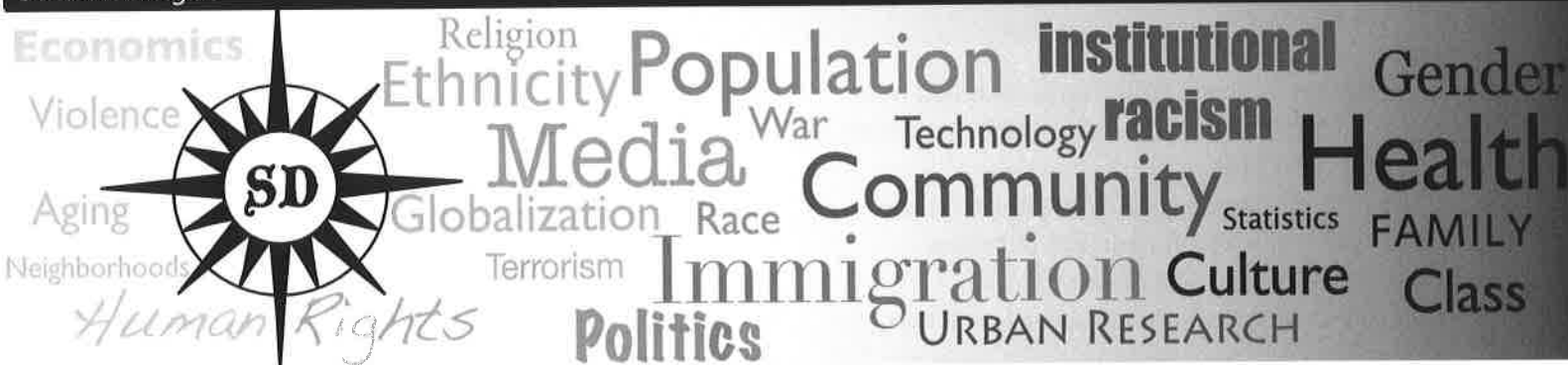
As was the case with measures of spirituality, the effects of organizational religious factors have been shown to interact with other variables of interest. Petts and Jolliff (2008) found that the effect of religion on depressive symptoms varied by both race and gender. Among Asians, for example, religious salience was shown to be negatively correlated with depression, while the exact opposite was true for Hispanic males. The relationship among Hispanic females proved to be more complex; those on opposite ends of the spectrum (i.e. the most and least religious) reported feeling more depressed than those in the middle.

## CONCLUSION

The empirical data presented within this review point to a potential causal link between religion and mental health. Although there remains considerable amount of debate regarding mechanisms at work, promising explanations abound. Unfortunately many researchers’ efforts are still hamstrung by survey data that are—in some cases—only tangentially related to the sorts of questions they would like to ask. With luck, a growing interest on the parts of sociologists (Hill, 2003) will lead to increased standardization and more precise measures. Similarly, sociologists would do well to consider a more nuanced framework than that provided by the traditional religious/spiritual dichotomy. As the divergent findings presented in this paper indicate, the relationship between religion and mental health is too complex for a binary construct.

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## Life After the NFL (and Other Life-Changing Experiences)

### Responses to a Symposium Held by Dr. Julie Stewart

#### *Introduction*

DR. JULIE STEWART

I would like to thank all of you for attending this event. I understand that we have about 180 students here with us today. This is tremendous, given that this is the last week of classes, right before the crunch of final exams begins.

I would also like to thank the sponsors of this event, the University of Utah Department of Sociology and the Sociology Student Advisory Committee (SSAC). Finally, I would like to thank Candy Sorenson – our department's undergraduate advisor – and Heather Melton, our director of undergraduate studies, for their help with this event.

And last but surely not least, I want to thank Angela Holland and Quinton Ganther for agreeing to share their stories with us today. As we will hear shortly, Quinton is a former NFL Running Back who has played with the Tennessee Titans, Washington Redskins, Seattle Seahawks and Buffalo Bills. He is also the father of four and has made the decision to return to the University of Utah to finish his degree in sociology. Ange is the incoming President of the University of Utah Non-Traditional Students Club. She is also the mother of four and after many years of devoting herself full-time to her family and community, she has returned to the University of Utah to pursue a degree in psychology, with a minor in sociology. I am so pleased that Quinton and Ange are here today.

Before I turn the time over to our main speakers, I wanted to share some statistics relevant to graduating from college. I will also provide a particular focus on some of the challenges and rewards of attending the University of Utah. Finally, I would

like to share with you all some of my memorable college experiences and why a college degree is uniquely important to me and members of my family.

From time to time, we all need a reminder of why we're here. For you as students, perhaps you are pursuing a college degree because you know that a college degree has historically been a magic key, unlocking most doors which lead to social mobility.

For example, highly educated people are more likely to vote, to own their homes, to volunteer in their communities, and to acquire high-paying and more stable jobs (Fraga et al 2010; Hochschild & Scovronick 2004; Verba, Schlozman & Brady 1995). In fact, according to data provided by the United States Census Bureau, over an adult's working life, high school graduates can expect, on average, to earn \$1.2 million; those with a bachelor's degree can expect to earn \$2.1 million. That translates into the fact that over the course of your life, the average college graduate can expect to earn approximately one million more dollars than his or her counterpart with a high school diploma.<sup>1</sup>

But that's not the only reason to go to college: as someone who has devoted her life to a pursuit of learning, I can attest to the value of knowledge and how much richer it makes one's life. As anyone who has taken social theory with me knows – in the words of Michele Foucault, Dorothy Smith and others – “knowledge is power.”

But that's easy to forget, particularly when you're trying to get through the next week, the next

<sup>1</sup> For full information, please access the report entitled “The Big Payoff: Educational Attainment and Synthetic Estimates of Work-Life Earnings, available at: [http://usgovinfo.about.com/gi/o.htm?zi=1/XJ&zTi=1&sdn=usgovinfo&cdn=newsissues&tm=7&f=00&su=p284.13.342.ip\\_&tt=2&bt=0&bts=0&st=8&zu=http%3A/www.census.gov/prod/2002pubs/p23-210.pdf](http://usgovinfo.about.com/gi/o.htm?zi=1/XJ&zTi=1&sdn=usgovinfo&cdn=newsissues&tm=7&f=00&su=p284.13.342.ip_&tt=2&bt=0&bts=0&st=8&zu=http%3A/www.census.gov/prod/2002pubs/p23-210.pdf) (Last accessed June 7, 2012).



exam, or the next project. And this is all much more stressful if you're the average undergraduate student at the University of Utah.

Who is the average undergraduate student here? According to official statistics from the university, there are approximately 23,275 undergraduate students pursuing a Bachelor's degree. The vast majority of you come from the state of Utah. Your average age is 24 years old and 86% of you commute to campus.

By the time you have a couple of college years under your belt, approximately 50% of you are partnered or married and over 21% of you have children. Finally, most of you combine this pursuit of a college education with work. Nearly 26% of you work 11-20 hours a week, nearly 27% of you work 21-30 hours a week and 31% of you work 31 or more hours a week!<sup>2</sup>

The stress of combining this educational goal with a devotion to family and a need to work – not to mention the significant tradition in this state of volunteering to provide military or religious services outside of this state – means that many of you leave your university studies for a significant period of time. But many of you come back.

According to the ASUU Non-Traditional Student Outreach Board, non-traditional students comprise over 50 percent of the student body at the University of Utah.<sup>3</sup> As the ASUU site expresses it, these OWLs (older, wiser learners) have much to offer our university. But they also face considerable

2 These data come principally from three university sources: Common Data Set 2011-2012, Office of Budget & Institutional Analysis, The University of Utah Spring. <<http://www.obia.utah.edu/ia/cds/2011-2012/index.html>> (Last accessed 5/29/2012); Summary of Student Enrollment, Table A6, Headcount Enrollment by By Utah County of Origin and Academic Level. 2011 Autumn Semester Census. <<http://www.obia.utah.edu/ia/stat/2011-2012/ss1112A06.pdf>> (Last accessed 5/29/2012); Office of Budget & Institutional Analysis, Graduating Senior Survey, 2008. [http://www.obia.utah.edu/dm/sdm/index.php?s=grsn\\_2008&t=progression](http://www.obia.utah.edu/dm/sdm/index.php?s=grsn_2008&t=progression). (Last accessed 5/24/2012).

3 For further information on this statistic, please visit the ASUU Non-Traditional Student Outreach Board's website: <http://www.asuu.utah.edu/boards/non-traditional-students/> (Last accessed June 7, 2012). I should note that definitions of "non-traditional students" vary across the university. The most expansive definition would include any student who is either over age 25, a graduate student, a married student, a Veteran Student, an International Student, or students with children (single parents).

challenges.

Whether you are a traditional or returning student – under-represented or a member of a major racial/ethnic group – we all need reminders of why we are here and what we hope to accomplish. I think this is particularly true for our student athletes, who are here pursuing knowledge and a college degree even as they are meeting athletic demands that are often equivalent to those of professional athletes.

The experience of being a student athlete is near and dear to my heart. Many of you will be surprised to know that as an undergraduate student, I played women's rugby. One day my roommate came home and announced she was going to try out. I had a background in long-distance running, but no experience with team sports. But I thought: Why not give it a try?

In short order, the rugby coach informed me of something I already knew: I completely lacked hand-eye coordination. Add a ball to the mix, and there was even bigger trouble. But the coach said she would let me train with the team and see how things went. So I trained hard, attended all of the practices and basically forced my college roommate to be my tackling dummy. And after probably literally hundreds of times trying to take down Carolyn, I realized I had one skill quite relevant to rugby: tackling people. But this came only after a lot of hard work. During each season, instead of going out to a movie or a party on the weekend, I hit the weight room. Instead of sleeping in, I put on a pair of running shoes and ran for two hours.

So when it was time for a match, I was ready. And boy, was I nervous each time. In my case, though, the stakes were pretty low. The morning of the match, we showed up in the park, painted the pitch and people brought lawn chairs to watch. Our spectators supported us whether we won or lost, and there was always a party afterward.

Here at the University of Utah, though, college athletics takes place in stadiums, not in parks. Rather than audiences that number in the dozens, tens of thousands of people – if not more – are watching. There are television contracts. There are commercial endorsements. There are games and bowls to be won and conference titles at stake. And quite literally, hundreds of thousands of dollars are hanging in the balance. Let's just say the stakes are high.

And that is why I have so much respect for



our student athletes. Even as they write memos for my social theory class, they are balancing all of these other demands. As intense as it is, I want you to remember that college is not the end. It is the beginning. That's why I was so pleased to learn Quinton's story and invite him to speak today. But I also wanted to share why I am so impressed with people like Ange, who has returned to college – and is excelling in every way – even as she is the primary parent of four kids.

Some of you may know that my mom was a returning student. Let me tell you a bit of her story. My mom met my dad in her first year of college, while attending a rival school. I won't name the school, but let's just say its initials are BYU.

After that first encounter with my tall, dark and handsome dad, she was swept off her feet. I think it is safe to say he felt the same way. As he was a graduating senior getting ready to fulfill a military commitment that had helped pay for his college expenses, they decided to get married before he shipped off to Europe.

Of course, that meant that my mom had to drop out of college. Over the years, my parents had four kids and my mom devoted herself to her family, her church and her community. In everything she did and in every calling she received, she went above and beyond.

But she always had a yearning for knowledge. When my mom was nowhere to be found, you would always could find her holed up somewhere reading a book. My uncles reported that this was true of her from an early age.

With this almost unquenchable thirst for knowledge, my mom would often turn to my dad – the college graduate in the family – for answers. She thought that my dad – with his college degree – knew everything. She would often ask questions like, "Thell, what's the best way to solve unemployment? Or, how are we going to reduce our dependence on foreign oil?"

Inevitably, my dad would answer, "Kathy, how would I know?"

Well, my mom went back to school to get her own answers, and to set an example for her son and daughters. And the day she graduated, my dad congratulated her by saying, "Good job, Kathy, now you too, know everything!"

It's because of my mom that I have such

respect for all of the returning students who are mothers and fathers, who are making that extra sacrifice to set an example for their children. These students may not yet know everything, but they're ready for anything.

It is now my great pleasure to turn the time over to Ange, who will be followed by Quinton. For those interested in hearing the presentations that Ange and Quinton delivered on April 18, 2012, please visit the Facebook page of the Department of Sociology < <http://www.facebook.com/UofUSociology> > and look for link entitled "Life after the NFL."

And don't forget to keep reading. Excerpts from four excellent student essays follow.

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## *Motivation to succeed*

ANGELICA SAMANTHA LOPEZ

Listening to Ange and Quinton's story was eye-opening. College is certainly difficult and stressful at times, but it is a place I love and feel blessed to be in, especially as a first generation college student and the youngest of five children. I loved listening to their life stories because I could identify with their struggles. I know that although we are here persevering, the battle is not over yet, and the fact that two people who are in similar situations as mine—but with even greater barriers—are still here succeeding in college makes me feel like giving up is not an option. They did it, so will I!

What I found most inspirational about Ange's story was that despite dealing with lifelong verbal abuse and being a mother of four children, she was not afraid to get out, move on and pursue a career. Ange did not let her age, her having a family or the fear of failure prevent her from coming back to school and getting straight A's. I understood Ange when

she explained that there was a point where everyone doubted her capability of coming back to school and asked herself if this was the right choice for her, because I have many times felt like the University of Utah was not the place for me. In spite of these doubts, Ange believes in herself, and that belief inspires me to continue to believe in myself. With hard work and dedication, I know I can earn a degree.

Quinton's story was very emotional and yet inspiring. I realized that life is not always easy, but hardship is not a legitimate reason to give up. The combination of having a drug addict as a mother, a convict for a father and turning to the streets at the age of 12 must have made growing up extremely difficult. I was amazed that Quinton was able to pull through with football despite growing up in such circumstances. The part of his story that I found most motivational was when he said that he would arrive to practice an hour early to see how the teammates that were above him would work so he could work harder. What stayed with me is when Quinton said, "Sports are not forever, so educate yourself, and when you work hard, refuse to be outworked!" The fact that after so many years of struggling Quinton was able to pursue an education here at the University of Utah is both motivational and admirable.

I believe that receiving a college degree will personally help me achieve my goals. For me, education is my path away from all the struggles I have faced due to discrimination, negative stereotypes and a never-ending chorus of "you won't make it." I refuse to be one more of the dropouts, one more of the statistics about Hispanics leaving school or Latinas getting pregnant and doing nothing with their lives. A college degree will help me prove to myself that I made it, that I believed in myself when hardly anyone stood by me. A degree will allow me to do something meaningful. Education and a college degree is something I strive for each and every day. Every time I learn something new, I want to share it with the world.

Lastly, I want to get a college degree because I want to fulfill my parents' dream: a child of theirs completing higher education. My parents came to this country hoping for a future free of poverty and violence. Although I am the youngest, I have inspired one of my brothers to enroll in school and he is currently here at the University of Utah with me. I graduate in one year, and I do not plan on stopping

there. I want to continue to graduate school and receive a Master's degree in Criminology. Hearing the stories of people like Ange and Quinton is part of what keeps me going and giving it my all.

### *On the road to being someone I can like*

ANONYMOUS

I thought both speakers, Angela Holland and Quinton Ganther, were very good. They were both inspirational, and I was impressed that they were able to talk about their hardships with such honesty and confidence. I appreciated that both speakers were willing to pursue higher education whole-heartedly despite coming from backgrounds that would have made college virtually impossible for many.

Ange's life story touched me profoundly. Sometimes it can be hard to remember that other people at the University of Utah come from a background of abuse. What was most admirable about Ange's story to me was the bravery she showed in telling it. She just stood up there and said what she had gone through without fear or shame. I know I should talk about my own goals, and giving a little background on myself will help me get to that point.

I also come from a history of abuse. My mother was an alcoholic and a drug addict. She still is. I still depend financially on her; it is the only way I can pay for school. I grew up in an environment of extreme neglect and moderate abuse. I was a wreck during high school. I didn't attend classes, but I had already suffered so much educational neglect that I wasn't missed. I experimented with drugs and found myself in a great deal of transitory relationships. Abusive older man after abusive older man, my life was going nowhere.

Anyway, there is a long story there, but in many ways I feel like I have already succeeded. I took control of my life and steered it back onto a positive and constructive path. I have a boyfriend who is a first-generation student, and we help each other face the struggles of being a student with few resources and very little support. College, other than giving me a job where I can be completely financially independent (which is a dire necessity), will give me the tools to be who I want to be. I can relate to the part of Ange's presentation where she said "I didn't want to look in the mirror, I didn't like who I had become." I've also been at a point in my life

where I didn't like myself, and now I am on the road to being someone I can like. College, more than anything else, gives me confidence. It gives me confidence everyday that I can be something more than my background, more than the girl who was always behind in class, more than my mother. I can be smart, I can be successful, and through hard work, I can have everything that I used to think was a dream.

### ***I can do this***

**TARA ROMNEY BARBER**

I am always touched when I hear someone authentically recalling his or her life experiences. When someone is willing to honestly share the struggles and challenges he or she has been through, it is hard not to be moved.

Though I appreciated Quinton's story and found it honest and moving, I was especially touched to hear Ange's story, as obviously it is closer to my own experiences. Her entire story is quite inspirational; I find it amazing that she was able to keep her sense of self-worth in the face of abuse both as a child and later as a wife. It is a real testament to the resilience of the human spirit and to her as an individual.

What spoke to me personally is the example that she is setting for her four children about what is possible. She has given her children a real gift to see by their mother's example that with hard work and determination, they will be able to reach their goals, even in the face of what seem like insurmountable obstacles.

I can relate, having felt some intense "mama guilt" over the course of my first semester back at school, spurred by the change in my overall availability for my two sons. When I hear my boys tell people that they "miss me" and that they feel like I am "never around," I keep wondering if I am doing the best thing for my family or if I am being selfish by coming back to school.

Hearing how Ange's decision has been so positive in the long run for her family put me at peace with my decision. I am completely in awe of how hard both she and Quinton are working to accomplish their goals.

It has been a journey to realize what my goals are as an adult and how they differ from when I was

17 and first starting my college career. My goal is to be able to work with children who come from homes where abuse is or has been present.

A college degree is no longer a luxury; it is a necessity to be taken seriously. Dr. Stewart said something that really resonated with me: "the more knowledge you have, the richer you become." That is my goal, to become personally "richer." This journey is about keeping a promise I made to myself many years ago and about knowing that I can do it. The self-esteem that comes from keeping such a promise is priceless.

I believe we all have stories to share and obstacles to overcome. I love to hear those stories, and be a part of those stories, and I can't do that in the way I really want to without first reaching the goal of obtaining my undergraduate degree.

### ***Education is the only way***

**TAUNI JR. VAKAPUNA**

Of the two speakers, Quinton Ganther's life story hit particularly close to home because I could relate. We hear story after story of superstars who have beaten the odds to reach unexpected heights, but Quinton's story made the familiar refrain that much more tangible. As a young man, he could have easily given up when he was put in jail, but he decided to take control of his life. He was able to put himself in a position to become successful.

Even in the NFL, Quinton realized how important school really was. I remember talking to a former NFL player and his referring to the NFL acronym as, "Not For Long." I used to think of a diploma as a stupid piece of paper that's only good for decoration. Quinton's story shows why it's so much more.

A college diploma will help me achieve my personal goals because there's no other way to succeed in this day and age. No matter what perspective I take, there is no way to achieve my goals but through school. Helping my community, being financially stable, and shaping public policy all require an education. A law degree is my goal. It's a stretch for me because of everything I lack. That is why education is crucial.

Furthermore, I am trying to avoid becoming a statistic. I want to put to rest the stereotype that Polynesians don't think education is important. That's the prestigious group I want to be a part of, the group who did not listen to others tell them what they ought to be but instead followed their own path in becoming what

## Author Bios

**Justin Babbel** attended the University of Utah where he completed a Bachelors of Science in Political Science, a Bachelors of Science in Sociology and a Certificate in Criminology. He plans to work for the University of Utah and is considering attending Law School and going on to work as a contract lawyer. His contributing article on the homeless population was written to inform the public about the mistreatment of the homeless population by the law. He was amazed at the lengths that laws will go to in order to hide a problem that needs fixing. Justin is the first person in his family to earn a Bachelors Degree.

**Nicole Bedera** is a junior at Westminster College where she studies sociology and philosophy and is a member of the Honors program. Her academic interests include French, globalization, ethics, feminism and law. Nicole has a background in LGBT rights activism, including a year hosting a podcast for LGBT youth. She also co-founded the Northern Nevada Gay Straight Alliance Summit which aimed to create a network of allies for LGBT youth through workshops teaching leadership and self-expression. More recently, Nicole has completed research on the treatment of conservative members of the LGBT rights movement which she presented at the Popular Culture Association and American Culture Association 2012 conference. After graduating from Westminster, she plans to attend law school to later become either a public defender or work for a non-profit organization that fights to end illegal sex trafficking.

**Tom Quinn** is a second year graduate student and instructor in the Sociology Department at the University of Utah. His primary research interests include religion and mental health, specifically the role religion might play in the utilization of mental health services. His article on measuring religiosity represents some of the preliminary research he did for his Master's thesis, "Give us this day our daily meds: the role of religion in mental health services use." His articles have also appeared in the *New Statesman* and the *Texas Hispanic Journal of Law and Policy*.

**Grant Holyoak** is an Undergraduate Research Fellow and Presidential Scholar at Utah State University. Grant is a sociology major and has broad interests in politics, social change and inequality. Since 2010, Grant has been working on a funded research project with his faculty mentor, Dr. Christy Glass. His contributing article examines employment trends, including the evolution of employer recruitment and hiring practices, in the Mountain West from the 1970's to the present. Grant presented his research at the 2011 Research on Capitol Hill Conference in Salt Lake City where he had the opportunity to discuss his research on immigration trends with several state legislators. After graduation, Grant plans to pursue an advanced degree in sociology.

**Pete Loebach** is an instructor and graduate student in the Department of Sociology at the University of Utah. His research is focused on the implications of massive emigration from the Philippines, one of the features of increased global integration since the mid 20<sup>th</sup> century, a process often referred to as globalization. He has explored the opportunities that migrant networks—a form of social capital—create for some, but not all, and the implications of this selective access to great wealth in an otherwise poverty-ridden, limited local context. Currently, he is exploring the intersection of the study of migration and natural disasters, investigating the role that former emigrants play in post-disaster scenarios.

## CALL FOR PAPERS!

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