



Louder Than Words

VOLUME 2, ISSUE 1, 2022

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About the Journal

Louder Than Words (LTW) is the official Texas State University School of Social Work Student Journal that illuminates peer-reviewed academic written and creative works. LTW will become an annual forum that incorporates students' diverse social work-related pieces.

Journal Aims

- This journal serves as a platform to illuminate Texas State University's School of Social Work students' written works. We encourage diverse academic and illustrative writing and creative pieces from undergraduate and graduate students. We are seeking works that relate to and encompass the diverse spectrum of social work values, competencies, ideas, and experiences. To promote inclusivity and diversity our journal accepts submissions in multiple languages.
- This journal's structure emphasizes the integration of undergraduate and graduate students and alumni into the peer-review process. We believe research, professional development, and constructive feedback are integral aspects of the Social Work Profession. To advance professionalism and disseminate social work professionals' voices, we want current students and alumni to engage in this process.
- This journal serves as an opportunity for student growth in professional written and creative communication—necessary skills in the Social Work Profession. We hope student involvement in this endeavor will prepare and enhance communication skills, receptiveness to constructive feedback, and further prepare them for graduate school and beyond.

Acknowledgements

We would like to express our sincere gratitude to Dr. Angela Ausbrooks (Director, School of Social Work, Texas State University) for her continued supportive efforts to the *Louder Than Words* Journal! We also thank the School of Social Work faculty and staff for the direct encouragement they extended to the student authors and student peer reviewers for the Second Issue. We greatly appreciate everyone sharing this opportunity and encouraging students to participate as an author or a student peer reviewer. We hope you continue to do so for future issues. We extend endless thanks to our student authors who have enthralled themselves in the peer review process and have made the *Louder Than Words* Journal so fruitful!

We cannot say thank you enough for the efforts and leadership put forth by the five *Louder Than Words* student peer reviewers. They submitted materials to be considered for the position, participated in mandatory peer review training, reviewed submitted materials, and provided supportive, constructive recommendations to student authors. We extend endless appreciation to Dr. Deb Balzhiser (Director, Writing Center, Texas State University) for leading an enthusiastic training on peer review and constructive feedback.

Thank you to everyone who trusted in the Editorial Advisory Board to continue leading this initiative.

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Letter from the Editor in Chief

Dear Reader,

I am honored and delighted to introduce you to the Texas State University, School of Social Work, *Louder Than Words* (LTW) Second Volume (Volume 2, Issue 1) Journal. This initiative is a collaboration among School of Social Work faculty and staff, current undergraduate and graduate students, and School of Social Work alumni. Our second volume includes eight submissions including scholarly and creative works.

As we move forward into annual publication, we continue to invite all current Texas State University School of Social Work undergraduate and graduate students to consider submitting a written submission to the *Louder Than Words* upcoming volume, which we plan to publish in Fall of 2023. We encourage and accept an array of written expressions, such as, but not limited to a research article or presentation, literature review, policy analysis, theoretical paper, critical analysis of a current event, reflective essay, book review, or an artistic/creative expression such as a written song, slam poetry, blog post, drawing, or image. We also invite current students to consider applying to become a student peer reviewer. In this role, students will participate in a mandatory peer review training and offer constructive, support feedback in an identity withheld process to student authors. If you are moving on from the Texas State University School of Social Work and would like to still be involved, we would be thrilled to bring you on as an Alumni Editor or Copy Editor.

I will never be able to say it enough, but **thank you**, *thank you*, thank you, to all the Student Authors who submitted written works, the Student Peer Reviewers who exemplified leadership, the Editorial Advisory Board who provided supportive and creative ideas, and all those who shared this endeavor with their students.

I hope that as you read through the Second Volume you immerse yourself in each authors' creativity, critical thinking, and commitment to advancing, illuminating, and sharing the Social Work Profession's values, ethics, research, practice, and service.

Sincerely,

Kelly Lynn Clary, PhD, MSW
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The Case of Irene Harper and the Implications for Social Work and Other Helping Professionals
By: AJ Goodman

Abstract

This paper aims to highlight the importance of strengths-based work with clients and how social workers and other helping professionals may become aware of and utilize a variety of strategies to advocate for their clients. When working with vulnerable and at-risk populations, helping professionals must uplift and enable their clients for positive outcomes.

Irene Harper presented herself to the emergency room with food poisoning. Mrs. Harper believed her symptoms were flu-related, would subside, and chose not to seek immediate medical attention. Mrs. Harper was admitted first, then her husband, Mr. Harper. They were negatively impacted by consuming wild mushrooms, which contain amatoxins that can deteriorate the liver resulting in toxic hepatitis (Mayo Clinic Staff, 2021). The Harper family's strengths include their support for each other and adaptability in high-stress situations to change their environment. The Harpers' strengths are hindered by a lack of access to proper nutrition. This barrier has created a push-and-pull event, where the strength overextends resulting in robust, secondary challenges. The Harper family's secondary challenges are their admittance to the emergency room and interactions with social services. Social workers must identify strengths and challenges in collaboration with their clients to better assist them through the helping process.

Introduction

As social workers, we are trained to utilize systems theory, such as the person-in-environment method, to appropriately identify the most concerning issues brought forth by the client. Concerning issues can be viewed through specific lenses such as economic, healthcare, and nutritional at the micro, mezzo, and macro levels. The Harpers' may not have had adequate access to nutrition and foraged for their food, resulting in two serious cases of liver failure. A secondary clue that alludes to a lack of nutrition is that the Harpers' first interaction with social services was linked to their child falling down the stairs. Could this have been from exhaustion? An area to explore for social workers to pinpoint their areas of need.

When Mrs. Harper arrived at the emergency room with food poisoning from consuming wild mushrooms, she was met by Dr. Hamed and the medical staff. The medical staff determined

that more tests needed to be conducted to make more informed decisions on Mrs. Harper's condition. Dr. Hamed requested Mrs. Harper to lift both of her arms in front of her and noticed a slight tremble in her hands. Dr. Hamed stated that the patient may have asterixis, a possible complication from a failing liver (Christiano, 2018). Unfortunately, this information was not enough for the medical staff to properly identify Mrs. Harper's affliction.

The medical staff continued to address what causes would illicit such reactions and noticed her arms were bruised. Dr. Hamed saw these bruises and believed they resulted from her body deteriorating internally. The report describing Mrs. Harper's arms used the term 'suspicious' which alerted social services. A social worker wanted to speak to Mrs. Harper's child to determine if there were any signs of abuse in the household. Social services had documentation of a previous investigation completed on the Harpers when their daughter fell down the stairs. A social worker may view this precedent as a red flag that warrants further investigation. A result is that the husband became irritated because of the speculation that he harmed his family. After becoming emotionally and physically aroused, Mr. Harper passed out while talking to Dr. Hamed. This resulted in the separation of all three family members.

The separation assisted the medical staff when they saw the daughter pick mushrooms off her food. Medical staff used this information to discover that both parents ingested mushrooms, which their child did not like, resulting in symptoms of liver failure.

Strengths

The Harpers are equipped with tremendous strengths that help unify their family. The Harpers' support for each other is demonstrated when encountering investigative measures and a potential lack of nutrition. The Harpers' interaction with social services, the mezzo level, prior to this event has shown them that they can handle a high-stress situation. Maintaining the family

together through a probe of their family from a child protection service can be taxing. The Harpers' web of support is vital for their family's operation.

They look for solace and hope in each other, especially the daughter who is very close to her mother and father. Mr. Harper arrived with their child to provide support for Mrs. Harper. Mr. Harper brought the entire family together during a crisis.

Another strength, albeit one that ended in medical emergencies, is that the family wanted to supplement the food that was available to them. This new, plentiful resource, however, turned out to be poisonous mushrooms. While the family should have found safer alternatives to finding food, the ability and pursuit to provide for their family is a strength. Instead of becoming hopeless and giving in, they found other ways of sustaining themselves. A long-term outlook for this strength is that they utilize their resilience in a safe, productive manner that benefits their family.

Viewing the family's cohesive and supportive strength through a macro lens shows us how the Harpers may react to future barriers outside of their control. Social workers can utilize this strength with the Harpers by showing them how their resilience can act as a protective factor from external influences. Social workers use resilience with families when incorporating strength-based perspectives by continuously helping families function and thrive in times of stress and adversity (Hepworth et al., 2017). Therefore, social workers must familiarize themselves with resilience factors to help the Harpers solve issues in a healthy manner while encouraging family members to grow and learn to adapt to difficult situations.

Challenges

The Harper family is faced with difficult challenges. Inadequate access to nutrition and probing from social services causes ripples through all three system levels, micro, mezzo, and

macro. Having inadequate access to nutrition has a serious effect on the Harpers' social determinants of health (Dziegielewski & Holliman, 2020). A lack of access to healthy food choices is the root issue of why Mrs. and Mr. Harper are in the emergency room with liver complications.

On the micro-level, the Harpers are not receiving the most basic of needs. An inability to provide proper nutrition may be the underlying factor for social services' first visit with the Harpers. In this instance, it is influencing the second visit. On the mezzo level, the Harpers' community may not have the resources or ability to properly address the lack of nutrition. The macro-level influences the availability of access to nutrition through political, social, and economic arenas.

When focusing on the micro-level, such as individuals, families, and relationships, Mrs. Harper chose to put her family before herself. Tough decisions are made every day and Mrs. Harper chose to postpone medical attention. This decision is both a strength and a challenge. It can be seen as though Mrs. Harper did not want to cause any financial or healthcare stress to her family. However, in this specific case, if Mrs. Harper did not seek medical attention, she and Mr. Harper may have faced more serious consequences from untreated liver hepatitis. Mrs. Harper's resilience could have potentially ended negatively. As a social worker or other helping professional, uplifting Mrs. Harper's resilience, self-determination, and relationships as core strengths will empower the client.

In comparison, the interaction with social services that nearly resulted in their child being placed in protective care has developed into a more static challenge for the Harpers. Fortunately for their sake, they maintained family cohesion. However, with the investigation and subsequent details, the Harpers may be recipients of implicit bias (Saluja & Bryant, 2021). Because of the

previous association with social services, other public health officials may view that as a red flag and a justifiable reason for potential intervention.

Social Workers' Care and Discharge Planning

When working with the Harpers, first with Irene's liver complication and then her husband's, an organized care and discharge plan is required. Examining Mrs. Harper's medical records may provide a basic biological assessment to the medical staff. Having this assessment would aid the team in developing a comprehensive biopsychosocial-spiritual approach to Mrs. Harper's case (Dziegielewski & Holliman, 2020). Developing an approach that looks at Mrs. Harper's overall health and well-being may help the team narrow down the root causes of the concern.

This would include identifying any foreseeable barriers in service delivery, coordinating with a team on how to serve Mrs. Harper best, and involving their support system (Dziegielewski & Holliman, 2020). Constructing a stable pathway for treatment creates a stable environment for Mrs. Harper. While a plan may not always come to fruition, having a guide that can be altered to best serve the client is favorable.

In conjunction with administrative duties, a social worker must construct a positive relationship so information regarding the visit can be understood and a plan for care can commence (Rizzo et al., 2016). A social worker must take the time to actively listen and understand the patient's concerns. This is so the relevant information can be collected and utilized to best serve the patient. Rushing through a questionnaire or showing little interest can be counterproductive when providing resources and support to someone in need.

As discharge planning continues, a social worker will interview the caregivers for assessment (Dziegielewski & Holliman, 2020). Asking the parents how they are emotionally and

physically following an extensive ordeal at the hospital is to ensure their needs have been met. It is also an important time to have the parents reiterate the types of programs and services available so safe choices are made for their family.

An additional step a social worker could complete with the Harper family is to finalize and discuss the discharge and treatment options (Dziegielewski & Holliman, 2020). Asking the Harper family if they are comfortable with the treatment plans provided by the hospital creates a conversation for the family to address any concerns they have. The social worker can also reaffirm that they have the appropriate information about local resources and organizations which can assist them.

Additionally, a social worker could offer aid by working with the Harpers and their disciplinary team to offer education on available services and programs that promote and teach healthy, safe, nutritional behaviors (Dziegielewski & Holliman, 2020). This service could benefit the Harpers by showing the family that assistance programs exist to prevent worst-case scenarios. Offering educational services could act as a preventative and effective option for acquiring their needs.

An important task for a social worker would be to begin making contacts for referrals (Dziegielewski & Holliman, 2020). If Mrs. and Mr. Harper's liver concerns require short or long-term care, referring them to live care specialists may answer any questions they have. Referring the Harpers to local organizations that offer food assistance is an additional option and resource for the family.

Another referral could be to a family therapist. A recommendation for therapy could be centered around the traumatic experience they all collectively went through. Making the

recommendation to the family could open an option to process what they experienced related to their liver complications and previous concerns that may currently affect the family.

With this care and discharge plan, the social worker would be empowering the client, promoting self-determination and autonomy, and making sure they are centered during all stages of the helping process. Involving the Harpers in the decision-making process with supplemental educational, provision, and therapeutic services provides the family with the power of agency through knowledge.

Implications

The implications for helping professionals may be highlighted through the importance of access to proper nutrition through legislative channels and federal programs, becoming aware of implicit bias in the helping professional's curriculum (Staats, 2015), and continued awareness and advocacy efforts targeting social injustices (NASW, 2021).

Social workers should be aware of the macro-level legislative avenues and possibilities when assisting their clients to gain access to proper nutrition. One important factor is the effect of quality nutrition that schools provide (Gearan, et al., 2021).

Lastly, the National Association of Social Workers (NASW, 2021) states in their Ethical Principles the importance of advocating against social injustices such as nutrition inequality for the oppressed and vulnerable. This ethical framework may be applied to many other helping professions so that the client may have a voice no matter where they are receiving assistance.

Conclusion

When working with the Harper family to address their medical and nutritional needs, a major focus is on their health development, ability to thrive (Halfon & Forrest, 2018), and the significant social determinants of health (Dziegielewski & Holliman, 2020) that impact the

Harpers' lives. Managing a vast arena like health development for the Harpers is not so easily completed in a single hospital visit. As a social worker, an effective use of time when dealing with health development is to provide information that benefits the Harper family long-term so they may adapt to changes in their lives and environment (Halfon & Forrest, 2018). Such information may help the Harpers avoid foraging for food or integrate therapeutic sessions to build on the family's dynamics and work through any existing concerns.

Providing the Harpers with the knowledge and resources needed to thrive builds on the health-development principle (Halfon & Forrest, 2018) and is an additional priority. As a social worker coordinates services for the Harper family, they are encouraged to continuously offer their support, inquire about how goals are being obtained, and alter, if necessary, the care plan to meet the Harpers' needs (Rizzo et al., 2016). This constant involvement in the Harpers' goal attainment can show them more appealing ways to thrive and maintain homeostasis.

The social determinants of health that a social worker should prioritize when working with the Harpers is their economic stability, health care access and quality, their respective environments, and social and community context (U.S. Department of Health and Human Services, 2020). There are a lot of areas to prioritize, however, a social worker can examine each area when assessing the families' biopsychosocial-spiritual categories, through case management, and discharge planning.

The Harper family narrowly avoided two traumatic outcomes related to liver complications from ingesting wild mushrooms. To supplement the potential lack of nutrition available, Mr. Harper went and foraged for wild mushrooms which can contain dangerous toxins. Thankfully, with the help of the medical staff and social services, the Harpers avoided liver failure and can focus on creating and maintaining healthy choices that benefit their entire family.

Many social work domains will be working to provide some form of support to their clients. This may be on the micro, mezzo, or macro levels. Within each level, social workers can educate themselves and be proactive in many ways within the three levels to provide for their clients.

References

- Christiano, D. (2018, September 5). What Causes Asterixis, and How Is It Treated? Healthline. <https://www.healthline.com/health/asterixis#risk-factors>.
- Dziegielewski, Sophia F., & Diane C. Holliman. (2020) *The Changing Face of Health Care Social Work Opportunities and Challenges for Professional Practice*. 4th ed., Springer Publishing Company, LLC.
- Gearan, E. C., Monzella, K., Gola, A. A., & Figueroa, H. (2021). Adolescent participants in the school lunch program consume more nutritious lunches but their 24-hour diets are similar to nonparticipants. *Journal of Adolescent Health*, 69(2), 308–314. <https://doi.org/10.1016/j.jadohealth.2020.12.003>
- Halfon N., Forrest C.B. (2018) *The Emerging Theoretical Framework of Life Course Health Development*. In: Halfon N., Forrest C., Lerner R., Faustman E. (eds) *Handbook of Life Course Health Development*. Springer, Cham.
- Hepworth, D. H., Strom-Gottfried, K., Rooney, G. D., & Rooney, R. H. (2017). *Direct social work practice: Theory and skills*. Cengage Learning.
- Mayo Clinic Staff. (2021, August 11). Toxic Hepatitis. Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/toxic-hepatitis/symptoms-causes/syc-20352202>.
- National Association of Social Workers. (2021). Read the Code of Ethics. NASW - National Association of Social Workers. <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Highlighted-Revisions-to-the-Code-of-Ethics>
- Rizzo, V. M., Rowe, J. M., Shier Kricke, G., Krajci, K., & Golden, R. (2016, August 1). AIMS: A Care Coordination Model to Improve Patient Health Outcomes. *Health & social work*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4985886/>.
- Saluja, B., & Bryant, Z. (2021). How implicit bias contributes to racial disparities in maternal morbidity and mortality in the United States. *Journal of Women's Health*, 30(2), 270–273. <https://doi.org/10.1089/jwh.2020.8874>
- Staats, C. (2015, November 30). Understanding Implicit Bias: What Educators Should Know. *American Educator*. <https://eric.ed.gov/?id=EJ1086492>
- Transplant - Tell Me Who You Are. (2020). NBC. <https://www.nbc.com/transplant/video/tell-me-who-you-are/4226734>.
- U.S. Department of Health and Human Services. (2020, August). *Social Determinants of Health. Social Determinants of Health - Healthy People 2030*. <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>.

The Role of Social Work in Climate Change

By: Laura Hopp

Abstract

Social work is a profession that has long advocated to advance the rights of vulnerable populations, reduce systemic inequities and promote long-term social change. However, the profession is missing the opportunity to explicitly equip social work students and those in the field with an understanding of the connection between climate change and injustice. Around the world, climate refugees are forced to migrate following unpredictable environmental disasters, communities suffer at the hands of environmental racism. Additionally, rising globalization contributes to the economic and ecological exploitation of developing nations. Social workers have an ethical obligation to work towards environmental justice at the micro, mezzo, and macro levels. Social workers can provide therapeutic support to individuals displaced by climate disaster, join with and mobilize local citizens in policy advocacy efforts, and act as a link between legislators and those directly impacted by climate change by holding government officials accountable for prioritizing climate action. Environmental justice must also be an indispensable dimension of the social work profession to truly advance long-term social change. This paper will examine the ways in which social workers can support those impacted by climate change at the micro, mezzo, and macro levels.

Introduction

Climate change is defined as the “change of climate attributed directly or indirectly to human activity that alters the composition of the global atmosphere” (Montanya & Valera, 2016, as cited in Benevolenze & DeRigne, 2019). This activity mainly occurs on a large scale in agriculture, transportation, and industrial sectors, industries that increase greenhouse gas, leading to higher global temperatures, precipitation, and sea levels (Intergovernmental Panel on Climate Change [IPCC], 2014, as cited in Dwyer, 2020). Research by IPCC has shown that these changes contribute directly to environmental disasters that affect vulnerable populations like floods, drought, heatwaves, and hurricanes. The climate crisis has implications on the micro, mezzo, and macro levels in societies across the world.

Environmental disaster resulting from climate change has drastically increased climate-based migration and thus, biopsychosocial risk factors for those displaced, including food and

water insecurity (Mishra et al., 2009; Parsons & Nielsen, 2020). Social disruption associated with disaster-induced displacement also significantly impacts an individual's well-being, health and safety on the micro level, decreasing their ability to contribute to meaningful community change (Benevolenza & DeRigne, 2019). On the mezzo level, climate change destroys infrastructure and economic opportunity (Mishra et al., 2009; Internal Displacement Monitoring Centre, 2015, as cited in Torres & Casey, 2017). Social inequities like racism and other forms of oppression decrease community access to resources in the aftermath of climate disasters (Torres & Casey, 2017). On the macro level, globalization upholds practices that substantially aggravate the climate crisis (Dwyer, 2020; Mishra et al., 2009; Paravisini-Gebert, 2021). Affluent nations like the United States refuse to acknowledge this connection, turning away those affected by the crises it perpetuates (Lancet, 2020; Danewid, 2017, as cited in Adlam, 2020).

Communities have historically banded together in the face of climate change and disaster through grassroots efforts designed to empower citizens towards activism. Social workers can play an essential role in helping communities affected by environmental disasters advocate for their rights and needs to both prevent and respond to climate disasters. Moreover, social work professionals have the duty to integrate principles of environmental justice into their practice with individuals and communities to advocate for more equitable social systems for their clients and the broader community. This paper will examine the intersections between social work and climate change, specifically investigating how the profession can support climate migrants in micro practice settings, mezzo change at the community level, and macro-based policy advocacy to mitigate the effects of globalization.

The Micro Level: Climate Migrant

It is estimated that by 2050 the world will host up to one billion climate refugees due to displacement associated with climate change (United Nations, 2019, as cited in Adlam, 2020; Rigaud et al., 2018, as cited in Koubi et al., 2021; Geislet & Currens, 2017, as cited in Parsons & Nielsen, 2020). Climate refugees, also referred to as climate or environmental migrants, are those who have been forced to leave their country due to adverse environmental conditions yet are guaranteed no international protections (Dwyer, 2020). The number of climate migrants is three times higher than the number of individuals displaced worldwide over the last decade due to violence (Internal Displacement Monitoring Center, 2019, as cited in Koubi et al., 2020), revealing that this is a social justice issue necessitating attention from the social work profession.

Vulnerability has been described by Benevolenza and DeRigne (2019) as the process of undergoing hardship as a result of encountering prejudice, discrimination, and stigma. Climate disaster disproportionately affects the world's most vulnerable groups including women, children, people of color, and those living in poverty (Warner, 2010, as cited in Koubi et al., 2021; Mishra et al., 2009; Dodman et al., 2010; Dwyer, 2020). Alarming, most individuals who are forced to migrate after climate disasters are those living in low-income countries who have contributed very little to the causes of climate change (Dwyer, 2020). Displacement is a multi-causal phenomenon given that individuals with more privilege, determined by characteristics such as income and race, can often stay in place while those with less privilege are forced to move (Koubi et al., 2021; Parsons & Nielsen, 2020; Kaelin, 2019).

Inversely, some individuals may become trapped in place because of environmental disaster (Hunter et al., 2015, as cited in Torres & Casey, 2017; Black et al., 2013, as cited in Clark & Bettini, 2017). Research has shown that economically marginalized individuals, people

of color, those with disabilities, and the elderly have less opportunity to migrate due to a lack of resources stemming from discrimination (Brodie et al., 2006, as cited in Benevolenza & DeRigne, 2019; Parsons & Nielsen, 2020). Displacement also decreases access to basic health and economic means like employment and healthcare, aggravating adverse mental health outcomes on the micro level (Fussell & Lowe, 2014, as cited in Benevolenza & DeRigne, 2019; Borges et al., 2007; Goldman et al., 2014; Cantor-Graae & Pedersen, 2013, as cited in Torres & Casey, 2017). As the frequency and intensity of climate disasters rise, so too do widespread mental and physical health inequities. This is a psychosocial issue that demands collective attention and action from the social work field.

Social Work Implications at the Micro Level

Social workers can provide support to those displaced by climate disasters through professional services like therapy and case management. Social work programs at the university level should consider requiring courses or substantial material on ways that professionals can support climate migrants and recognize how the climate crisis leads to further marginalization of vulnerable groups. For example, research has shown that heat waves across the United States are associated with higher mortality rates for elderly, Black populations (Khatana et al., 2022). When social work students graduate and pursue work in the field, they must be poised to see this type of phenomenon not as a coincidence or tragic result of an unmanageable environmental condition but as an injustice necessitating action when conducting client assessments, providing treatment, and ensuring long-term success for individuals and families.

The Mezzo Level: Environmental Racism and Justice

Environmental justice aims to address the inequitable impacts of climate change on oppressed populations (Dominelli, 2012, as cited in Suppa, 2019). It includes the principles of

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equitable distribution of environmental risks and benefits, recognition of local cultural traditions, and acknowledgment of a community's complete ability to make effective decisions.

Environmental justice acknowledges the junctions between climate change and social vulnerabilities like race, gender, age, and socioeconomic status, and encourages advocates to integrate its principles when developing social interventions. For example, in the aftermath of Hurricane Katrina, individuals still living in New Orleans, Louisiana experienced neglect by the government and aid organizations as well as increased instances of police violence (Hamilton et al., 2012, as cited in Benevolenza & DeRigne, 2019). These injustices affected predominately Black women with low incomes and occurred on top of already inadequate economic circumstances and institutionalized oppression. The environmental justice perspective acknowledges this marginalization with the understanding that the intersecting identities of being poor, Black, and a woman made this population more vulnerable to the hurricane and its social consequences.

In the United States, the fight against environmental racism has been underway since the 1980s, with the environmental justice movement drawing attention to dangerous conditions in predominately urban, poor areas (Chavez et al., 1987; Bullard, 2005, as cited in Suppa et al., 2019). The movement asserts that safety should not be based upon social class but is a basic human right. Any organized response to climate change must consider the role that systemic injustice has on those affected by environmental disasters by holistically addressing a community's ecological, economic, and social conditions (McAdam, 2012, as cited in Dwyer, 2020; Kaelin, 2019; Torres & Casey, 2017; Suppa et al., 2019). Without these elements, efforts to improve resilience against disaster may further displace vulnerable communities. Suppa and colleagues (2019) argue that most climate movements exclude awareness of social injustices,

decreasing their effectiveness in creating long-term change. For instance, securing sustainable housing in the United States and other wealthy nations depends largely upon social class, preventing many marginalized groups from accessing safer and more economically sustainable housing conditions.

Exploited and marginalized communities have long been able to adapt to living with scarce resources and thus, understand their capabilities better than any outside entity could (Norman, 2017). Therefore, they should be completely involved in drafting policies that affect them (Kaelin, 2019). The Homeless People's Federation of the Philippines Incorporated (HPFPI) is one grassroots association working to increase the rights of those impacted by environmental disasters (Dodman et al., 2010). HPFPI organizes communities throughout the Philippines to lobby for affordable housing, improved economic conditions, and emancipation from poverty to prevent and respond to climate change. HPFPI members engage in collective action and mutual aid to expand access to resources that the government is unwilling to offer. Movements like HPFPI have long advocated for environmental and social justice, which go hand in hand, by promoting the sharing of knowledge and resources, revealing that community activism is a powerful force for change (Dodman et al., 2010).

Social Work Implications at the Mezzo Level

Social workers can play a more prominent role in advancing opportunities for communities to engage in advocacy to build long-term social capital. Communities should be empowered to implement solutions to climate change based on their unique beliefs, traditions, and needs. Social workers can promote this empowerment by mobilizing communities, calling attention to their protective factors and values, encouraging solidarity, and helping citizens prepare for political action (Dodman et al., 2010). Working towards environmental justice must

be an ethical priority for social work professionals since climate change disrupts the lives of all individuals, particularly the most vulnerable. Since social workers aim to reduce structural inequalities and advance justice for the most vulnerable members of society, environmental justice should be an indispensable dimension of the profession.

The Macro Level: Globalization

Wealthy governments worldwide have proved apathetic to the plight of climate migrants, refusing to grant refugee status or acknowledge the part they have historically played in the environmental destruction, colonization, and racism that contribute to climate change and displacement (Lancet, 2020; Danewid, 2017, as cited in Adlam, 2020). Some leaders of wealthy nations also spread the rhetoric that there is another place for climate refugees to go, viewing disaster-induced migration as separate from the policies wealthy corporations benefit from rather than inextricably linked to the systems of oppression they preserve (Baldwin & Bettini, 2017; Latour, 2018, as cited in Adlam, 2020). Some policy efforts aimed at managing climate migration have even defined climate refugees as national security threats (Thomas & Warner, 2019, as cited in Parsons & Nielsen, 2020). The United States has even attempted to justify immigration bans through the unfounded rationalization that an influx of migrants would pose a threat to the economic success of American citizens (Lim, 2021, as cited in Adlam, 2020). In response, activist Atiq Rahman declared, “if climate change makes our country uninhabitable, we will march with our wet feet into your living rooms” (Clark & Bettini, 2017, p. 38).

In addition to detrimental climate policies enacted by the world’s richest nations, research has found that 100 of the largest corporations contribute to over 70% of global greenhouse gas emissions (Katz, 2012; Lynch et al., 2004, as cited in Yeganeh, 2019). Through practices aimed to broaden globalization such as hiring international workers and paying them unfair wages,

these companies often function within developing countries. These nations must then grapple with the implications of reducing environmental regulations to create more opportunities for their citizens (Abdul-Gafaru, as cited in Yeganeh, 2019). Economically exploited countries may also lack the ability to mitigate environmental degradation caused by globalization as the policies of wealthy industries often remain outside of their control (Paravisini-Gebert, 2021).

Indigenous communities have long led the fight against environmental injustice through activism tactics like alliance-building, lobbying politicians, and advancing public movements to promote climate action (Grossman et al., 2012, Ranco & Suagee, 2007, as cited in Norman, 2017). The Lummi Nation, for example, successfully stopped the development of the Gateway Pacific Terminal, which would have polluted their waterways through oil drilling, an action disconcertingly sanctioned by the Environmental Protection Agency ([EPA]; Norman, 2017). Government entities like the EPA have failed to intervene and establish protections for vulnerable groups like Indigenous populations in the face of rising globalization.

Social Work Implications at the Macro Level

Social workers can act as a link between legislators and the historically marginalized groups that they work with. Encouraging and equipping clients with the tools to engage in macro-level policy advocacy will promote their empowerment and self-sufficiency. Social workers may also choose to independently engage in policy advocacy to advance equitable social conditions and rebuilding efforts for those displaced by climate disaster (Suppa et al., 2019). Advocacy may also include examining ways to protect those impacted by globalization through policy changes aimed at reducing its reach. Finally, professionals can play a vital role in holding government officials responsible for addressing the causes and effects of climate change through political involvement.

Conclusion

Climate change and disaster threaten the safety of the world's most vulnerable populations (Mishra et al., 2009; Dodman et al., 2010; Dwyer, 2020). Climate refugees and those displaced by disaster face significant biopsychosocial risks (Vestal, 2017; Cepeda et al., 2010, as cited in Benevolenza & DeRigne, 2019) that social workers can examine during micro-based assessment and treatment. Professionals can support mezzo-level community activism and empowerment by employing tenants of environmental justice (Dodman et al.; Kaelin, 2019; Thomas, 2017). At the macro-level, globalization exploits the economic landscapes of developing nations and contributes to climate change (Yeganeh, 2019; Dwyer, 2020; Mishra et al., 2009; Paravisini-Gebert, 2021). Social work professionals can support those most affected by disaster by acting as a link between governments and communities. Efforts toward policy advocacy will ultimately hold government officials accountable for protecting citizens after climate disasters and making changes that reduce the causes of climate change (Grossman et al., 2012, Ranco & Suagee, 2007, as cited in Norman, 2017). Climate change is a phenomenon that demands to be recognized as a reality that affects everyone and social workers are uniquely poised with knowledge of the ways in which inequality impacts vulnerable populations. The causes and effects of climate change should be integrated into this knowledge to support the micro, mezzo, and macro level work that social work professionals undertake to advocate for a more equitable world.

References

- Adlam, J. (2020). No room at the inn? Re-imagining social inclusion at the intersections between climate change, globalisation, homelessness, and human migration. *Journal of Social Work Practice*, 34(4), 379–392. <https://doi.org/10.1080/02650533.2020.1781802>
- Benevolenza, M. A., & DeRigne, L. (2019). The impact of climate change and natural disasters on vulnerable populations: A systematic review of literature. *Journal of Human Behavior in the Social Environment*, 29(2), 266–281. <https://doi.org/10.1080/10911359.2018.1527739>
- Clark, N., & Bettini, G. (2017). ‘Floods’ of migrants, flows of care: Between climate displacement and global care chains. *Sociological Review*, 65(2), 36–54. <https://doi.org/10.1177/0081176917711078>
- Dodman, D., Mitlin, D., & Co, J. R. (2010). Victims to victors, disasters to opportunities: Community-driven responses to climate change in the Philippines. *International Development Planning Review*, 32(1), 1–26. <https://doi.org/10.3828/idpr.2009.10>
- Dwyer, J. (2020). Environmental migrants, structural injustice, and moral responsibility. *Bioethics*, 34(6), 562–569. <https://doi.org/10.1111/bioe.12738>
- Kaelin, W. (2019). International responses to climate-related migration. *Journal of International Affairs*, 73(1), 255–260. <https://www.jstor.org/stable/26872797>
- Khatana, S. M., Werner, R. M., Groeneveld, P. W. (2022). Association of extreme heat with all-cause mortality in the contiguous US, 2008-2017. *American Journal of Managed Care*, 5(5), Article e2212957. <https://doi.org/10.1001/jamanetworkopen.2022.12957>
- Koubi, V., Nguyen, Q., Spilker, G., & Böhmelt, T. (2021). Environmental migrants and social-movement participation. *Journal of Peace Research*, 58(1), 18–32. <https://doi.org/10.1177/0022343320972153>
- Mishra, A. K., Singh, V. P., & Jain, S. K. (2010). Impact of global warming and climate change on social development. *Journal of Comparative Social Welfare*, 26(2/3), 239–260. <https://doi.org/10.1080/17486831003687626>
- Norman, E. S. (2017). Standing up for inherent rights: The role of Indigenous-led activism in protecting sacred waters and ways of life. *Society & Natural Resources*, 30(4), 537–553. <http://doi.org/10.1080/08941920.2016.1274459>
- Paravisini-Gebert, L. (2021). Caribbean Archipelagos and mainlands: Building resistance against climate change. *Black Scholar*, 51(2), 51–62. <https://doi.org/10.1080/00064246.2021.1889887>
- Parsons, L. & Nielsen, J. O. (2020) The subjective climate migrant: Climate perceptions, their determinants, and relationship to migration in Cambodia. *Annals of the American Association of Geographers*, 111(4), 971–988. <https://doi.org/10.1080/24694452.2020.1807899>
- Suppa, A., Steiner, I., & Streckeisen, P. (2019). Energy transition and environmental justice: Effects on vulnerable groups and implications for social work. *Czech and Slovak Social Work: ERIS Journal*, 19(4), 32–47. <https://digitalcollection.zhaw.ch/handle/11475/18136>
- Torres, J. M., & Casey, J. A. (2017). The centrality of social ties to climate migration and mental health. *BMC Public Health*, 17, 1–10. <https://doi.org/10.1186/s12889-017-4508-0>

Yeganeh, H. (2019). A critical examination of the social impacts of large multinational corporations in the age of globalization. *Critical Perspectives on International Business*, 16(3), 193–208. <https://doi.org/10.1108/cpoib-01-2019-0001>

**You're Out:
A Policy Analysis of TX HB 25
By: Rylee Kitchen**

Abstract

Texas House Bill 25 (HB 25) was enrolled in October 2021 during the third legislative special session of the 87th Texas Legislature (Texas Legislature Online, 2021). The act mandates that youth who wish to participate in school sports must compete on the team which corresponds with the sex on their original birth certificate rather than the team which matches their gender identity or the gender they experience internally (HB 25, 2021). There are nearly 14,000 transgender and gender diverse (TGD) youth living in Texas (Herman et al., 2017). This population experiences a much higher risk of many negative health outcomes compared to their cisgender peers (Johns et al., 2019). HB 25 is discriminatory and will negatively impact TGD youth in Texas. Additionally, HB 25 is one of many proposed pieces of anti-trans legislation that has been pursued by members of the Texas Legislature over the last year. In this policy analysis, I overview existing research on the importance of young people participating in sports, the harmful impact of sports bans on transgender and gender-diverse youth, the way that HB 25 fits into the broader landscape of anti-trans legislation in Texas, and what social workers can do to support transgender youth.

Introduction

Transgender is a blanket term used to describe individuals whose gender identity differs from the gender they were assigned at birth. Transgender individuals may identify as male, female, nonbinary, genderqueer, genderfluid, or a number of other gender expansive labels. Of all the children aged 13 to 17 in the United States, 0.7% of them (about 150,000 youth) identify as transgender (Herman et al., 2017). The state of Texas is home to the second-largest population of transgender and gender diverse (TGD) youth in any state in the nation, with nearly 14,000 transgender children and adolescents within its borders (Herman et al., 2017).

Children and adolescents who are transgender and gender diverse suffer from a much higher risk of mental, physical, and behavioral health problems. Compared to cisgender youth, transgender youth are two to three times more likely to consider or attempt suicide, intentionally harm themselves, or experience mental health disorders such as depression and anxiety (Reisner

et al., 2015). According to a 2017 report from the Centers for Disease Control, transgender high school students are also significantly more likely than their cisgender peers to experience physical and sexual violence, including bullying, dating violence, sexual assault, threat with a weapon, and physical injury (Johns et al., 2017). Although research that specifically focuses on TGD people living in southern states is still limited, studies examining the broader Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) community show that LGBTQ+ individuals living in Southern states and rural areas experience more discrimination, struggle to access mental health resources, and sometimes find it harder to connect with the LGBTQ+ community (Johnson & Rogers, 2019; Swank et al., 2012).

Despite their vulnerability to negative health outcomes, TGD youth tend to experience better health when they can transition and live openly as the gender they identify with rather than the one they were assigned at birth. Children who transition socially without receiving gender-affirming medical intervention experience depression and anxiety at a rate closer to their cisgender peers when compared to transgender children who do not transition (Durwood et al., 2017). Starting during their transition, many TGD individuals use a different first name than the one they were assigned at birth, referred to as a chosen name. For those TGD individuals who adopt a new name, using their chosen name is linked to a significant reduction in depressive symptoms including suicidal ideation and attempts (Russell et al., 2018; Pollitt et al., 2021). This data clearly illustrates the positive impact that socially transitioning can have on TGD youth.

Sports Participation as a Protective Factor

Another protective factor for youth, regardless of gender, is participation in an athletic team. When TGD individuals can participate in a supportive athletic team, there are many benefits that extend well beyond the obvious physical health benefits of organized physical

activity. Clark and Kosciw (2022) found that participating in sports reduces stress and improves self-esteem for transgender and nonbinary students as well as their cisgender peers. There is mixed evidence to indicate that participation in a sports team or athletic activity may improve academic performance (Rees & Sabia, 2010; Ishihara et al., 2020). Athletic participation can also lead to college scholarships and other academic opportunities among select athletes which makes higher education more accessible. Lastly, participation in a sports team can improve feelings of social connectedness in a more effective way than many other social and extracurricular activities (Hoye et al., 2015).

Although this evidence is promising, there are cases in which the experiences of TGD youth on sports teams are not completely positive. Kulick et al. (2019) found that LGBTQ+ individuals are more likely to feel unsafe in athletic environments. This may explain why the rate of athletic participation is lower among this population (Clark and Kosciw, 2022). However, when TGD youth can participate in athletic environments that are safe and affirming, they tend to experience the same benefits that cisgender athletes do (Clark and Kosciw, 2022).

Policy Analysis of HB 25

House Bill 25 was signed into law on October 25th, 2021 to be effective immediately (Texas Legislature Online, 2021). As previously mentioned, it mandates that TGD youth can only participate in sports teams that correspond with the birth certificate that was issued at or around the time of birth (HB 25, 2021). This specific wording is significant because, under certain circumstances, TGD individuals can change the gender on their birth certificate in the eyes of Texas law (Texas Law Help, 2021). HB 25 does not accept these changes unless the change was made due to a clerical error (HB 25, 2021). In addition to including a sex that does not reflect their gender, the birth certificate that young TGD athletes must present to prove their

eligibility may include a deadname, or a name assigned at birth which an individual no longer uses because it is incongruent with their gender (Sinclair-Palm & Chokly, 2022). Calling an individual by their deadname is a form of misgendering or referring to a transgender individual as a gender other than the one they identify as (McLemore, 2018). Instances of misgendering can lead to feelings of stress and depression, especially in individuals who experience a low level of social support (McLemore, 2018).

The bill's authors, Texas Representatives Valoree Swanson, Stephanie Klick, Cole Hefner, Geanie W. Morrison, and Candy Noble, claim that this bill is intended to “[provide] for interscholastic athletic opportunities for girls” (HB 25, 2021; Texas Legislature Online, 2021). In reality, this bill will most likely have the result of excluding transgender girls from school sports altogether. If a transgender student wishes to participate in a school sports team under the new legislation, the child may be the only girl playing on a team of boys (or any number of other gender-incongruent arrangements) at public and highly visible school events that many of their peers attend – an event that highlights their existence as a trans person to their entire community. For most TGD children, this action is accompanied by a significant amount of risk. Transgender children are over twice as likely as cisgender boys and 1.5 times as likely as cisgender girls to experience bullying both in school and online (Johns et al., 2017). The risk of physical assault and physical threat is also especially high for transgender youth (Johns et al., 2017). Asking transgender children to enter an extremely visible and controversial position within their school community could easily expose these children to additional bullying, harassment, and trauma. It is an unreasonable barrier to participate in what should be a normal, accessible part of childhood: participating in team sports.

Unfortunately, if youth are unwilling to participate in a sports team that does not correspond with their gender, this new law will bar them from participating in school sports altogether. While enacted, this policy will exclude the majority of transgender children from participating in athletics. This effective exclusion based on gender and sex is discriminatory. Some supporters of this bill argue that children of different sexes have different physical abilities and that this justifies forcing trans students to participate on the team of their sex. However, this is true of all children, who vary genetically in height, weight, ability to build muscle mass, and agility. If cisgender children would not be excluded on the grounds of being taller or stronger than their peers, then neither should transgender children.

The Anti-Trans Policy Landscape in Texas

There are many potential anti-trans policies being considered in Texas and other states. Although HB 25 is discriminatory and has harmful consequences, there are anti-trans bills with even more dangerous impacts being considered. Last year, Texas legislators proposed over 30 bills that would negatively impact or discriminate against transgender and gender-diverse Texans (Equality Texas, 2021). Among the proposed bills were efforts to undermine protections against discrimination for transgender Texans, expand religious exemptions for providing services to LGBTQ+ individuals, and prohibit TGD youth from updating the gender marker on their birth certificate (Equality Texas, 2021). Many attempts were made to prohibit TGD children from receiving gender-affirming medical healthcare. These efforts returned to the forefront of public discussion in February 2022 when Governor Greg Abbott directed child welfare offices to equate gender-affirming healthcare for transgender children with child abuse (Munce, 2021; Dey & Harper, 2022). Although HB 25 was among the first of these many discriminatory efforts to pass in the legislature, it is not the only anti-trans bill being pursued in Texas.

Furthermore, certain Texas legislators have proven themselves to be persistent in their pursuit of policies that discriminate against transgender youth and adults. The sports ban outlined in HB 25 was rejected in the Texas legislature six times in 2021 alone before finally passing on the seventh attempt in the third legislative special session (Equality Texas, 2022; Texas Legislature Online, 2021). The passage of HB 25 is foreboding in the context of the other, more severe attacks on the liberties of TGD children and adolescents being brought to the state's congressional floor. With it, opponents of trans rights have displayed a determination to pass discriminatory legislation at any cost no matter how long it takes.

Implications for Social Workers

HB 25 conflicts strongly with the ethical core values outlined in the National Association of Social Workers (NASW) Code of Ethics. In discriminating against transgender children, it violates the principle of social justice that social workers strive to uphold (National Association of Social Workers, 2021). Due to the variety of practice settings that social workers are employed in, there are many opportunities for social workers to implement supportive practices in their work, especially those employed in schools.

School social workers should actively work to form policies that will best support transgender students who choose to participate in athletics under this new law. These students may benefit from support and counseling and may require intervention to prevent or extinguish bullying and harassment. School social workers can also speak with administrators about ways to include transgender students who are interested in athletics but do not wish to play on a team that does not accurately reflect their gender. This could include ensuring there are opportunities for transgender students in sports or even considering the possibility of adding a co-ed sports team that accepts interested students of all genders.

When it comes to research, gaps still exist in the literature surrounding the experiences of TGD youth in school sports. Continuing to investigate these experiences, both positive and negative, could help social workers advocate for more inclusive legislation that may replace HB 25 in the future. Social workers in research settings should also consider investigating ways to make sports environments safer for TGD youth as studies have shown that when these students are included, they are not always accepted and may feel unsafe (Kulick et al., 2019).

All Texan social workers can advocate for changes to the new law established in HB 25. They may network with professional organizations, such as their local NASW chapter, to publish a statement outlining the impact of HB 25 on transgender children. Another helpful legislative victory would be the passage of comprehensive anti-discrimination legislation for LGBTQ+ individuals which as of now does not exist at the state level in Texas or at the federal level in the United States (Freedom For All Americans, 2022). One such law that was considered as recently as 2021 is the Equality Act, which would outlaw all forms of discrimination against sexually-diverse and gender-diverse Americans (H.R.5, 2021). The Equality Act passed in the U.S. House of Representatives in March of 2021 but has not been read on the Senate floor since (H.R.5, 2021). Such a bill would be life-changing for transgender individuals across the country, especially in states such as Texas, where normal aspects of transgender children's lives (e.g. their use of public restrooms, their participation on sports teams, and their ability to dress in gender-affirming clothing in public) often become the subject of intense, highly partisan political debate.

Conclusion

The rules enacted on student-athletes in TX HB 25 do not benefit cisgender youth and could easily put transgender and gender-diverse youth into harmful situations or limit their access to helpful resources. Existing literature about the benefits of sports participation supports

the repealing or overturning of HB 25. Social workers who wish to support their transgender clients should engage in advocacy efforts to repeal HB 25 and pass comprehensive non-discrimination laws to prevent further harm to transgender individuals in Texas.

References

- Texas House Bill 25, 87th Legislature, 3rd Special Sess. (Texas 2021) (enacted).
H.R.5, 117th Congress, 1st Sess. (2021).
- Clark, C. M., & Kosciw, J. G. (2022). Engaged or excluded: LGBTQ youth's participation in school sports and their relationship to psychological well-being. *Psychology in the Schools*, 59(1), 95–114. <https://doi.org/10.1002/pits.22500>
- Dey, S. and Harper, K. B. (2022, February 28). Transgender Texas kids are terrified after governor orders that parents be investigated for child abuse. *The Texas Tribune*.
<https://www.texastribune.org/2022/02/28/texas-transgender-child-abuse/>
- Durwood, L., McLaughlin, K. A., & Olson, K. R. (2017). Mental Health and Self-Worth in Socially Transitioned Transgender Youth. *Journal of the American Academy of Child & Adolescent Psychiatry*, 56(2), 116-123.e2. <https://doi.org/10.1016/j.jaac.2016.10.016>
- Equality Texas. (2022). Legislative bill tracker. Retrieved March 1, 2022, from <https://www.equalitytexas.org/legislative-bill-tracker/>
- Freedom For All Americans. (2022). LGBTQ americans aren't fully protected from discrimination in 29 states. <https://freedomforallamericans.org/states/>
- Herman, J. L., Flores, A. R., Brown, T. N. T., Wilson, B. D. M., & Conron, K. J. (2017, January). Age of Individuals Who Identify as Transgender in the United States. Williams Institute. <https://williamsinstitute.law.ucla.edu/publications/age-trans-individuals-us/>
- Hoye, R., Nicholson, M., & Brown, K. (2015). Involvement in sport and social connectedness. *International Review for the Sociology of Sport*, 50(1), 3–21.
<https://doi.org/10.1177/1012690212466076>
- Ishihara, T., Nakajima, T., Yamatsu, K., Okita, K., Sagawa, M., & Morita, N. (2020). Relationship of participation in specific sports to academic performance in adolescents: A 2-year longitudinal study. *Scandinavian Journal of Medicine & Science in Sports*, 30(8), 1471–1482. <https://doi.org/10.1111/sms.13703>
- Johns, M. M., Lowry, R., Andrzejewski, J., Barrios, L. C., Demissie, Z., McManus, T., Rasberry, C. N., Robin, L., & Underwood, J. M. (2019). Transgender Identity and Experiences of Violence Victimization, Substance Use, Suicide Risk, and Sexual Risk Behaviors Among High School Students — 19 States and Large Urban School Districts, 2017. *Morbidity and Mortality Weekly Report*, 68(3), 67–71. <https://doi.org/10.15585/mmwr.mm6803a3>
- Johnson, A. H., & Rogers, B. A. (2020). “We’re the Normal Ones Here”: Community Involvement, Peer Support, and Transgender Mental Health. *Sociological Inquiry*, 90(2), 271–292.
<https://doi.org/10.1111/soin.12347>
- Kulick, A., Wernick, L. J., Espinoza, M. A. V., Newman, T. J., & Dessel, A. B. (2019). Three strikes and you’re out: culture, facilities, and participation among LGBTQ youth in sports. *Sport, Education and Society*, 24(9), 939–953.
<https://doi.org/10.1080/13573322.2018.1532406>
- McLemore, K. A. (2018). A Minority Stress Perspective on Transgender Individuals' Experiences With Misgendering. *Stigma and Health*, 3(1), 53–64.
<https://doi.org/https://doi.org/10.1037/sah0000070>

- Munce, M. (2021, May 17). Texas Senate resumes push to ban transition-related medical care for transgender children, days after bill failed in House. *The Texas Tribune*.
<https://www.texastribune.org/2021/05/17/texas-transgender-children-medical-care/>
- National Association of Social Workers. (2022). Code of Ethics. Retrieved March 1, 2022, from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics>
- Pollitt, A. M., Ioverno, S., Russell, S. T., Li, G., & Grossman, A. H. (2021). Predictors and Mental Health Benefits of Chosen Name Use Among Transgender Youth. *Youth & Society*, 53(2), 320–341. <https://doi.org/10.1177/0044118X19855898>
- Rees, D. I., & Sabia, J. J. (2010). Sports participation and academic performance: Evidence from the National Longitudinal Study of Adolescent Health. *Economics of Education Review*, 29(5), 751–759. <https://doi.org/10.1016/j.econedurev.2010.04.008>
- Reisner, S. L., Veters, R., Leclerc, M., Zaslow, S., Wolfrum, S., Shumer, D., & Mimiaga, M. J. (2015). Mental Health of Transgender Youth in Care at an Adolescent Urban Community Health Center: A Matched Retrospective Cohort Study. *Journal of Adolescent Health*, 56(3), 274–279. <https://doi.org/10.1016/j.jadohealth.2014.10.264>
- Russell, S. T., Pollitt, A. M., Li, G., & Grossman, A. H. (2018). Chosen Name Use Is Linked to Reduced Depressive Symptoms, Suicidal Ideation, and Suicidal Behavior Among Transgender Youth. *Journal of Adolescent Health*, 63(4), 503–505.
- Sinclair-Palm, J., & Chokly, K. (2022). ‘It’s a giant faux pas’: exploring young trans people’s beliefs about deadnaming and the term deadname. *Journal of LGBT Youth*, 1-20.
- Swank, E., Frost, D. M., & Fahs, B. (2012). Rural location and exposure to minority stress among sexual minorities in the United States. *Psychology and Sexuality*, 3(3), 226–243.
- Texas Law Help. (2022). Texas Name and Gender Marker Change Guide. Retrieved March 1, 2022, from <https://texaslawhelp.org/article/texas-name-and-gender-marker-change-guide>
- Texas Legislature Online. (2021, October 25). 87(3) History for HB 25.
<https://capitol.texas.gov/BillLookup/History.aspx?LegSess=873&Bill=HB25>

Female Clients and Endometriosis in the Social Work Health Care Setting
By: Brianna Rodriguez

Abstract

This piece highlights women's plight in the health care setting. Far too often, women seeking medical sanctuary are overlooked and dismissed as cases of what was once known as "female hysteria." This paper focuses on the journey of Cassie Bennett, a hypothetical client struggling with a diagnosis that primarily impacts women: Endometriosis. This paper aims to analyze and provide constructive feedback regarding the treatment provided to Ms. Bennett and start a conversation about the importance of client advocacy and empathy. The world of health care can seem quite intimidating to clients. It is the responsibility of health care professionals and social workers to establish healthy rapport and conduct in-depth assessments of clients to ensure that all used forms of intervention are appropriate for the client. Another important aspect of this case study is the need for a successful discharge plan. Care does not stop when the client leaves the facility. Please refer to Figure 1 for a brief brochure summarizing the findings of this paper.

Introduction

The client for this case is Cassie Bennett, an English-speaking white woman in her early 20s. Ms. Bennett is a woman living with Endometriosis (NBC, 2020). Endometriosis is a condition that causes inflammation and scarring of uterine tissue that can result in painful, dangerous cysts (Office on Women's Health, 2021). The client is admitted to the hospital after she explains that she is having excruciating pains in the abdominal region of her body. She is very familiar with her body and only admitted herself to the hospital because she knew that something different was occurring. Her regular OBGYN was not available until the following week. The client explains that previous doctors have dismissed her case and given her unrealistic advice in the past. The client does not indicate how long she has lived with this condition but expresses that she has "been [dismissed] more times than [she] can count" (NBC, 2020). She says that doctors have gone as far as to "prescribe" her to get pregnant to alleviate the painful symptoms of Endometriosis.

Even in this hospital, the physician quickly dismissed her case and explained that pain does not indicate a real problem more often than not. In the case of Ms. Bennett, the physician was not entirely familiar with Endometriosis, resulting in a lack of compassion and empathy toward the client. After conducting a transvaginal ultrasound, the results came back inconclusive. After reporting to others, the physician is told by their male superiors that there is nothing more they can do as a facility. Even after the physician expresses her concerns, such as possible inaccurate medical imaging, the superior explains to the physician that they will only offer pain medication and ask the client to return if their condition worsens. The superior ends the conversation by saying that surgical intervention is not an option until the physician can provide extreme and unmistakable evidence. The medics explain that they can refer her to her gynecologist and take it from there. The physician assigned to Ms. Bennett discharges the client and suggests they use simple pain medications and return if the pain progresses. The client is displeased and leaves. Later that day, the client returned to the facility in worse condition. The client is faint, losing color, vomiting, and has had a hemorrhage. Only at this point does the facility take immediate action to assist the client. Sadly, because service providers did not take the client's concerns seriously fast enough, the client must quickly enter invasive surgery. Sadly, the client loses an ovary in surgery. This was an incredibly traumatic experience for the client, and she explains that her intuition was correct and hopes that future clients in her position will be treated with the respect they deserve (NBC, 2020).

Dignity and Self-Advocacy of the Client in Health Care

Advocacy is one of many critical components of the profession of social work (NASW, 2017). Clients can partake in "self-advocacy" when meeting with service providers. In self-advocacy, the client explains their situation and attempts to speak up for their interests. Listening

to and trying to understand the client while they self-advocate is a fantastic way to build rapport. By allowing open dialogue to flow directly from the client, the client can feel as if they are a part of the service plan, establishing a tremendous trust with their service provider.

Relating the importance of self-advocacy to the case of Ms. Bennett, upon meeting with the physician for the first time, Ms. Bennett immediately explains that she knows her body and knows what the physician will tell her. She asserts herself and tells the physician that she refuses to be sent away because she knows her body is trying to tell her something. This was self-advocacy, a significant strength to have as a client in a seemingly untrustworthy environment.

While self-advocacy is essential, it can only go so far. It is up to social workers to take the information given by the client and manifest a service plan. For example, in the case study, the physician wanted to ensure that the hospital provided the necessary services needed for Ms. Bennett. The physician discussed the possibilities of insufficient care previously and currently provided with their supervisor and advocated for additional care (Dziegielewski & Holliman, 2020). Advocacy was an ethical imperative in this situation because it could have been worse for the patient had the physician not gone above and beyond by seeking out their supervisors.

Dignity and Worth of the Client in Health Care

Another critical aspect of social work that is important to the case of Ms. Bennett is the core value of dignity and worth of the person (National Association of Social Workers [NASW], 2017). The supervisors bluntly stated that the client was exaggerating the severity of the symptoms she was experiencing. This attitude and behavior go directly against this core value and put the client's life at risk. The fast-paced environment implied they lacked reasons to spend resources on this specific client, so they wanted to refer them elsewhere. The client was treated as if they lacked dignity and worth.

Another substantial factor in social work is collaboration in Health Care. The physician assigned to Ms. Bennett worked alone and only confided in the supervisor for a short conversation. This physician was only thinking about what to do in the current moment, not the future. The client left the hospital without any guidance on dealing with the toll of the experience. The team could have considered multiple values and perspectives (Dziegielewski & Holliman, 2020). Since there was essentially one person making unilateral decisions for Ms. Bennett, she was rushed into a form of intervention without being consulted or briefed. No one took the time to ask Ms. Bennett if she was accepting of the interventions proposed. A suggestion for this would be to inform the client about all possible solutions and surgical procedures. Pamphlets and briefs could be gathered and given to the client to review and process. Preferably, this would be completed during the initial visit, rather than when the client returns in a worse condition.

Research in Health Care

Another area to consider in social work is research in Health Care. Without research, underserved populations will continue to be mistreated. Endometriosis is an incredibly underfunded and under-researched condition (Rogers et al., 2009). This could lead to a lack of solid guidelines for treating this chronic condition. Without research, professionals will struggle to understand how the client feels and how to manage their condition. A lack of research also means limited evidence-based treatments available for the client. Evidence-based treatments are essential to social work because it allows the social worker to make treatment plans that are most optimal for the client's success (Virginia Commonwealth University School of Social Work, 2021). A lack of documented successful and evidence-based options could result in the client not having a confident intervention plan.

The Importance of Discharge Plans

Discharge plans are essential in the field of social work health care. Efficient discharge plans are needed to improve a patient's quality of life and ensure continuity of care (Patel & Bechmann, 2021). Clients need stability in their lives, but sadly, social workers cannot be the constant support a client needs. Social workers and health care workers must appropriately terminate their relationship with their clients. When termination and discharges are made, the need for care does not stop. For example, Ms. Bennett has a chronic condition that does not have a cure. When she is discharged from the hospital, she will still need treatments and interventions to manage her condition. Rather than having a specific social worker be a constant in a client's life, social workers can network other resources that can assist their clients in the long run, post-termination.

A successful model for discharge plans is the Ambulatory Integration of the Medical and Social (AIMS) model. The AIMS model considers the following: patient engagement, assessment, care plan development, case management, and ongoing maintenance as needed (Rizzo et al., 2016). First and most importantly, patient engagement must occur. The service provider should discuss the desired goals and possible impacts with the client. For example, in the case of Ms. Bennett, the client's goal is to eliminate her pain. Since the client has already gone through surgery, the social worker should ask how they feel and how they would manage their future. A social worker familiar with OBGYN practices, fertility, and trauma would greatly benefit Ms. Bennett.

Next, the client can explain their experiences with their condition for assessment purposes (Rizzo et al., 2016). The client can explain, in chronological order, the relevant areas of their biopsychosocial-spiritual map. This can be followed by questions when needed. This is

important because it will highlight the influential areas of their life course and illuminate their social determinants of health (SDOH) (Rural Health Information Hub, 2020). For example, since this is a case about a woman and her reproductive system, it is essential to consider her SDOH of reproductive rights (Rural Health Information Hub, 2020.). Reproductive history should be asked about. Policies and practices that might have impacted her in the past can be considered. Her history and relationship to policies will be relevant when considering SDOH in light of healthcare practices (Rural Health Information Hub, 2020.). Questions such as her access to care, how often she has been turned away, whether the treatment has been affordable for her, and what services have been provided are essential. By discussing this information with the client, the social worker and client can collaboratively create an action plan that suits her goals and personal preferences.

Next is case management, which ideally means reviewing problem-solving issues and linking the client with needed services and support systems (Rizzo et al., 2016). For Ms. Bennett, this would specifically be an OBGYN specialist in addition to individual and group counseling. The first purpose would be the core service of information and health education (Dziegielewski & Holliman, 2020). By attending these sessions and having a reliable OBGYN, the client will obtain information relevant to their condition. For example, these sessions could provide her with insight and experiences that she is unaware of. She could learn how to manage her condition and learn about accessible and affordable versions of needed services. These systems could also be used to help manage trauma. The client just underwent invasive surgery after having her voice minimized. That could be a traumatic experience, and counseling could be beneficial.

Finally, for ongoing care, regular check-ups from an OBGYN are recommended. Since it was explained that pain is not the most significant indicator of the severity of the diagnosis, it is safe to say that check-ups could ease some stress of the uncertainty of the future. Mental health and physical health are connected (Ohrnberger et al., 2017). This case was traumatic for Ms. Bennett and could have left emotional trauma. As a result, the client might struggle with anxiety and distress over their condition. They might fear that this same situation could occur again. The client should have a continuous relationship with a medical professional to be proactive in their plans. Since the client's goal is to alleviate the pain, her service providers can recommend various methods such as birth control, pain-relieving medication, non-medicated pain relievers (e.g., physical therapy or heating pads), holistic approaches, and surgery.

Conclusion

To conclude, the client has had some very rough experiences with the healthcare system in their life. This is a significant SDOH because it is directly related to life course frameworks such as unfolding and health development (Halfon & Forrest, 2017). The client has lacked mezzo-level support systems (e.g., supportive and nurturing medical professionals), which means their health development was poor (Halfon & Forrest, 2017). Lacking a support system means that the client lacks an external environment to grow in. This also impacted the unfolding of her biological development because the roadmap for her growth did not have any interventions to prevent her condition from worsening (Halfon & Forrest, 2017). For example, the genes directly related to her diagnosis continued to unfold and declined her state of health since doctors refused even to entertain the idea of providing treatments. Since doctors continued to turn her away, her condition worsened.

All clients should receive culturally responsive care. In the case of Ms. Bennett, womanhood plays a prominent role. Biological sex is a crucial factor that impacted the case study of Ms. Bennett. A woman is in agony because her reproductive system is being attacked by excessive tissue. The physicians labeled her as a hysterical woman overreacting to an incurable condition. The physicians, at times, seem to be annoyed with her because of her bodily reaction to Endometriosis. A client should feel empowered when speaking to social workers and health care service providers.

Another essential facet in the case of Ms. Bennett is age. We must consider biological factors. Another life course development factor is time (Halfon & Forrest, 2017). As clients age, their bodies will change and handle health symptoms differently. The client might not bounce back as quickly from other flare-ups. There needs to be a discussion on how age will impact her treatment and future. Another question to consider, does the client plan on starting a family in the future? This condition might make it hard for the client to start a family as soon as possible, and age might add another challenge. Long-term planning is needed to address this immediately if this is a future that the client would like. This case study should consider the intersectionality between sex, age, and relationship status because they could impact the client's desired treatment. Service providers should consider sex for biological development purposes and relationship status for family planning purposes.

For the treatment of this client post-operation, counseling and medical specialists are required for ongoing care and treatment. Since Endometriosis is not curable, the client needs a road map for managing their condition (U.S. Department of Health and Human Services, 2020). This roadmap must be directly tailored to the client's biopsychosocial-spiritual needs so that the client is more likely to follow through with the plan. If they are uncomfortable with a program or

plan, they might abandon it, creating future problems. Therefore, the client should be referred to specialists and counseling resources. With a specialist, an individualized plan can be created to assist in her goal of alleviating pain since there is no cure. Counseling is also an excellent form of care that can be implemented into a care plan because it will provide a constant support network.

To conclude, the client, Ms. Bennett, would have significantly benefitted from an empathetic team of service providers and a discharge plan that considered the various social determinants of health that could have impacted the client. Refer to Figure 1 to view a handout that summarizes the case of Ms. Bennett and review possible treatment and discharge plans.

References

- Dziegielewska, S., & Holliman, D. (2020): *The Changing Face of Health Care Social Work*, 4th New York, NY: Springer.
- Halfon, N., & Forrest, C. B. (2017). The Emerging Theoretical Framework of Life Course Health Development. In N. Halfon (Eds.) et. al., *Handbook of Life Course Health Development*. (pp. 19–43). Springer. Retrieved from: <https://pubmed.ncbi.nlm.nih.gov/31314301/>
- National Association of Social Workers [NASW]. (2017). Code of Ethics of the National Association of Social Workers. Retrieved from: <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>
- NBC. (2020). Watch transplant episode: Tell me who you are. Retrieved November 20, 2021, from <https://www.nbc.com/transplant/video/tell-me-who-you-are/4226734>.
- Office on Women's Health. (2021). Endometriosis. Endometriosis | Office on Women's Health. Retrieved May 11, 2022, from <https://www.womenshealth.gov/a-z-topics/endometriosis>
- Ohrnberger, J., Finchera, E., & Sutton, M. (2017). The relationship between physical and mental health: A mediation analysis. *Social science & medicine* (1982). Retrieved May 16, 2022, from <https://pubmed.ncbi.nlm.nih.gov/29132081/>
- Patel, P., & Bechmann, S. (2021). Discharge planning. National Library of Medicine. Retrieved May 4, 2022, from <https://www.ncbi.nlm.nih.gov/books/NBK557819/>
- Rizzo, V. M., Rowe, J. M., Shier Kricke, G., Krajci, K., & Golden, R. (2016). AIMS: A Care Coordination Model to Improve Patient Health Outcomes. *Health & social work*, 41(3), 191–195. <https://doi.org/10.1093/hsw/hlw029>
- Rogers, P. A. W., D'Hooghe, T. M., Fazleabas, A., Gargett, C. E., Giudice, L. C., Montgomery, G. W., Rombauts, L., Salamonsen, L. A., & Zondervan, K. T. (2009). Priorities for endometriosis research: Recommendations from an international consensus workshop. *Reproductive sciences* (Thousand Oaks, Calif.). Retrieved May 13, 2022, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3682634/>
- Rural Health Information Hub. (2020). Social Determinants of Health for Rural People. Social Determinants of Health for Rural People Overview. Retrieved May 7, 2022, from <https://www.ruralhealthinfo.org/topics/social-determinants-of-health>
- U.S. Department of Health and Human Services. (2020). What are the treatments for Endometriosis? Eunice Kennedy Shriver National Institute of Child Health and Human Development. Retrieved May 13, 2022, from <https://www.nichd.nih.gov/health/topics/endometri/conditioninfo/treatment#:~:text=There%20is%20currently%20no%20cure,Your%20age>
- Virginia Commonwealth University School of Social Work. (2021). Understanding evidence-based Social Work. Evidence-Based Social Work: What is it? | VCU Online Social Work. Retrieved May 18, 2022, from <https://onlinesocialwork.vcu.edu/blog/evidence-based-social-work/#:~:text=Evidence%2Dbased%20practice%20helps%20social,successful%20program%20are%20widely%20implemented.>

Figure 1

The Case of Cassie Bennett Handout

Care Plan

Diagnosis

- Pelvic exams, ultrasounds, magnetic resonance imaging, and Laparoscopy [2]

Treatment

- Pain medication
- Hormone therapy
- Conservative surgery
- Fertility treatment
- Hysterectomy
- Coping and support
- Lifestyle and home remedies
- Alternative medicine

Social Work Core Services

Patient Advocacy - patients with this diagnosis are often dismissed and sent home

Psychosocial Evaluations - physical pain and fertility issues can impact mental health

Concrete Service Provisions - find aftercare plans for client since this is a chronic issue: gynecologists, therapists, counselors, support circles [3]

EXAMPLE OF CASSIE BENNETT

Cassie Bennett is a young woman who has been suffering from Endometriosis for what appears to be a long time. In the past, doctors have neglected her concerns and self-advocacy. Cassie explains that she has been experiencing pains that are significantly different from her usual “flare-ups” [4].

Cassie Bennett is determined to seek further treatment and is not assisted until she finally hemorrhages in a public space. She is immediately taken into surgery, where she loses an ovary.

Cassie Bennett is just one example; this pamphlet aims to prevent situations like this from occurring with future patients.

Care and Discharge Plan

Patient Engagement - discuss desired goals of the client, WITH THE CLIENT

- What kind of treatment would they like, how would they like to manage their experience, etc.

Assessment and Care Plan Development - ask the client to explain their experiences and situation

Case Management - link patient to specialists and concrete services

Ongoing Care as Needed - encourage routine checkups (pain is not an indicator) and self-motivation [5]

IMPORTANCE

There has been little to no advancements in treatment and management of the disease for the past decade

Endometriosis could explain up to half of unexplained infertility cases and nearly all of chronic pelvic pain in women

Severely underfunded area of treatment and management

Chronic disease that becomes expensive and life consuming [6]

Endometriosis



Note. This is a brochure made for the purpose of briefly educating the public about Endometriosis and the case of Cassie Bennett.

Review of the 2021 Redistricting Maps of Texas
By: Annay Ruiz

Abstract

This paper is an opinion on the Republican Party's redistricting map for 2021 and its present and future implications for people in Texas. First, this paper describes the background of the redistricting process and gerrymandering. Then, it explores how the current population changes in Texas might influence the state's voting patterns and the Republican Party's influence. Following this, it examines how the Republican Party in Texas has diminished the LatinX and Democratic vote by gerrymandering districts in favor of Republican and White voters. The evidence is given by examining voting districts' population rates of LatinX, people of color, and White voters in a few districts. Then viewing the entirety of the state and comparing the number of districts that contain political voter bases of each party. This opinion also provides a summary of current legal actions to counter the new district map in Texas. It ends by illustrating why social workers and social work students should care about policies and government procedures.

Review of the 2021 Redistricting Maps of Texas

The Republican Party in Texas has restricted votes by creating laws that weaken the voting power of particular groups. One of those laws is significantly redistricting to maintain the Republican Party's clout in the Texas legislature; this is called gerrymandering (ACLU, 2021). The Republican Party has held a stronghold in this state for over 20 years (Batheja, 2021) and redistricted to ensure its perpetuation. In 2021, the United States Census Bureau Decennial Population Report came in, and it was once again time for redistricting.

Background

Redistricting is a process of creating sections known as districts in a geographical area to determine the number of elected representatives each district shall have based on its population size. Redistricting ensures that each district's population has equal representation in government. Before the 1960s redistricting laws were not standardized and states assigned the number of representatives as they saw fit. As a result, when populations began increasing, lower density

areas had more representatives than higher density areas (ACLU, 2021; Loyola Law School, n.d.-b). Some states would go for decades without redistricting, and some legislatures did it because they favored the interests of the rural areas (Stebenne, 2012). Others did it to retain their Congressional House seats due to the 1911 law that limited the number of total seats in the U.S. House (Stebenne, 2012). Some congressional representatives redistricted areas to follow partisan principles and personal agendas. Moreover, states redistricted areas out of racial discrimination (Stebenne, 2012).

During the 1960's, the Supreme Court heard several cases about redistricting that violated voting rights, and they ruled that the "one person, one vote" was tantamount to the 14th amendment (ACLU, 2021). The Supreme Court also ruled that states had to redistrict the appropriate number of representatives for each district's population based on the U.S. Census Bureau's decennial reported data (Loyola Law School, n.d.-b). Only seven states use independent commissions to redraw district maps certifying unbiased equal representation for all voters (Loyola Law School, n.d.-a). Texas is not one of those states (ACLU, 2021).

The New District Maps

Partisan politics and racial discrimination have not stopped because of social changes, laws, and people of color reaching high-level government positions. Texas is a prime example of this and is a battleground state (Oak, 2020). This past 2020 presidential election was a narrow win for Donald Trump, with a 5.6% lead over Joe Biden ("2020 Election Results Texas", n.d.). The closest elections for Texas were in 2016, the Republican candidate won by 9%, in 1996, when the Republican candidate won by 5%, in 1992 Republican candidate won by 3.2%, and in 1976 when Jimmy Carter, the Democratic candidate, won the state by a 3.1% margin. All other elections before 1976 were a win above a 10% margin for the Republican party (Samuels, 2020;

270ToWin, n.d.). Texas may be on a trend toward a more liberal-leaning state using past election rates as a basis for future election outcomes.

This last presidential election was also when the U.S. Census Bureau conducted its demographics study of the country, opening the gates for redistricting. The report was something the Republicans did not see coming. Texas saw a considerable increase in its population, with nearly 4 million people added to the state (U.S. Census Bureau, 2021a). Of those 4 million people, 2 million people are LatinX, and people of color contribute 90% of the state's growth (Ura et al., 2021). Texas gained two congressional seats in the United States Congress, the most of any state (U.S. Census Bureau, 2021b). The LatinX population now is at 39.3%, and the White population is at 39.8%, a vast increase in the LatinX population within the last few years. The LatinX population's size is now even with the White population in Texas, a majority-minority state (Ura et al., 2021).

With such drastic changes in population, it meant changing the district lines where the Republican Party will win indefinitely. The Republican majority legislature in Texas passed the redrawn district maps in October 2021 ("History for HB1", n.d.; "History for SB4", n.d.; "History for SB6", n.d.). The Texas Republican Party made sure to break up those substantial LatinX populations in areas with higher White inhabitants.

For instance, the previous Congressional District 33 spanned from Fort Worth to Dallas with Irving included. The district contained a 48% population of LatinX voters and a 25% White voter population, with people of color making up the rest. Republicans' counter maneuver for Congressional District 33 was to move Irving into Congressional District 6. The redrawn Congressional District 6 starts from Irving and stretches to Wells, Texas, 165 miles away. Congressional District 6 has a 60% population of White voters and a 21% population of LatinX

voters (Astudillo et al., 2021). While also ensuring other districts around it had higher White populations (Texas Legislative Council, n.d.-a, Texas Legislative Council, n.d.-b).

Irving was also in Senate District 9 with a 55% White voter population and a LatinX voter population of 23%. This district narrowly voted for Trump. To ensure the number of LatinX voters would not rise, the Texan Republican Party moved Irving to Senate District 16, which already had a more substantial Democratic presence. Senate District 16 ranges from Grand Prairie to Irving to Richardson, then down to Balch Springs, with a majority population of 46% White voters and 28% LatinX voters (Astudillo et al., 2021).

Another district on the Senate Map which had a change is Senate District 10. The earlier map had equal proportions of people of color within 413 square miles. Black voters were at 20%, LatinX voters were at 21%, Asian voters were at 5%, and White voters were at 54%. The new map of Senate District 10 now covers 6,233 square miles and has White voters at 62%, Black and LatinX voters at 17%, and Asian voters at 4%. For an area that also had a growing population of minorities, the map was extended to create an advantage for White voters (Barragán, 2021).

Moving or condensing the LatinX voter population is the goal where Republicans believe LatinX voters may vote for or lean Democratic. The major cities in Texas that have the highest population rates and higher rates of LatinX and liberal voters have been condensed and slimmed on the new district maps. The Texas congressional map holds a majority of White voters at 65%. Congressional districts that hold a LatinX voter majority are only 18.4% (Ramsey, 2021). Ramsey (2021) expands on this more, showing that out of the 150 House Districts there was a White majority in 89 districts, and 30 districts had a LatinX majority. In Senate Districts, 20 of them had a White majority, and only 7 districts had a majority of the LatinX population. The

White population still has the most voting power in a state that can attribute its growth to over 90% of people other than White.

Even when looking only at voter political parties, the Republican Texas Legislature made sure they would hold the majority of districts. In the previous congressional map, 14 districts were competitive. Congressional districts that had a majority of a Republican base were a total of 13, and 9 districts had a majority Democratic base. The new map ensures that the congressional districts in Texas have 23 districts that are majority Republican. With 12 districts holding a Democratic majority, three districts will be competitive arenas. Even if those competitive and Democratic strong districts won out, that would only account for 15 districts. It does not create a fair election and only assures the Republican Party's power ("2022Redistricting.", n.d.). The Princeton Gerrymandering Report Card grades the new congressional district map an F, the new Senate District map also gets an overall F (Princeton Electoral Innovation Lab & RepresentUS, 2021a; Princeton Electoral Innovation Lab & RepresentUS, 2021c). The House District map received a C but still favors the Republican party (Princeton Electoral Innovation Lab & RepresentUS, 2021b). Even from an outside academic source, the current district maps favor the old power in Texas rather than the growing population would show.

These new district maps show how the Republican Party has made it, so the Democrats and people of color are dispersed throughout the districts and in as few districts as possible. There has been a case brought to the courts by the Department of Justice in the U.S. District Court for Western Texas over these new district maps (Coronado & Riccardi, 2021). Representatives of District 10 have also filed a lawsuit in Texas within the same U.S. District Court (Aguilar, 2022). The Mexican American Legal Defense and Educational Fund (MALDF)

has also filed a lawsuit against Texas redistricting maps in the U.S. District Court for Western Texas (Mexican American Legal Defense and Educational Fund, 2021). Asian American Legal Defense and Education Fund (AALDEF) have also brought its case to Texas' redistricting map fighting against the dilution of the Asian vote (NPR & All Things Considered [Podcast], 2021).

Conclusion

Texas has a long history of diminishing the vote of people of color and the liberal vote. The Republican Party in Texas has weakened the voting power of the Democratic Party by ensuring Democratic majority districts are condensed to as few districts as possible. The Republican Party has done this by dispersing the LatinX and people of color's population to multiple districts, losing the number of competitive districts, and weakening the voting power of people of color and liberal-leaning voters. In my opinion, the state of Texas does not have equal representation, and there is an infringement of voting rights. People and organizations, such as MALDEF and Representatives of District 10 have taken action to stop this, yet things have not changed.

Social workers and social work students can positively influence this area. The National Association of Social Work calls on Social Justice, Service, Dignity and Worth of the Person in its ethics (National Association of Social Workers, 2017). Is it not the duty of social workers to serve their community by informing them of the hurdles in place? Is it not part of service to find ways of connecting their community to organizations and people that help them with the protection of their voting rights? Is it not Social Justice for social workers and students themselves to participate in policy, government, and social issue movements to ensure that significant systemic oppressions do not prevail? Is it not the Dignity and Worth of a Person by

making sure each person has the right to vote, have their vote be fairly counted, and heard by representatives?

Voting is not the only issue: it is the system and those in policy positions that deny and devalue the voting rights of people of color and liberal voters. Voter participation is crucial and allowing people of color and liberal votes to be counted could make the difference in social justice issues. There are many issues this affects which include climate change, education, cost of housing, abortion rights, imprisonment rates, and many more. If people in the United States, let alone Texas, continue to vote in a rigged system, how will things ever change?

References

- 270toWin. (n.d.). Texas. Retrieved February 24, 2022, from <https://www.270towin.com/states/Texas>
- Aguilar, J. (2022,). Federal court hears first challenge to Texas' redrawn political maps. Houston Public Media. <https://www.houstonpublicmedia.org/articles/news/politics/2022/01/25/417631/first-texas-redistricting-challenge-set-to-be-heard-in-federal-court/>
- ACLU. (2021, August 23). What is Redistricting and Why Should We Care? American Civil Liberties Union. Retrieved February 24, 2022, from <https://www.aclu.org/news/voting-rights/what-is-redistricting-and-why-should-we-care/>
- Astudillo, C., Cai, M., & Huang, K. (2021, October 22). Texas has new political maps. See which districts your home is in. The Texas Tribune. Retrieved from <https://apps.texastribune.org/features/2021/texas-redistricting-map/>.
- Barragán, J. (2021, October 4). Historically red Tarrant County diversified in the last decade. Now Republicans are trying to divide up its voters of color. The Texas Tribune. Retrieved from <https://www.texastribune.org/2021/10/04/texas-redistricting-tarrant-county/>.
- Batheja, A. (2014, June 6). Texas' Shift From Blue to Red Informs 2014 Races. The Texas Tribune. Retrieved February 24, 2022, from <https://www.texastribune.org/2014/06/06/how-texas-shifted-blue-red-informs-democrats-today/>.
- Coronado, A., & Riccardi, N. (2021, December 6). Justice Department sues Texas over new redistricting maps. AP NEWS. <https://apnews.com/article/texas-lawsuits-dallas-race-and-ethnicity-voting-rights-9e120f7578628a5fb0ed6a65bc2b2872>
- Loyola Law School. (n.d.). National Summary: Who Draws the Lines? All About Redistricting. Retrieved July 6, 2022, from <https://redistricting.lls.edu/national-overview/?colorby=Institution&level=Congress&cycle=2020>
- Loyola Law School. (n.d.). What is redistricting? All About Redistricting. Retrieved February 24, 2022, from <https://redistricting.lls.edu/redistricting-101/what-is-redistricting/>
- Mexican American Legal Defense and Educational Fund. (2021, October 18). MALDEF CHALLENGES TEXAS REDISTRICTING MAPS. Maldef. Retrieved February 24, 2022, from <https://www.maldef.org/2021/10/maldef-challenges-texas-redistricting-maps/>
- National Association of Social Workers. (2017). Read the Code of Ethics. NASW - National Association of Social Workers. Retrieved February 24, 2022, from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>
- NPR. (n.d.). 2020 Election Results Texas. Retrieved February 24, 2022, from <https://apps.npr.org/elections20-interactive/#/states/TX>
- NPR & All Things Considered [Podcast]. (2021, December 31). Asian American groups file a legal challenge to Texas' redistricting plans. NPR. <https://www.npr.org/2021/12/31/1069538919/asians-lose-voting-power-in-texas>
- Oak, M. (2020, October 28). Is Texas a battleground state for the 2020 elections? KVUE ABC. <https://www.kvue.com/article/news/politics/vote-texas/texas-battleground-state-2020-elections/269-1ce7fa73-dba1-4737-9abd-7f307648a573>

- Princeton Electoral Innovation Lab & RepresentUS. (2021a, October 18). Redistricting Report Card: Texas 2021 Final Congressional Plan C2193. Princeton Gerrymandering Project. Retrieved February 24, 2022, from <https://gerrymander.princeton.edu/redistricting-report-card/?planId=recL5EF85h0ILukMA>
- Princeton Electoral Innovation Lab & RepresentUS. (2021b, October 13). Redistricting Report Card: Texas 2021 State House Final Map H2316. Princeton Gerrymandering Project. Retrieved February 24, 2022, from <https://gerrymander.princeton.edu/redistricting-report-card/?planId=recS4YrBY11QLXspq>
- Princeton Electoral Innovation Lab & RepresentUS. (2021c, October 6). Redistricting Report Card: Texas 2021 State Senate Final Map S2168. Princeton Gerrymandering Project. Retrieved February 24, 2022, from <https://gerrymander.princeton.edu/redistricting-report-card/?planId=recJOp07ngCtmGXDO>
- POLITICO. (n.d.). 2022Redistricting. Retrieved February 24, 2022, from <https://www.politico.com/interactives/2022/congressional-redistricting-maps-by-state-and-district/texas/>
- Ramsey, R. (2021, December 8). Analysis: Texas' population has changed much faster than its political maps. The Texas Tribune. Retrieved from <https://www.texastribune.org/2021/12/08/texas-redistricting-demographics-elections/>.
- Samuels, A. (2020, November 3). President Donald Trump defeats Joe Biden in Texas. The Texas Tribune. Retrieved February 24, 2022, from <https://www.texastribune.org/2020/11/03/trump-biden-texas-presidential/>.
- Stebenne, D. (2012, February). Re-mapping American Politics: The Redistricting Revolution Fifty Years Later. OSU. https://origins.osu.edu/article/re-mapping-american-politics-redistricting-revolution-fifty-years-later?language_content_entity=en
- Texas Legislative Council. (n.d.-a) PLANC2100. <https://dvr.capitol.texas.gov/Congress/2/PLANC2100>
- Texas Legislative Council. (n.d.-b) PLANC2193. <https://dvr.capitol.texas.gov/Congress/55/PLANC2193>
- Texas Legislature Online – 87(3). (n.d). History for HB1. <https://capitol.texas.gov/BillLookup/History.aspx?LegSess=873&Bill=HB1>
- Texas Legislature Online – 87(3). (n.d). History for SB4. <https://capitol.texas.gov/BillLookup/History.aspx?LegSess=873&Bill=SB4>
- Texas Legislature Online – 87(3). (n.d). History for SB6. <https://capitol.texas.gov/BillLookup/History.aspx?LegSess=873&Bill=SB6>
- U.S. Census Bureau. (2021a, August 12). 2020 Population and Housing State Data [Interactive Infographic]. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>
- U.S. Census Bureau. (2021b, April 26). Table 1. APPORTIONMENT POPULATION AND NUMBER OF REPRESENTATIVES BY STATE: 2020 CENSUS [PDF]. U.S. Department of Commerce. <https://www2.census.gov/programs-surveys/decennial/2020/data/apportionment/apportionment-2020-table01.pdf>
- Ura, A., Kao, J., Astudillo, C., & Essig, C. (2021, August 12). People of color make up 95% of Texas' population growth, and cities and suburbs are booming, 2020 census shows. The Texas Tribune. Retrieved from <https://www.texastribune.org/2021/08/12/texas-2020-census/>.

How I Learned Community

By: Berret Buvinghausen

Abstract

The three poems provided were initially written for a hip-hop and social justice class. The project was about community in social work and the conciseness of social work values. These values include service, dignity, and worth of a person, the importance of human relationships, and competence. Service involves the overall attention and treatment of the client. In providing treatment, a social worker should ensure that the dignity and worth of the client are maintained reminding them that every journey is important and deserves attention. Dignity and worth and worth of the client can be categorized as competence, which can translate to awareness of self and awareness of the client.

In the three poems, I express thoughts, feelings, and emotions that have shaped me into the person I am today. *Love Thy Neighbor* is to show how community was present in my childhood and highlights my innocence of not being highly aware of the chaos of life. It illustrates my thinking as a child and explains how this point of view influenced my adulthood perspective. *Curiosity Raised the Cat* describes how I became the young adult I am. It touches on the transition from everything I did not understand as a child to those experiences making sense. It poses the question of ‘what if I had never experienced the things described in *Love Thy Neighbor*. Finally, *Love Thy Self* culminates the choices and experiences I have made toward the social work profession. It concludes my story by having a full circle moment from being the scared child to being the comforting professional. These three poems shine a light on my childhood from ages five to 20 years old. It begins with discovering my dad’s diagnosis of cancer in late 2007 and ends with me reaching my goal of becoming a social worker. The poems will gradually walk the reader through a devastating life experience that fueled my passion for social work and helping others. To submit these very personal poems, I had to allow myself to be vulnerable. It is important for social workers to reflect upon their firsthand experiences and values that influence their work with clients which may sometimes include being vulnerable with yourself. To encourage the client to do the same, a social worker must have the competence to create a safe and vulnerable place for the client to express dignity, self-worth, and self-determination.

Love Thy Neighbor

Competence, confidence, connection, caring, and character

All things I didn’t know existed at the time

But things that matter to me now.

I had my first lesson on community when I was five

Louder Than Words, Volume 2, Issue 1, 2022

Mother, father, sister, and brother
Sat around the room
Fear in our hearts as the word is dropped like a bomb
Cancer.
Terminal.
I figured this was our downfall
Losing my father had to be what tore us apart
Heartbreak ripped through time and the space around me
Shattered pieces scurried to the floor
I felt alone
Heart racing
Blood thrashing in my ears
It wasn't long
It never felt long
Until...
The evil leech death was clinging to my father
Any moment now the world would go quiet, and the sun would go dark
And one year later,
it did
My lungs filled to the brim with tears that couldn't escape me fast enough
The room was closing in on me
I cannot breathe

I cannot see

I cannot...

There's a knock at the door

Freshly seven years old I wipe my nose on my sleeve

A casserole with a bouquet of flowers marked

Thinking of you

No name

I didn't know how a casserole would bring my dad back

But I understood sometimes it's all people have to offer to others

I was thankful I wouldn't be hungry

I added it to the other casseroles in the fridge

Doorbells ringing! My brother would yell

Why are the phones always ringing?

Why do my ears always feel like they're ringing

There are people always inside of the house

They always whisper

They always hug my mother and kiss my forehead

They always tell my brother he's the spitting image

Alone

Why can't they leave us alone

But I am older now and understand

They were there to hold our hands

Louder Than Words, Volume 2, Issue 1, 2022

To lift us up when we had fallen
They kept me fed
They kept me warm
They kept me distracted
They kept my mother from wrapping herself in the familiar smell of my father's shirt
And burying her head
to then never come out

While I was confused and annoyed then
I understand now

They were just being a part of the community
The community my family had built
The community I had gained because my mother and father lived

Community...

Without them
Without the doorbells chiming
Without phones always ringing
If my home were to have been empty
I think we would still be alone
I thank those who sacrificed their time

To help heal ours

Louder Than Words, Volume 2, Issue 1, 2022

For what is a mother of three supposed to do alone

When her first reason for living

Dies

I remember the friends who stayed the night

The neighbors who helped clean house

The teacher who gave me no homework

The classmates who wrote us letters

The counselors who helped me cope

To peers who helped me through school

You were my first lesson in community

For there is always a lesson to be learned

In unity

So, I thank you

strangers and friends

Those who held my hand and taught me healing words

I'm studying hard to do the same

To help comfort those children and families

Whose sun may have gone dark

Whose lungs are spilling out with grief

I'm studying to help heal the heartbreak

To pick up the pieces of shattered time and discouraged hearts

If it weren't for the character and care of those around me when my world went dark

Louder Than Words, Volume 2, Issue 1, 2022

I think the chances of finding this kind of light

Would've burned out

You helped us with confidence

you spoke to me with competence

you showed me a true connection

you showed me what it looks like to care

not because you have to

but because you want to

that to me

shows character

and that to me

taught me community

Curiosity Raised the Cat

In a funny way

Sometimes I think

Did it take losing my father

To eventually find me

Would I ever have gone to therapy

Would I have ever been this soft

Would my skin still bruise at the words people throw at me

Would I still find comfort in the dark and twisted

Would I still scrape my knees to remind me to get back up

Would I desire healing families

Louder Than Words, Volume 2, Issue 1, 2022

Would I desire protecting children
Would I surround myself with the people I do
I would like to think so
But in a funny way
I know
I know it's because of therapy I can talk about my feelings
Partially anyways
My mother may be to blame
I know it is because those who ran to our aid
When the air ran cold
And the sun cast only shadows
That I grew to heal others
I know it is because the flowers gifted were not just flowers
They were an act of character
An act of community
Telling us we're not alone
A casserole on the front door was not just a casserole
It was a concerned teacher, hoping I wasn't hungry
I know the letters written by my cheer team
Weren't just letters
They were an extended hand
Telling me my family would not do this alone
It was acts of character like this
That made me want to go to school

So, I could do the same
It was the connection
The connection I felt with others
The connection I feel with my mother
When I feared I would never feel that way again
It was the connection that kept me grounded
I want children to feel safe
I want to be a safe person
I want to be the one they want in the room with them
I want to be the person they can call when they don't know where to turn
Social work and its learning
It's changing my life
I feel a sense of belonging
A sense of duty
To protect my younger self somehow by trying to protect these children
But alas I must learn
You can't save everyone

Love Thy Self

“You can't save everyone”
That's the first thing I learned when I switched my major
Part of me understood
But the other part of me didn't believe it
There were so many times in my life

Louder Than Words, Volume 2, Issue 1, 2022

Where I thought I couldn't be saved
Yet someone proved me wrong
I thought my life would end in flames when my father died
Or when my mother got sick
As illness was associated with death in my small mind
The same mind that had hoped they would always get better

Yet my community, my peers, my friends, my family
Never abandoned me
Instead, they embraced my tears, let go of anger, and spoke to me
They spoke to me
like I mattered
like I was the sun and that was the only way to feel it upon their face
and they listened
like my words moved oceans
and they held me
they held me like if they let go the ground beneath them may crumble
but even in weakness
I felt grace

Like I was going through this to be strong enough
Strong enough to make a difference
One moment I am a five-year-old girl being comforted by people in suits
And the next moment I am a woman in a suit comforting a young girl
Oh, how life is a continuous loop

Louder Than Words, Volume 2, Issue 1, 2022

Sometimes I wonder if my dad dying is what it took
Would I have been open to learning about community had my family shut everyone out
Would I be thankful for the tears
Had I not learned about connection
Would I be soft like a rose
And my voice often like honey
Had my mother not had to teach me of loss
Would I fight with my brother
Had I not been taught to understand his anger
Would I reach out and offer a hand
Had my friends not done it for me
I often thank some divine force for getting me through what I have been through
But I often don't take enough time to think of those who got me through it

Emotionally in tune

Emotionally aware

Utterly

Annoyingly

Self-aware

All tools of benefit in social work

All things I let people weaponize against me

All things I have learned

Louder Than Words, Volume 2, Issue 1, 2022

Throughout adolescence, connection strengthens in the brain

I think mine strengthened in my heart

It is chaos

But I remain certain I am home

I think this life chose me

I never understood why all the other kids used to cock their eyebrow when I told them I wanted

to be a therapist when I grew up

Well, I'm not a therapist

But I am damn close

I have learned from every moment of my life so far

I don't plan on stopping now

Competence, confidence, connection, caring, and character

All things I didn't know existed at the time

But things that matter to me now

I had my first lesson on community when I was five

Mother, father, sister, and brother

Sat around the room

Pride in their hearts as the words are dropped like a rose on water

I want to be a social worker

The Lonely Gardener
By: Hannah Kephart

Abstract

As a child, witnessing addiction was always framed in the sense of extreme, that people knew they were overwhelmingly addicted to a substance, and it would ruin their lives the moment they started using. However, I was unaware of the silent slope that addiction could be and that I had already been on the slide down for quite a while when I was assigned to an abstinence project that would open my eyes. I chose to abstain from nicotine, a substance I had been using for nearly two years at the time, believing it would be easier to quit as it had never been a powerful influence in my mind. When the struggle of the first week hit me like a train, I started to look past my fallacy and see the reality of my dependency on nicotine. Through the help of my accountability partners and the knowledge I gained throughout the course, I made a genuine long-term commitment to quitting smoking when I first believed I would not be able to. This project gave me an incredible perspective and insight not only on my own struggles with addiction but those of the potential clients I may work with in the future in the social work field. Through this poem, I aim to cast a light for those in the social work field to gain perspective on addiction. I hope that others out there struggling with addiction know that in the end, we are not alone and that we have support out there even if we did not realize it before.

Lush life behind stone walls,

Verdant greens cover cracks plaster alone cannot mend.

Ignore the cacophony of distractions outside,

they know not the troubles behind.

Sight must remain fixed on the burdens

ahead. Gardening is lonely work.

Knocking on my door,

A stranger I hadn't considered before.

Promises of safety and light,

A watchful companion on lonely
nights. A new friend enters the garden.

Your amber glow kept monsters at
bay. I had only known the soil and
struggles,

You shared with me a comfort that enveloped me whole.

Like a moth I came with no hesitation,

No worry of the dangers of your presence.

Glow turns to flame, a wreath of fire enclosing my
lungs, exhaling inhibitions and inhaling a new persona.

Turning from the garden, I find home in only you.

Doors shut, no visitors allowed, why need anyone else?

The dark overtakes, and your electricity sparks with a frightful craving.

Like tinder to fire, your embers turned on me,

Ignored for too long, harvest in hands suddenly aflame.

No forest for the trees, no fire for your light.

Sight robbed by your intoxicating essence,

Promises of solace have only assured

silence.

Amber light creeps past the horizon,

Morning dew quenching smoldering ashes and decay.

Rising from the ruin your presence brought,

Denizens of field and forest lend helping

hands Making way for new growth from the

rot.

Gardening perhaps was never so lonely at all

Scream
By: Jazz-Lynn Lewis

Abstract

A scream represents many human emotions. Learning and understanding the perspectives of clients will aid in the advocacy process in social work. Most people have a scream inside them, as though only they may know what has caused it. The ability to listen, empathize, and comprehend urgency is demonstrated through emotions. These emotions are inextricably linked to and practiced in the field of social work advocacy. A scream might express relief or a plea for help. The call-to-action will be influenced by the incidence of the scream. Injustices persist, and screams are becoming increasingly ignored in society. If the issues of social injustice remain, a lack of acknowledgment to protect a person's dignity and worth will endure. The scream for social justice that lives in every human being is depicted in this poetry. Without the help of social workers and other advocates, a person or a group of people who are marginalized may be seen as less than the general population. It is the ethical responsibility of social workers to organize and legitimize social justice movements.

SCREAM

AAAH! Have you ever felt like you had to scream?

I just had to for you to see what lies in between

My body, soul in mind cannot seem to configure what makeshifts the scenes,

Scenes that me and you have seen that remain unseen.

Scarred from not only the past and present but what the future may hold,

How can the land of the free be so controlled?

Cracks of whips turned into a sound of bullet shells,

The 13th was not enough, we will march past the yells.

Can you hear me yet?

When expressed, silence follows and instant regrets

This creation of a country is built upon our pain

Louder Than Words, Volume 2, Issue 1, 2022

But there is so much more that we can gain.

Raised to love your peers, but why am I afraid?

Seeing my people die just outweighed,

They lay within cells or six feet under,

Boom, boom, boom, there goes the thunder.

Emptied clip, I seen it through my screen,

“Sorry, this is not enough, it’s foreseen”,

How come it’s we cannot ever find?

Now this built anger that was never combined.

Able to construct the lies like they are rehearsed,

Oh, but if the roles were reversed,

You are tired of that saying?

Well BLM is the slogan I’m campaigning.

May I just say, “we will overcome”,

You may say that y’all said this long ago,

Yes, even before the year of ‘54,

But hear it my words “nah, we will not go”.

Join me and you will see,

Louder Than Words, Volume 2, Issue 1, 2022

How we came from Kings and Queens,

My people, stand up and take my hand,

Come before it's too late and we will AAAH! scream together.