

The Roosevelt Institute at Cornell University

ROOSEVELT REVIEW

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Aishani Shukla '23, Co-President

Aishani is a senior in the School of Industrial and Labor Relations. She joined Roosevelt as an analyst in Fall 2020 and served as the Center Director of the Environmental & Technology Center from 2021-2022. Outside of Roosevelt, she is involved with the Fair Labor Association's Student Committee and Cornell Rowing Club. Her policy interests lie at the intersection of energy, governance, and security.

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Riya is a junior studying Policy Analysis and Management in the Brooks School of Public Policy. She joined Roosevelt in her freshman spring as an analyst in the healthcare center and served as the Director of Internal Affairs from 2021-2022. Riya is also passionate about healthcare policy, and she is also the Co-President for Cayuga Healthcare Consulting. In her free time, she likes to listen to music, go biking, go to the gym, and play the piano or viola.

Franklin Zheng '25, Editor-in-Chief

Franklin is a sophomore majoring in Information Science and minoring in International Relation and German Studies in the College of Arts & Sciences at Cornell University. He joined the Roosevelt Institute in the fall of 2021 as an analyst for the Center for Environmental and Technology Policy and is now serving as Editor-in-Chief. Outside of Roosevelt, Franklin works as an archival specialist at the Roper Center for Public Opinion Research. Franklin is interested in privacy and data policy, security studies, and epistemology and interned as a Technology Policy Fellow at the Software and Information Industry Association this past summer.

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Andreas (he/him) is a junior studying Policy Analysis and Management in the Jeb E. Brooks School of Public Policy. He serves as the Policy Chair for Cornell Roosevelt Institute and has previously written for the Domestic Center and held the role of Advocacy Director. Andreas is passionate about antitrust and environmental regulation, and in his role in CRI he hopes to support analysts as they develop as researchers, writers, and compassionate, policy-driven leaders. Outside of CRI, Andreas is the Vice President of Cornell Phi Alpha Delta Pre-Law Fraternity and a legal volunteer for the Cornell University Parole Initiative.

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As a student at Cornell University in the Brooks School of Public Policy studying Healthcare Policy on a pre-medical track, Ben is drawn towards fields where he can use his leadership skills, interests in helping people, and community-based advocacy to make an impact on people's lives. His interests and experiences encompass a wide range of the healthcare field from administration and consulting to clinical and research work. Ben is drawn to experiences that challenge him to learn new things and connect him to people all over the world. As the Director of External Affairs for Roosevelt, Ben can enjoy all of these aspects of healthcare from policy writing, to organizing speaker series, to his involvement in the Ithaca Free Clinic.

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Emily is a junior in the College of Human Ecology majoring in Global and Public Health Sciences. She is interested in healthcare policy, science communication, and healthcare marketing. Outside of Roosevelt, Emily is also an active member of the Ithaca Health Initiative and is a research fellow at the Health Design Innovations Lab.

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SPRING 2023 CENTER DIRECTORS

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Grace is a sophomore majoring in Policy Analysis and Management in the Brooks School of Public Policy. She currently serves as the Economic Center Director. Grace joined Roosevelt in Fall 2021 and is interested in the economic analysis of social policies and public finance. Outside of Roosevelt, Grace is a brother in Phi Alpha Delta Pre-Law Fraternity and a consultant in Social Business Consulting. She also loves to dance, bake, and make Spotify playlists.

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Sahil Venkatesan '25, *Center Director for Education Policy*

Sahil is a sophomore majoring in Government while minoring in History and Law and Society in the College of Arts & Sciences. He is interested in immigration reform, including new congressional legislation and altering the citizenship test. Outside of Roosevelt, Sahil is a member of the Cornell Mock Trial Team and is involved in research about historical crises in U.S. democracy.

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Julia is a junior studying Policy Analysis and Management in the Brooks School of Public Policy and joined Roosevelt in Fall 2021. She currently works as a research assistant for Western Kentucky University as well as a research assistant for Professor Maria Fitzpatrick, working on a study of child health and well-being. This past summer, Julia was involved with the New Center as a policy and research intern.

Renle Chu '23, *Center Director for Environmental & Technology Policy*

Renle is a senior majoring in Policy Analysis & Management and minoring in Law & Society. She joined Roosevelt in the spring of 2021 as a healthcare analyst. Outside of Roosevelt, Renle is the TA for two undergraduate classes, serves on the Undergraduate Student Advisory Council, and is involved in a qualitative research lab. She is passionate about the policy implications of rising information technology, addressing climate change, and advocating for healthcare reform.

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Javi is a junior in the College of Arts & Sciences studying Information Science and Government. He joined the fall semester of his freshman year. Javi is interested in foreign policy and international political economy, especially in how nations' environmental and energy policies interact, coalesce, compete, and influence decision making. He is also interested in technology and how it can help improve individual lives and its societal effects. Outside of Roosevelt, Javi is a project manager at Cornell Venture Capital. This past summer, he interned at Google as a software engineering intern.

Shruti Nagpal '25, *Center Director for Healthcare Policy*

Shruti is a sophomore studying Global and Public Health Sciences with a minor in Business. She joined Roosevelt during the spring semester of her freshman year as an analyst for the Healthcare Policy Center, specifically interested in reproductive healthcare reform. Outside of Roosevelt, Shruti works as a Career Assistant for the College of Human Ecology Career Exploration Center and is a member of the Cornell Healthcare Review, Cornell Biomedical Device, and Cornell Big Red Raas.

Jack Viehweg '23, *Assistant Center Director for Healthcare Policy*

Jack is a fourth-year student in the Sloan 5-year BS/MHA program at Cornell and joined the Roosevelt Institute in Fall 2021. He enjoys writing about healthcare finance, equity for chronic conditions, and rural medicine. Outside of Roosevelt, Jack is the North Campus Student Assistant Director for Cornell Dining, an editor for the Cornell Healthcare Review, and a project manager for Cayuga Healthcare Consulting.

Journal compiled by Franklin Zheng

Editor's Note:

Dear Reader,

On behalf of the Roosevelt Institute at Cornell University, I am excited to publish the nineteenth issue of the *Roosevelt Review*.

This journal compiles the work of our policy analysts, who have undertaken a semester of extensive research and a rigorous writing process. The proposals, spanning a diverse array of topics, display research skills of the highest caliber and deep political insights. Our cohort's policy creativity and ambition to effect positive societal change continue to impress me. Having also served as Editor-in-Chief in the Fall 2022 semester, I have been delighted to observe the strong development of our returning analysts' research and policy-writing skills. It is exciting to see such great improvement from our analysts, who are evidently driven to address important sociopolitical problems in our nation.

Looking ahead, the Roosevelt Institute at Cornell University foresees substantial organizational change in the coming months. We expect, however, there to be an excellent opportunity for our institute to grow and evolve under the guidance of our newly elected leadership. We anticipate more collaborations with other student-led organizations, an expanded speaker series, a reinvigoration of our political advocacy work, and a new focus on professional development and networking in the wake of our transition. Our organization is well-poised for a strong, successful academic year and is ready to continue confronting difficult societal issues.

Thank you to all those who have supported the Roosevelt Institute at Cornell University and the publication of this journal. Serving as Editor-in-Chief of this organization for the 2022–2023 academic year has truly been an honor. I thank you for reading our policy proposals and hope you enjoy our journal.

Sincerely,

Franklin Zheng
Editor-in-Chief

DOMESTIC POLICY

Director: Jessica Chen

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To Combat the Workplace Mental Health Crisis, Mandate Mental Health Leave

By Fatima Al-Sammak, fma29@cornell.edu

The mental health crisis is still going strong in America, and its effects extend to the workplace. To ensure that employees can look after their mental health, congressionally mandated paid mental health leave is necessary.

Background

Over three years after the start of the COVID-19 pandemic, concerns about mental health continue to prevail, and American employees are at the forefront of the conversation. According to the most recent National Survey of Drug Use and Health, 22.8% of American adults have a DSM-V diagnosable mental illness. [1] A study published in the Journal of Occupational and Environmental Medicine found that feelings of anxiety and depression reduce employees' quality of work and performance. [2]

Furthermore, almost 60% of American employees experience moderate or worse levels of burnout in the workplace. [3] Untreated burnout can lead to excessive stress, fatigue, and irritability and increases risk for heart disease, high blood pressure, and type 2 diabetes. [4] Among the leading causes of workplace burnout are long working hours and a high stress environment, which prevent employees from having enough downtime to rest and recover from the demands of their job. [5]

To address similar mental health concerns among children, states have started to implement mental health days for students in school. [6] For example, Illinois passed a bill requiring all schools to allow students to take up to five mental health days a year. [7] The

state also requires school boards to accept poor mental health as a reason for employees to take a sick day. [8]

Policy Idea

The United States Congress should mandate all registered employers to offer their full-time employees a minimum of five mental health days per year, which can be taken up to three days at a time, allowing a break for employees who need it. These mental health days should be offered separately from regular sick days and must not be accompanied by a reduction in the employer's original sick leave policy.

Policy Analysis

The primary question that arises is whether extra time off will actually improve employee mental health. When workers do not get enough rest, their mental health is at greater risk. [9] The Office of the Surgeon General recommends that employers increase paid leave for employees and encourage them to take time off in order to support their mental health; offering mental health days would certainly be an important step towards these goals. [9] Additionally, research conducted by Aetna finds that employees are more likely to use their sick days when they need to look after their physical health than their mental health. [10] Having the

option for a mental health day should therefore make employees feel more comfortable taking time off when they are struggling with their mental health.

While the benefits of mental health days might be clear, employers cannot be trusted to offer them without a mandate. Stigma toward mental illness remains an unfortunate reality in the workplace, both on an individual, interpersonal level and on an institutional level. [11] Bias from employers against employees who experience mental illness may prevent employers from independently enacting policies like mental health days that would provide such employees with greater support. [11] To ensure that even in such environments employees will have the time off that they need, a Congressional mandate is necessary.

Talking Points

- Employees are more likely to use their sick days when they need to look after their physical health than their mental health. [10]
- The Office of the Surgeon General recommends that employers increase paid leave for employees and encourage them to take time off to support their mental health. [9]
- Employer stigma toward mental illness may prevent

them from independently enacting mental health day policies. [11]

- This proposed policy signals to employees that their mental health is as important as their physical health and improves their mental health.

Key Facts

- 22.8% of American adults have a DSM-V diagnosable mental illness. [1]
- Feelings of anxiety and depression reduce employees' quality of work and performance. [2]
- 60% of American employees experience moderate or worse levels of burnout in the workplace. [3]
- Untreated burnout can lead to excessive stress, fatigue, and irritability and increases risk for heart disease, high blood pressure, and type 2 diabetes. [4]
- To address similar mental health concerns among children, states have started to implement mental health days for students in school. [6]

Next Steps

To ensure that employers implement the proposed policy, Congress should pass a law mandating employers to include five days of mental health leave in their paid leave policy by 2024. This bill should be proposed first in the U.S. Senate, where it is more likely to pass due to a Democratic majority, before moving on to the greater challenge of passage in the House of Representatives. [12, 13] Senators should make every effort

to ensure the bill is referred to the Senate Committee on Health, Education, Labor, and Pensions (HELP Committee), where it is likely to find support from left-leaning senators interested in implementing policies to protect employees. [14]

Action Plan Snapshot

To help the bill gain traction, the HELP Committee should hold a public hearing with testimony from mental health professionals, who can speak to the need to combat the mental health crisis and explain how breaks help individuals who are struggling with their mental health. The public nature of the hearing will allow Americans across the country to tune in and learn about the circumstances that led to a need for this policy, making them more likely to support it.

While the bill may pass along party lines, the slim Democratic majority in the Senate combined with internal policy disagreements within the party could spell disaster. To ensure its passage, Democratic Senators who support this bill should reach across the aisle and work with Republican Senators who are in favor of increasing paid leave and those who support legislation intended to improve mental health in America. A co-sponsorship from a Republican Senator on this bill would go a long way toward its passage; Senator Bill Cassidy, for example, has previously expressed support for expanding access to paid leave in the US and may be more receptive to this legislation. [15] Furthermore, with the House of Representatives in Republican control, bipartisan support in the Senate would make the passage of a

House version of this bill easier. [16]

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Reclaiming Our Elections: The Case for Public Campaign Funding

By Fatima Al-Sammak, fma29@cornell.edu

Since 2012, special interests have increased their spending on political campaigns to influence candidates, and small donors have fallen by the wayside. Implementing publicly funded small donation matching will help restore the importance of regular voters to candidates.

Background

Following the Supreme Court's ruling in *Citizens United v. FEC (2010)* that "independent" campaign spending cannot constitutionally be limited, national campaign spending has increased exponentially, with a vast majority of that spending coming from a small number of donors. [1, 2] Since 2012, total congressional election spending has increased by over 200%, and presidential election spending has increased by 173%, with the top 1% of donors giving 94.1% of all campaign money. [2, 3]

Elected officials spend a large portion of their time soliciting donations instead of legislating. According to a 2016 interview with former chair of the Democratic Congressional Campaign Committee Steve Israel, representatives are expected to spend around 30 hours per week calling donors—twice as much as they are expected to spend on the Congress floor, and two to four times as much as they are expected to spend on constituent outreach. [4]

One strategy some candidates have used to move away from the corporate sellout perception is swearing off corporate PAC money; however, this strategy is only effective for candidates who have developed the name

recognition to survive purely on small donations. [5] Another suggested policy would provide interested small donors with a \$25 voucher to donate to the House campaign of their choosing, but these vouchers are too small to force candidates to listen to regular voters. [6]

Policy Idea

Starting in 2028, the Federal Election Commission should match federal election campaign donations of up to \$200 by 600% using public campaign funds, multiplying the effects of the donations of average citizens sevenfold and forcing candidates to listen to them. [6] These funds should be raised through a 4.75% increase on all federal non-tax penalties and settlements imposed on corporate officer defendants and on all federal tax penalties imposed on individuals in the highest tax bracket. [6] The collecting agency should deposit this additional money into the public campaign fund.

Policy Analysis

Similar policies have been implemented at the city and state level across the country. An examination of New York City's six-to-one donation matching program provides interesting insight into the potential impact this policy

would have. For example, in the 2009 city council race, the median number of small donors in citywide races was more than double for candidates who participated in the donation matching program compared to nonparticipants. [7] Furthermore, typical participating candidates received only 10% of their donations from special interests, while nonparticipating candidates received 25%. [7] The New York City example clearly shows that multiple donation matching does increase small donor participation and reduces candidate reliance on special interests, so regular voters can have greater say over the candidate's actions.

The next question would be whether the public campaign fund will raise enough money to match small donations as promised. A Congressional Budget Office (CBO) report estimates that if created, congressional and presidential candidates together would request around \$2.6 billion total from the fund over ten years. [8] That same report also estimates that the additional penalty implemented under this policy would net \$3.2 billion over those ten years, so the fund should collect more than enough money to provide to participating candidates as promised. [8] One concern would be "joke" candidates applying to receive money from this fund, but

this can be alleviated by requiring that candidates surpass a minimum threshold of outside money in order to participate. [9]

Talking Points

- In New York City’s implementation of a similar policy, candidates who used public funds had more than double the number of small donors compared to candidates who did not. [7]
- Candidates participating in small donation matching received only 10% of their campaign donations from special interests. [7]
- The 4.75% increase in the penalties discussed in this policy would net \$3.2 billion over ten years. [8]
- Candidates are expected to spend \$2.6 billion total in public funds over those ten years. [8]

Key Facts

- Since 2012, total Congressional election spending has increased by over 200%. [2]
- In the same period, presidential election spending has increased by 173%. [2]
- The top 1% of donors give 94.1% of all campaign money. [3]
- Politicians are expected to spend around 30 hours a week soliciting donations, almost as much as a full time job. [4]
- Swearing off corporate PAC money only works for candidates that have become household names. [5]
- Providing campaign donation vouchers to voters

would increase the number of small donations but not their impact.

Next Steps

Congress should pass a law adding clauses to the U.S. Code to implement the appropriate 4.75% penalty increases and use the raised funds to establish a public campaign fund for federal elections. A version of this policy has previously been included in the For the People Act of 2021; while the bill passed in the House of Representatives, it included other election reforms that prevented its passage in the Senate. [6, 10] To make it more likely for this policy to pass, it should be reintroduced in the House as a standalone bill, separate from any other polarizing election reforms. The best-suited House committee for this bill would be the Committee on House Administration, specifically the Subcommittee on Elections. [11]

Action Plan Snapshot

One way to help pass this bill would be to engage interest groups who agree with the policy. Organizations such as Free Speech for People and Democracy 21 would be very likely to support this legislation because they are dedicated to electoral reform and oppose the involvement of “big money” and corporations in campaigns. [12, 13] They should implement campaigns at the grassroots level to help garner support for the bill from voters across the country and increase pressure on Congress to pass it.

Another approach to help the bill along would be to ensure that it has bipartisan support. While Democrats in the House of Representatives have previously

expressed support for the For the People Act and especially the public campaign financing provision, not many Republicans have done the same. [14] However, a number of House Republicans such as Jim Jordan and Jake Ellzey receive a significant portion of their campaign financing from small donors and would benefit from a 6-to-1 small donation matching scheme. [15] By working with such Republicans, Democrats may be able to pass this bill with bipartisan support and give it strong momentum going into the Senate vote.

One major obstacle this policy may face is opposition from individuals more likely to be subjected to the penalty increase. One way to reassure these individuals is, of course, to encourage them not to commit the violations associated with the increased penalty to avoid incurring it. More realistically, information should be publicly distributed explaining that the increase in penalty would be negligible: the average individual tax penalty collected by the IRS in Fiscal Year 2022 amounted to \$1500, suggesting that the average increase in penalty under this policy would be \$712.50. [16] When considering that these penalties would only be implemented for individuals in the highest tax bracket, it is clear that this is a relatively small amount compared to their total income. [17] Sharing this information publicly will reduce public opposition to this policy.

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Repealing the One-Year Asylum Filing Deadline to Protect Vulnerable Migrants

By Meghan Brady-Fuchsman, mgb235@cornell.edu

The US is in violation of its commitment to non-refoulement and protecting vulnerable migrants with its one-year filing deadline (OYFD) for asylum claims. Congress should pass a law repealing the OYFD to offer greater protection to the most vulnerable migrants.

Background

In 1996, Congress passed the Illegal Immigration Reform and Immigration Responsibility Act (IIRIRA); among its many reforms which overhauled the American immigration system, it established the OYFD to apply for asylum. [1] The OYFD includes limited exceptions for “changed” or “extraordinary” circumstances that would justify a delay, but they are rarely utilized by immigration judges (IJ). [1] In the first 12 years after the IIRIRA’s passage, the Department of Homeland Security reported 17.8% of asylum applications were rejected only because applicants had missed the OYFD. [2] Another study found that half of the cases then referred to the Board of Immigration Appeals (BIA) were denied only because of a failure to meet the OYFD. [3]

The exceptions carved out in the IIRIRA are insufficient to address the legitimate reasons the OYFD is frequently missed. A 2000 Immigration and Naturalization Service (INS) rule outlined a non-exhaustive list of reasons to grant exceptions, but in a study of hundreds of cases, the BIA only ever granted exceptions for cases that matched an enumerated example, demonstrating that they do not treat the list as non-exhaustive. [3] Additionally, expert testimony

on the impact of psychological disorders is frequently disregarded by IJs, and there are substantial differences in OYFD-based rejection rates between asylum officers. [1, 2] A complete lack of transparency in asylum adjudications makes it difficult to evaluate the consistency with which the law is applied. [3]

Policy Idea

Congress should pass a law to repeal the OYFD. This law should apply retroactively, allowing individuals whose applications were denied because of the OYFD to re-apply for asylum. Repealing the OYFD would cut unnecessary red tape in the immigration system and open the door for tens of thousands of refugees to seek asylum. [2] It would ensure that the US fulfills its promise to offer safety to vulnerable migrants and reverse the current tide of decreasing humanitarian migration to the US. [4]

Policy Analysis

According to the UN High Commissioner for Refugees (UNHCR), denial of asylum based purely on a technicality, such as missing a deadline, is a violation of international human rights law. [5] The US has ratified the 1967 Protocol Relating to the Status of Refugees and passed the accompanying 1980 Refugee Act,

both of which commit the US to the principle of *non-refoulement*; in denying asylum applications based on missing the OYFD, the US is failing to honor this promise. [2, 3]

The OYFD is disproportionately harmful to the most vulnerable groups of refugees. Among the reasons most frequently cited for missing the OYFD are financial instability, identity, inability to speak English, a lack of familiarity with the immigration system, mental health, origin, and trauma. [1, 2, 5] Women are 13% more likely to file late because women asylum-seekers are typically victims of sexual violence and psychologically unable to present their claim. [2] LGBT asylum-seekers are more likely to file late because they fear stigmatization. [6] Migrants who belong to ethnic groups with less established and organized communities in the US are more likely to file late because there is less information sharing. [2]

There is absolutely no evidence that the OYFD prevents fraud. A 2010 study found that asylum grant rates for individuals who applied before the deadline and for those who overcame a late application were the same, refuting the claim that migrants who miss the OYFD have weaker asylum claims. [1]

Talking Points

- UNHCR has issued advice stating that the OYFD violates *non-refoulement* and international human rights law. [5]
- The OYFD is disproportionately disadvantageous to especially vulnerable refugees and asylum-seekers, such as those who struggle with mental health, trauma, and the English-language barrier. [1, 2, 5]
- Women and LGBT asylum-seekers are much more likely to miss the OYFD because they struggle with trauma and stigmatization. [2, 6]
- The OYFD does not reduce fraud in the immigration system as lawmakers initially argued. [1]

Key Facts

- From 1996 to 2008, 17.8% of asylum applications were rejected only because the applicant missed the OYFD. [2]
- Half of asylum appeals are denied only based on the OYFD. [3]
- The BIA does not consider exceptions to the OYFD besides the few that are explicitly mentioned by an INS rule. [3]
- There is no consistency in the application of the OYFD to reject asylum applications between different asylum offices and officers, leading to unjust disparate outcomes. [1, 2]

Next Steps

The United States Congress should repeal the OYFD immediately because it is unnecessary red tape in the asylum system and denies protection to tens of thousands of vulnerable migrants. This repeal could be achieved by Congress' passing of a bill that would repeal the portions of the Immigration and Nationality Act (INA) that provides for the OYFD and its exceptions. This bill should be introduced in the House or Senate Judiciary Committee, which have jurisdiction over non-border immigration policy. [7, 8] It would need to pass in the US House of Representatives and Senate and be signed by the current president.

Action Plan Snapshot

In order to encourage the passage of the OYFD repeal, constituents should contact their Representatives and Senators to urge them to support the bill. Particular attention should be paid to members of Congress on the relevant committees and subcommittees, especially those who hold a chair position: Senator Dick Durbin (Senate Committee on the Judiciary Chair), Rep. Jim Jordan (House Judiciary Committee Chair), Senator Alex Padilla (Subcommittee on Immigration, Citizenship, and Border Safety Chair), and Rep. Tom McClintock (Subcommittee on Immigration Integrity, Security, and Enforcement Chair). [9, 10, 11, 12] Additionally, there have been several efforts to repeal the OYFD over the last decade whose sponsors should also be targeted: Rep. Linda Sánchez (2021 US Citizenship Act Sponsor), Rep. Zoe Lofgren (2019 Refugee Protection Act Sponsor),

Senator Patrick Leahy (2016 Refugee Protection Act Sponsor), and the remaining members of the “Gang of Eight” (senators who worked on the 2013 bipartisan immigration reform bill). [13, 14, 15, 16] The OYFD was not successfully repealed because it was rolled into bills that contained many reforms to the INA; by combining it with less popular reforms, the chance of it passing was much lower.

National organizations that support and advocate for migrant and refugee rights should also launch a coordinated campaign to lobby for the passage of this bill. United We Dream, National Network for Immigrant and Refugee Rights, Immigration Equality, the American Civil Liberties Union, the National Immigrant Justice Center, and Human Rights First are prominent organizations that have historically fought for the rights of marginalized immigrants and the repeal of the OYFD. [3, 17, 18, 19, 20]

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Greening Washington D.C.'s Blighted and Vacant Lots to Reduce Crime

By Jessica Chen, jyc58@cornell.edu

By planting greenery and plants in vacant lots, DC can reduce violent crime in the District's most dangerous neighborhoods and improve social and environmental outcomes without gentrifying the area.

Background

Reducing urban crime is a priority of city legislatures across the nation. In Washington D.C., the most blighted and vacant land is located in the city's poorest and predominantly black neighborhoods—Wards 7 and 8. [1, 2] Violent crime in Washington D.C. has been highest in those two wards for the past eight years of available data. [3] While efforts to combat urban crime through ending “stop and frisk” practices, redistributing police funding, and reforming gun ownership laws have their pros and cons, their politicization in the news has stuttered their implementation. [4, 5, 6] In turn, not much attention has been placed on planting greenery in blighted and vacant land as a method of reducing crime despite the numerous studies and experiments verifying its benefits.

Studies show that increasing green spaces in residential areas—that is, increasing the amount of plant coverage of an area—decreases violent crime and sometimes property crime, lowers levels of fear, and reduces aggressive and violent behaviors. [7, 8] Multiple studies confirm that crime is not always being displaced, rather, there are reductions of crime in neighboring areas resulting from stronger spillover greening benefits. [9, 10] Greening spaces can reduce crime and confer emotional and

environmental benefits to the residents of the treated residential areas.

Policy Idea

The Council of the District of Columbia ought to create a program that identifies vacant lots in residential portions of Wards 7 and 8 and renovate the land by clearing away trash and debris, planting greenery (trees, bushes, grass seeding, and other plants), and maintaining the land by involving community leaders and the local workforce. Greening spaces directly reduces crime by removing discreet places for drug sales and the subsequent gun violence from territory disputes over vacant lots without necessarily displacing crime. [10, 11]

Policy Analysis

While additional resources would be better able to track its efficacy, tracking the success of this program wouldn't necessitate any additional systems. The DC Metropolitan Police Department reports crime daily through an online portal that has specificity to Census Tracts that should adequately assess areas around the treatment neighborhoods. [3] The program should expect decreases in violent crime. Decreases in property crimes would be welcome, but not necessarily expected given the

varying results of previous studies. [8]

A cost-benefit analysis of greening vacant lots in Philadelphia, Pennsylvania found a return on investment for prevention of gun violence of \$26 to \$333 per dollar spent, which makes for a remarkably efficient program and use of taxpayer money. [12] Implementing this program in Wards 7 and 8 would address gun violence in the part of the city where the problem is most severe. [3] This return on investment metric also doesn't factor in the value of increased feelings of security, environmental benefits such as heat-attenuation and pollution reduction, and property value increase. [13]

This program should be well received by local DC residents in part due to the required maintenance that would hire local contractors, landscapers, and community groups to continue work on the lots, which in turn stimulates their economy in the long run. [8] Greening vacant and blighted spaces is also resistant to gentrification. While building parks leads to increased real estate prices that contribute to gentrification of an area and may even contribute to crime, targeting vacant lots avoids both complications. [13, 14]

Talking Points

- Researchers and the public could easily track changes in crime due to the pre-existing DC Metropolitan Police Department crime report publishing infrastructure. [3]
- Previous initiatives had a return on investment in gun violence prevention of \$26 to \$333 per dollar spent on greening. [12]
- This investment is an underestimate and doesn't include the other social and environmental benefits incurred.
- A greening initiative would support local residents by providing a safe social space, creating jobs, and even being resistant to gentrification. [8, 13]

Key Facts

- Both violent crime and blighted/vacant land in Washington D.C. are concentrated in Wards 7 and 8. [4, 5, 6]
- Crime initiatives like “stop and frisk” practices and redistributing police funding are highly politicized and thus face roadblocks in legislation.
- Greening initiatives that increase plant coverage decrease violent crime, property crime, lower fear, and reduce aggressive and violent behavior [7, 8]
- Not only is crime not displaced into nearby regions by greening programs, crime is reduced in neighboring areas [9, 10]
- Greening spaces provides emotional and

environmental benefits to nearby residents.

Next Steps

Despite the body of work that has supported greening as a crime prevention measure, I would not recommend this policy. Very few randomized control trials, the standard for determining causal relationships, have been conducted on city greening projects and there exist more researched programs that result in reductions in crime [15]. Of the two randomized control trials done, they produced mixed results on the actual effects of crime [11, 16]. Furthermore, a concurrent study to the Philadelphia intervention suggested that while men's perceptions of safety increased, women reported feeling more fear. [17] Additional research ought to be performed in a smaller setting before a full-scale greening initiative is implemented.

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Increasing Voter Turnout in the United States through an Election Day Holiday

By Elizabeth Fine, egf25@cornell.edu

The United States' low voter turnout rates reinforce the country's current racial and economic inequalities. To encourage election participation, policymakers should implement an Election Day holiday to expand polling site accessibility for eligible voters.

Background

Democracy offers a unique opportunity for ordinary individuals to express their opinions on the political stage. In recent elections, low voter turnout rates have plagued the United States' representative democracy. Even in presidential elections, a 58% turnout of the national voting-age population in 2008 fell to 56% in 2016. [1] In the 2016 election, 14.3% of eligible voters who did not vote said they were "too busy" to get to the polls. [2] For many eligible voters, it does not appear worth the wait in lines, which sometimes spans hours. [3] For every quarter mile further a polling site is from a voter's home, that voter is 2-5% less likely to vote. [4] Time dedicated to traveling to and waiting at the polls is less easily spared by low-income individuals who may not view their vote worth sacrificing the money they could be making instead, perpetuating unequal representation in election outcomes. [4] Voters from families with incomes exceeding 100,00 dollars a year exhibit a 36.1% turnout rate compared to only 3.6% for eligible voters from families making 20,000 dollars or less. [5] Since public policy has developed the

problem, further combined local and national level policy solutions would be most beneficial in drawing more civic participation.

Policy Idea

United States elected officials should work to promote Election Day to a federal holiday to maximize voter turnout. As former Congressman John Lewis said of nationally recognizing Martin Luther King Jr. Day, the aim is to designate, "a day on, not a day off." [6] The influx of individuals off from work could provide more availability to staff the polls, accommodate more voters by operating more polling sites, minimize wait times, and facilitate voter registration.

Policy Analysis

Upon implementing a new federal holiday, both more accessibility to the polls and greater awareness of civic participation will challenge the current disparities. Australia, with a voter turnout rate of over 90%, has demonstrated tremendous success in making Election Day a national holiday in combination with various other efforts. [7] Puerto Rico, a U.S. territory, declares Election Day to be a national holiday for public employees, along with additional policies, and boasts a voter turnout

rate over 80%. [8] Moreover, Puerto Ricans are typically less likely to vote when moving to the mainland U.S.; following Hurricane Maria in 2018, the large influx of potential Puerto Rican voters in Florida did not translate to shifts in the state's voting behaviors. [8] Other states offer Election Day policies of their own. In 2022, Minnesota led the country in voter turnout rate with over 60% of eligible voters casting their ballots and mandated paid time off for voting without a specified time limit. [1, 9] Some states offer unpaid time off, such as Wisconsin, Georgia, and Massachusetts, and all remain above 40% voter turnout rates. [1, 9] States with less than 40% voter turnout such as Louisiana, Mississippi, and Indiana often do not mandate any time off. [1, 9]

Talking Points

- Australia, with a voter turnout rate of over 90%, has demonstrated tremendous success in making Election Day a national holiday in combination with various other efforts. [7]
- Puerto Rico, a U.S. territory, declares Election Day to be a national holiday for public employees and boasts a voter turnout rate over 80%. [8]

- Some states offer unpaid time off, such as Wisconsin, Georgia, and Massachusetts, but all remain above 40% voter turnout rates. [1, 9]
- States with less than 40% voter turnout, such as Louisiana, Mississippi, and Indiana often do not mandate any time off. [1, 9]

Key Facts

- Even in presidential elections, a 58% turnout of the national voting-age population in 2008 fell to 56% in 2016. [1]
- In the 2016 election, 14.3% of eligible voters who did not vote said they were “too busy” to get to the polls. [2]
- For every quarter mile farther a polling site is from a voter’s home, that voter is 2-5% less likely to vote. [4]
- Voters from families with incomes exceeding 100,00 dollars a year exhibit a 36.1% turnout rate compared to only 3.6% for eligible voters from families making 20,000 dollars or less. [5]

Next Steps

Recognizing Election Day as a federal holiday would tremendously expand accessibility to the polls, promoting a greater voter turnout rate and upholding the United States’ dedication to democracy. The goal for such policy implementation would be in time for the next presidential election, but many federal holidays take decades to be observed nationally. [6] Given the extended

timeline in creating a new federal holiday, sustained support is key to keeping the policy on the national agenda. Persistent advocacy groups such as the ACLU and League of Women Voters have been fighting for voter policy improvements for decades and would be particularly powerful stakeholders. [10, 11] A highly beneficial supporter of the policy would be the President, who can issue one-time federal holidays through executive orders, meaning Election Day could be made a holiday one year at a time until Congress passes a more permanent bill. [12]

Action Plan Snapshot

Along with enforcing any federal holiday, there are several challenges to overcome. National recognition does not always guarantee uniform state level implementation. Adding Election Day to the calendar requires congressional approval and gives all non-essential federal employees a day off from work. To apply holiday benefits to state employees would require additional, state-level action. [13] Appealing directly to state legislatures through lobbying and advocacy to enact a state-level holiday may therefore be necessary to create more rapid change. Such efforts may be promoted by the constituents themselves, as about 65% of the American public is at least somewhat in favor of making Election Day a holiday. [14] Employers may challenge work schedule changes, which could potentially be resolved by combining Veterans Day, currently on November 11, with a new Election Day holiday. The date would retain recognition of the sacrifices American armed forces notably made in World War I while

simultaneously promoting the democracy for which the soldiers fought. [7] Voting stands at the heart of democracy and must be protected through the substantial accessibility offered by making Election Day a federal holiday.

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ECONOMIC POLICY

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Race to rEVolution: Public-Private Competition for America's Public Vehicle Charging Network

By Suraj Parikh, sdp93@cornell.edu

To support and encourage a national transition to electric vehicles (EVs) the federal government should begin construction on a nationwide EV fast-charging network and incentivize private companies to do the same.

Background

Gasoline motor vehicles dump over 1.4 billion metric tons of CO₂ into the air yearly, accounting for nearly a third of America's carbon emissions. [1] Electric vehicles, which have zero tailpipe emissions and are becoming increasingly climate-friendly as the nation shifts away from fossil fuel electricity production, face a major barrier: charging.

Lack of charging in the US is the biggest roadblock to mass EV adoption: 61% of Americans say it discourages them from purchasing an EV. [2] To solve this issue, a national fast-charging network needs to be constructed that makes charging an electric car no more difficult than filling up at a gas station.

Some states have passed laws ending the sale of all gas cars by 2035; under this aggressive timeline, the US would reach near-total EV adoption by 2050. [3] Achieving this goal will require an estimated 16 million public chargers to support a near-100% EV America. [4] Even if the 2050 timeline of 100% EV adoption is not met, installing the charging infrastructure will prepare America for full adoption and speed up the transition by incentivizing EV purchases with a convenient, widespread charging network.

The Biden administration's Bipartisan Infrastructure Law provides \$7.5 billion to construct 500,000 DC fast chargers – a number far less than the required 16 million by 2050. [5, 6] The federal government must substantially increase this investment to facilitate a national transition to EVs.

Policy Idea

The federal government should allocate the Department of Transportation (DOT) \$240 billion to increase the total number of public EV chargers in America to 16 million by 2050. These chargers would: be Level 3 or higher, as technology progresses; use the Combined Charging System standard; follow Rule 88 FR 12724 and Title IX of Public Law No: 117-58; and be priced at cost through 2035. [7, 8] Private entities constructing a public charger meeting those standards (except pricing), which would count towards the 2050 target, would be reimbursed for construction costs.

Policy Analysis

A national EV charging network is instrumental for a national transition to electric vehicles. Other countries that have implemented government incentives for electric vehicles have seen success. For instance, Norway, with the highest rate of EVs per capita

and chargers per EV in the world, has largely built out its charging network through government spending. [9] The expansion was particularly successful in rural Norway, as the installation of the first public charger doubled the EV adoption rate over five years. [10]

In America, where current chargers are overwhelmingly concentrated on the coasts and in high-density regions, growing rural charging networks will be critical to national EV adoption. [11] The outlined public-private partnership can effectively build a fast-charging network – private entities will readily build chargers in profitable areas when upfront costs are fully subsidized, while the government fills the gaps in underserved regions.

Additionally, a national EV charger construction program would create millions of well-paying union jobs. The Biden administration's planned 500,000 chargers will generate 28,950 job-years through 2030. Assuming the job estimates are directly scaled, this proposed policy will generate 926,400 job-years. [6] Those jobs, as per Rule 88 FR 12724, would primarily be unionized: workers would get 11.2% more pay than they would otherwise. [7, 12] And, America would be the primary economic beneficiary; applying Title IX of Public Law No: 117-58, known as the Build America, Buy America

Act, would ensure that at least 55% of the chargers themselves, along with all iron, steel, and construction materials, are domestically sourced. [8]

Talking Points

- A public-private partnership on charger construction can ensure that a national EV charging network reaches rural communities – not just the coasts, where chargers are currently concentrated. [11]
- Norway, which has the world’s most successful EV adoption, had government involvement in the construction of its charging network and saw rural areas’ EV adoption rates double after the first charger’s installation. [9, 10]
- This policy will make chargers in America, install them with union labor, and create nearly a million job-years, helping workers, companies, consumers, and communities in the process. [6, 7, 8]

Key Facts

- Auto electrification is critical to fight climate change, as gas cars create almost a third of America’s carbon pollution and emit more than 1.4 billion metric tons of CO₂ annually. [1]
- Range anxiety plagues Americans: 61% of people say that lack of charging availability is preventing them from buying an EV, making it the largest roadblock to widespread adoption. [2]

- The Biden administration’s current plan to build 500,000 chargers by 2050 is a far cry from the 16 million chargers that are needed by then for near-total EV adoption. [4, 6]

Next Steps

The DOT should immediately begin construction on a national charging network with three immediate action items for successful policy implementation. First, the DOT should reach out to charger manufacturers that currently produce chargers in the US (or plan to do so in the near future) and create long-term contracts to purchase large amounts of EV fast chargers. Second, they should reach out to the International Brotherhood of Electrical Workers (IBEW), which helps manage the Electric Vehicle Infrastructure Training Program, and coordinate the certification of new EV installation workers. Third, the DOT should announce the private sector incentive and analyze where EV charger gaps remain, so installation can begin with those areas receiving priority. Other policies related to EV purchases, home charging, battery efficiency, and a shift away from fossil fuels are necessary in the future for a successful EV transition, and a national charging network is a critical first step.

Action Plan Snapshot

The variety of benefits offered by the construction of a national EV charging network has the potential to unite a diverse and bipartisan set of actors. Environmental groups and activists would favor the proposal due to its climate benefits. EV manufacturers would be in support since the policy

would speed up EV adoption. Unions, especially the IBEW, would favor the program due to the direct measures encouraging union labor and the reinforcement of pro-union federal policy. Industry associations, such as the National Association of Convenience Stores (NACS) which represents gas station owners, would be supportive of the plan since it enables their members to build chargers at low cost and survive through a transition away from internal combustion cars.

These interest groups have various levels of political influence over both parties in Washington. Unions and environmental groups both have historically held more sway with Democrats; they should use their influence to lobby Senate Democrats and the Biden administration to support this policy. The Biden administration may also be enticed with the political benefits that a large infrastructure project with visible benefits to average consumers would bring. The automotive sector as a whole contributes heavily to the Republican Party, which gets 79% of the sector’s donations. [13] The NACS contributes a similarly high 76% of their donations to the GOP. [14] Both industry associations could engage in similar lobbying efforts with House and Senate Republicans. Red state representatives also have their own political benefits; since Republican-skewing rural areas currently have the least EV chargers, they stand to receive large investments for charger construction. [14] These interest groups can also target key members of Congress with their lobbying efforts. These players include Senate Majority Leader Chuck Schumer, House Speaker

Kevin McCarthy, and Senate Commerce, Science, and Transportation Committee Chair Maria Cantwell, among others.

A national EV charging network program would have broad bipartisan and ideological support, making its passage politically feasible. A coalition of the listed interest groups, along with any other relevant actors, should lead a lobbying campaign that could lead to successful implementation of this policy.

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Protecting New York Immigrants via the Access to Representation Act

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To protect immigrants and help prevent further labor force deterioration, the New York state government should guarantee low-income New York immigrants access to legal counsel for immigration proceedings by passing and implementing the Access to Representation Act.

Background

The Sixth Amendment grants all persons the right to legal counsel for federal criminal proceedings, and *Gideon v. Wainwright* (1963) affirmed this right to all defendants regardless of their ability to pay for representation. [1] However, since immigration court hearings are considered to be civil procedures, those facing removal proceedings can only attain legal counsel at their own expense. [2, 3] This situation causes 63% of noncitizens under threat of deportation across the US to navigate the legal process unrepresented. [4] Without counsel, detained immigrants win 3% of their cases, and non-detained asylum-seeking immigrants win 13%, which is much lower than represented detained and non-detained immigrants' win rates of 18% and 74% respectively. [4]

Nearly 4.4 million immigrants reside in New York, comprising over 22% of the state's population and 27% of its labor force. [5] Undocumented immigrants make up 15% of this group, and nearly 476,000 US citizens are family with at least one undocumented member. [5] As both documented and undocumented noncitizens can be subject to removal, the lack of legal counsel increases family separations and induces economic damages to

industries with high immigrant participation.

Currently, the state supports legal representation initiatives by funding the New York Immigrant Family Unity Project (NYIFUP), a growing effort to ensure state-funded attorneys for detained immigrants. [6] Recently, it has also provided \$3 million in grants to nonprofits that provide immigrants free legal services. [7]

Policy Idea

Both chambers of the New York State Legislature should pass the Access to Representation Act for a prompt signature by Governor Hochul. Effective immediately after enactment, the bill will appropriate funding for low-income immigrants' legal representation, carry out related administrative processes to utilize and monitor the funds, and encourage local government and nonprofit legal service funding efforts to continue. [8] \$300 million is expected to be spent for full implementation. [8]

Policy Analysis

As of March 2023, 62% of New York defendants could expect to be represented across nearly 204,000 pending removal cases. [9] As over 32% of New York immigrants have household incomes lower than the policy's criterion of 200% the federal

poverty level, and low-income immigrants may be overrepresented in immigrant court cases, most immigrants currently without counsel will likely benefit from the policy. [8, 10]

The Access to Representation Act will enable more migrants to remain in the US and limit family separations. The analogous NYIFUP pilot in New York City, for instance, increased detained immigrants' odds of winning their case from 4% to 48%. [8] Aside from benefitting immigrant households, the policy also lowers employers' costs. The Center for Popular Democracy found that a \$7.4 million investment into NYIFUP would generate \$4 million in savings for employers by reducing turnover costs. [6] Furthermore, decreasing legal risks helps attract and retain international workers at a time when their exodus from New York to other states accelerates. [11]

As \$7.4 million in annual NYIFUP spending would recapture \$1.9 million in tax revenue and reduced costs for the state, the prospect of recovering all spending in the short term is unpromising. [6] Nevertheless, the private-sector gains from improved socioeconomic outcomes for families with immigrants and savings for employers' outweigh this deficit. Moreover, since both

documented and undocumented immigrants are net contributors to the federal government and the policy does not require new federal spending, the proposed policy would result in federal fiscal gains. [12]

Talking Points

- Low-income immigrants facing immigration court cases are not afforded legal counsel despite the drastic consequences of deportation, causing 63% of noncitizens under threat of removal to be unrepresented. [2, 3 4] Passing and implementing the Access to Representation Act will guarantee their access to counsel in New York. [8]
- The New York Immigrant Family Unity Project pilot increased the chance of winning for detained immigrants from 4% to 48%. [8]
- Public-funded representation will reduce immigrants' financial burdens, prevent family separations, generate savings for employers, and increase labor supply. [6]

Key Facts

- Nearly 4.4 million immigrants live in New York, comprising over 22% of the state's population and 27% of its labor force. [5]
- Close to 476,000 US citizens, including 267,000 children, live with at least one undocumented family member. [5]
- As of March 2023, only 62% of New York immigration court

defendants can expect to be represented in court. [9]

- Without counsel, detained immigrants win 3% of their cases and non-detained asylum-seeking immigrants win 13% compared to represented detained immigrants' 18% and non-detained immigrants' 74%. [4]

Next Steps

To become law, the bill must pass both chambers of the state legislature and receive the Governor's signature. However, it has never been brought to a floor vote and is currently tied up in the Assembly's Codes committee and the Senate's Finance committee. [8, 13] Nevertheless, the fact that 93% of likely voters in New York support state-funded attorneys for indigent immigration court defendants bodes well for the policy's legislative future. [14]

Once enacted, the Director of the New York State Office for New Americans will be responsible for the law's implementation. [8] Substantial amounts of funding should be appropriated and spent swiftly, given the Department of Homeland Security's quickening pace of immigration court filings. [15] As 67% of US likely voters support publicly-funded attorneys for those facing deportations, successful implementation of the act in New York may help spur similar efforts in other states. [16]

Action Plan Snapshot

On top of being favored by the overwhelming majority of New Yorkers, the Access to Representation Act also enjoys the support of a broad coalition of pro-immigrant interest groups. In

November 2022, an alliance of over 100 elected officials and organizations including the New York Immigration Coalition, Immigrant ARC, and the Vera Institute was formed to expedite its passage. [17] Since then, the coalition has made repeated efforts to promote the legislation to the public and acquired more backers, among whom are four prominent private and public-sector unions. [18] Moreover, the New York Democratic Party, of which all sponsors and cosponsors of the bill are members, currently possesses supermajorities in both chambers. [8, 13] This majority is sufficient to pass the bill and override a veto from Governor Hochul, which is unlikely altogether given her stated support for providing immigrants with legal services. [7]

While recent developments appear promising, the bill has languished in both chambers' relevant committees for years. [13] This indicates a potential lack of priority for the legislation in the Assembly's Codes and Senate's Finance committees. [8, 13] A potential reason is New York immigrants' comparatively good legal coverage – their odds of being represented in immigration court ranks third in the nation as of March 2023. [19] Although it is doubtful that this achievement would be possible without state and local funding for programs such as NYIFUP, the overlap between the bill and existing efforts may make legislators view it as an excessive expansion to already-generous provisions instead of a much-needed guarantee for all New York immigrants.

To further the passage of the bill, the coalition should continue public outreach efforts and stress

that current commitments do not fulfill immigrants' needs, especially for upstate immigrants who do not benefit from New York City's local legal help initiatives and large network of nonprofits. While the coalition argues from humanitarian and labor angles, immigrant-owned businesses, which comprise a third of all New York businesses, should also be courted for support. [5] This enlarged coalition will increase pressure on Governor Hochul's administration to consider the bill and include its provisions in the annual state budget proposal. The bill's presence in the budget will serve as a signal of the Governor's support, which can generate the impetus needed for it to overcome its tabling in the committees and head for floor votes in the legislature.

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Implementing Standardized Food Date Labels to Reduce Food Waste

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Household food waste has resulted in billions in economic losses. Implementing standardized food labels that provide consistent information about the quality and safety of food products would reduce consumer confusion and decrease food waste.

Background

In the United States, the amount of uneaten household food waste is between 30% and 40% of the total food supply, amounting to over 130 million metric tons of food waste per year. [1, 2] Although food waste is generated at different points, such as during production, processing, transport, retailing, and consumption, 60% of it is generated by consumers. [1, 3] One key issue is that more than 90% of Americans prematurely throw away food because they misinterpret the meaning of date labels as indicators of food safety. [4] In 2003, wasted food accounted for more than 25% of total freshwater use and 4% of total petroleum consumption. [1]. Economically, this wasted food imposes a large cost on both retailers and consumers, totaling an estimated \$161.6 billion in 2010. [5] Furthermore, an estimated 1,249 calories per capita are wasted each day, which include fish (30%), vegetables (19%), and dairy products (19%). [5]

Policy Idea

Implementing Standardized Date Labels (SDL) across the country would help reduce food waste and decrease hunger across the United States. SDL is defined as the use of consistent and clear date labeling on food products as an indicator of their quality and safety

and would require manufacturers to replace their current food date-labeling methods. The goal of SDL would help ensure that consumers have access to clear and consistent information about food quality and safety.

Policy Analysis

A 2022 meta-analysis found that because manufacturers commonly use date labels to inform consumers of the date by which the product still retains the expected quality and flavor, it leads consumers to prematurely discard food, believing that the label signifies product safety. [4] In the US, 57.4%, 68.1%, and 79.7% of adult consumers knew the meaning of “best if, used by,” “expiration date,” and “sell by date” respectively. [4] Researchers found that consumers who understood various date labels were more likely to correctly identify the expiration date, which possibly contributed to less food waste. [4, 6] In a report by the Waste & Resources Action Programme, a nonprofit organization based in the United Kingdom to reduce food waste, it was found that confusion over date-labeling accounts for over 20% of avoidable household food waste in the United Kingdom. [7] In terms of reducing hunger, a report conducted by the National Resources and Defense Council and the Harvard

Food Law and Policy Clinic found that food recovery and anti-hunger programs experience widespread confusion on the meaning of varying date labels, resulting in additional time and effort being spent on sorting out products and educating workers about different dating systems. [7] According to a 2017 law review, SDL can reduce food waste by 5% to 10% for a net economic value of \$1.8 billion, divert almost 400,000 tons of food from landfills, and conserve 192 billion gallons of water per year. [8] Thus, standardized food date labels play a key role in reducing food waste at the household level but would likely not affect food waste from retailers.

Talking Points

- Implementing Standardized Food Date Labeling decreases consumer confusion on the definitions for different date-labeling terms and significantly reduces food waste in the U.S.
- Standardized Food Date labeling would decrease confusion and food waste for food-recovery and anti-hunger programs, as between 20 to 40% of the U.S. consumers don't know the meaning of common date labels. [4]

- Standardizing date labeling has the potential of reducing over 400,000 metric tons of food, which amounts to over \$1.8 billion of economic value preserved. [8]

Key Facts

- The U.S. has a major problem with food waste, as over 130 million metric tons of food waste occurs each year, amounting to over \$161.6 billion in economic loss. [1, 2, 5]
- Over 60% of all food waste in the U.S. occurs at the consumer level, more than production, processing, and distribution combined. [1,3]
- 90% of American consumers prematurely throw away edible food because of confusions over the meaning of different date labels. [4]

Next Steps

Standardized food date labeling can be implemented through three main steps. First, Congress should mandate that corporations and food manufacturers update their packaging and labeling processes. Because of the high upfront costs, companies have little financial incentive to update their date-labeling process, so the government should provide grants and financial incentives for companies to make the necessary changes. [9] Once corporations update their food date-labeling practices, the second step would be for the federal government to establish an education campaign to explain the new date-labeling system. This education can be conducted through various channels, such as social

media, in-store signage, and public service announcements. Finally, it's important to evaluate the effectiveness of standardized food date labeling by measuring how much food waste is reduced. The evaluation can be accomplished through a variety of methods such as conducting surveys, analyzing sales data, or conducting waste audits.

Action Plan Snapshot

Since this plan is directed at the federal government, advocacy efforts should be focused on the congressional level. The first step would be to ally with organizations devoted to reducing consumer food waste such as the Harvard Law School Food Law and Policy Clinic (FLPC), the National Resource Defense Council, and the National Consumers League. [10, 11, 12] With their strong national presence and influence, these advocacy groups could lobby members of Congress in relevant committees. Because this program would require grants and subsidies for food companies, obtaining funding from the federal government is only possible by lobbying individuals such as Patty Murray (D-WA), the Chair of the Senate Budget and Appropriations Committee. Other individuals on this committee include Susan Collins (R-ME), the Vice Chair, Dianne Feinstein (D-CA), and Richard Durbin (D-IL). On the House side, the Natural Resources Committee oversees all legislation related to the conservation of natural resources. Thus, advocacy groups should focus lobbying efforts on Raúl Grijalva (D-AZ), the Chairperson and Bruce Westernman (R-AR), the Ranking Member. Already, standardized food date labeling has broad public

support and many organizations including the FLPC, National Resource Defense Council, and the National Consumers League which have worked to educate consumers on the meaning of different date labels. By working alongside the federal government, these changes could be officially implemented nationwide.

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EDUCATION POLICY

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Bolstering the Early Childhood Workforce and Creating the Scaffolds for Universal Pre-K

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Research has shown that the early years of a child's life are the most crucial developmentally, but low wages and lack of growth opportunities do not allow educators to thrive and provide children the highest quality education.

Background

Preschool education has become increasingly relevant in our nation's discussions of education. The education children receive in these crucial years determines the neurological refinement that promotes a child's social and cognitive skills, which form the foundation for academic learning outcomes. In addition, children who partake in intensive preschool education programs, such as Head Start (a federally operated childcare and family resource for low-income communities), are more likely to graduate from high school and less likely to repeat a grade. [1] These benefits are especially potent for children from low-income families, minoritized children, and English Language Learners. [2]

However, long hours and low wages compel early childhood educators to leave the field and discourage young adults from pursuing it as a career. This turnover is most extreme in low-income areas, where this service is most valuable and where the wages are the most dismal. [3] The average Early Childhood Educator earns only 55% of what kindergarten teachers earn annually. [4]

From this end, the children suffer. There is strong correlational evidence stating that higher teacher turnover rates lead to poorer-quality child-teacher relations. [5]

The Biden administration's Build Back Better Act, in its former state prior to the passing of the compromise Inflation Reduction Act, dedicated \$2,500,000,000 to improving wages in the early childhood sector for the next six years. However, without proper support, the Build Back Better framework would only have been a temporary solution. [6]

Policy Idea

In order to strengthen the workforce in early childhood education, an executive order should be issued to focus on the issue directly. Wages for Head Start employees must be (at the very least) on par with that of K-12 educators in a center's local area. Beyond the existing education requirements, publicly-funded ECE centers (such as Head Start) should mandate increased hours of thorough, continuous professional development linked with pay increases.

Policy Analysis

The Biden Administration's Build Back Better plan sets a solid foundation for better funding the early childhood education workforce. By first identifying low-income and high-need areas to roll out universal programs, the Administration prioritizes its limited budget to those with the most urgent need.

However, the program's funding would stop after six years, transitioning the funding from the federal level to the state level. [6] There needs to be additional support in place as to not let the progress of early childhood education plateau. The Biden Administration or another federal governing group must set forth a universal pay standard to hold states accountable for appropriately paying their early childhood educators.

School systems like that of the Department of Defense mandate thorough orientation modules both prior to even interacting with children and throughout one's career. [7] With each additional training session comes a systematic pay increase, leading to a more professional workforce better updated on modern child development research. [8] Through these programs, the DoD achieves higher accreditation (95% of DoD centers are accredited as opposed to 10% of civilian centers) and retention rates than civilian programs. [8]

As mentioned above, the greatest priority for measuring impact should be recording the progress in low-income communities, which have been shown to reap the most benefit from preschool programs. Funding for increased wages and facility construction should be funneled toward the neediest communities.

Head Start Family and Child Experiences Survey (FACES) can track the progress of these initiatives. This survey provides holistic insight into the experiences and development of students, parents, and staff of Head Start programs. [9] Through FACES, policymakers can analyze the changes in students' school readiness and staff satisfaction to better understand this program's effectiveness in low-income communities.

Talking Points

- The Build Back Better plan's aim to distribute funding for the next six years is a good start but only a temporary solution. [6]
- School districts like that of the Department of Defense enforce a culture of thorough professional development throughout one's career with the incentive of pay increases. [7]
- This professionalization of the early childhood workforce has been linked to stronger teacher retention rates and better outcomes for students. [8]

Key Facts

- Accessible preschool programs are associated with closing the achievement gap and better outcomes overall for marginalized children (such as higher high school graduation rates and less grade repetition). [1, 2]
- Insufficient wages push early childhood educators out of the field. This turnover is associated with

worse outcomes for students and is more extreme in the populations which benefit from these programs the most. [5]

- On average, early childhood educators earn 55% of the income of a kindergarten teacher. [4]

Next Steps

Due to Congress's divided political climate, which facilitated the removal of childcare policy during the transition between Build Back Better and the compromising Inflation Reduction Act, passing this policy via legislation is on thorny ground. Therefore, President Joe Biden should issue an executive order to initiate improvements of the Head Start Program under the Department of Health and Human Services. Since Head Start is one of the few federally run childcare structures in the nation, an executive order bolstering those services would have more widespread impacts and fewer challenges presented by a divided Congress.

State governments rule the realm of education, meaning that the policies encouraged to be included in an executive order would be geared towards Head Start Programs under the Department of Health and Human Services. Head Start itself is geared towards low-income families, so the efforts of this policy would also be distributed towards the communities that need it the most.

Action Plan Snapshot

This first step would ideally start through educator interest groups and unions, such as the American Federation of Teachers, bringing this issue to greater

publicity, and in doing so, gain the attention of Secretary of Health and Human Services Xavier Becerra as well as Secretary of Education Miguel Cardona. Having the nation's leaders both in federal child services and in education on the side of this cause would be a great aid in applying pressure on President Biden to issue an executive order. This order would entail the establishment of an internal Head Start Educator Growth Coalition within the Office of Head Start within the Department of Health and Human Services. The Coalition should use the data collected by the FACES survey to assess changes in student outcomes and staff morale. The retention rates can be tracked via hiring statistics of the past fiscal year.

In the first fiscal year of this initiative, the Coalition should allocate part of the funding in the Department of Health and Human Services' Administration of Children and Families towards increasing hourly wages of Head Start teachers to be on par with the average wages of kindergarten teachers in the local area of a given Head Start center.

Efforts in professionalizing the workforce should be brought to federal attention in a similar manner. In the following fiscal year of the Coalition's establishment, the angle of professional development within Head Start should be modified to mimic that of the Department of Defense. While Head Start currently requires a minimum of 15 hours of training annually, the DoD's annual professional development requirements vary (between service branches) from 24 to 48 hours per year. [10, 7] In addition, like the DoD's system, the Office of Head

Start Programs and the Coalition should implement pay increases as one progresses through professional development modules. Head Start's professional development framework does offer opportunities for Continuing Education Units (CEUs), which can be used as "jumping off points" for pay increases and career shifts. [10]

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Federal Expansion of the Community Schools Approach in Title I Schools

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The COVID-19 pandemic exposed learning inequities and highlighted the need for better school models and pedagogies. The Community School model fosters school-community partnerships to provide technological, financial, and extracurricular support to disadvantaged students and should be implemented nationwide.

Background

The COVID-19 pandemic of 2020 caused an education crisis and intensified inequities within the U.S. education system. As schools closed and shifted to remote-learning, disadvantaged students disproportionately suffered adverse effects. [1] Vulnerable students in underfunded districts struggled without sufficient access to computers, reliable internet service, or even a quiet place to work. [2] Underfunded schools are classified as Title 1 and constitute 47% of U.S. public schools. [3] An analysis of nearly 10,000 schools concluded that the pandemic exacerbated learning losses for economically disadvantaged students. [4] The study found that already-existing achievement gaps intensified, leaving underrepresented minority and low-income students between ten months to a year behind other students nationally. One way to combat these disparities post-pandemic is to implement a Community Schools model, which promotes integrated student support, expanded learning time, family and community engagement, and collaborative leadership. [5] In 2014, New York City implemented a Community Schools model that, over three years, reduced student absenteeism, positively impacted math and ELA standardized test

scores, and reduced disciplinary incidents for non-high school students. [6] The Community Service schools approach focuses on family engagement learning rather than traditional student-directed independent learning, which requires teachers to directly involve parents in curricula through regular contact and to explain classroom objectives. [7] School districts that employ family-engagement learning have found that parental involvement in daily curricula helps close learning gaps. [8]

Policy Idea

The Community Schools model should be implemented in all Title I school districts across the U.S. Each school should implement four tenets of community schools: integrated student support, expanded learning time, family engagement, and community partnerships. To achieve integrated student support, schools should provide mental and physical health services and offer after-school programs to students. To build family engagement, monthly parent-teacher conferences should occur during the school year. To establish community partnerships, the federal government should provide tax subsidies to companies

willing to provide technological support and internships to students.

Policy Analysis

Policies that create more school-community partnerships and implement family-engagement learning are vital in closing learning gaps exacerbated by the pandemic. The latest national testing shows that school closures associated with the pandemic had profound, detrimental effects on low-income students because their schools continued remote learning for longer periods of time. [9] In a recent report, UN advocates for school-community partnerships predicted that without them, disadvantaged children would be left out of the future marketplace. [10]

Implementing business internships and partnerships would also provide equitable technological competence to underserved students. [11] Many schools can easily partner with businesses to provide internship opportunities. Tax subsidies will motivate businesses to partner with community schools. Successful partnership models are already thriving in many states such as Ohio, where the telecommunications service provider Cincinnati Bell transformed a high school into an

advanced technology school. In New York, the public Business of Sports School successfully partnered with Fila and Ford to achieve similar results. [12] Other states have initiated smaller projects with community business sponsors, such as local bookstores and food shops, with superintendents citing excellent results. [12]

Family-engagement learning has been proven to help close education gaps. [13] Post-pandemic research on the benefits of this learning model for disadvantaged students found that parental involvement in assignments and regular structured interactions with teachers created “collective mindsets” between parents, students, and teachers. [10] These mindsets increased effectiveness, learning time, and learning comprehension among students. [10]

Talking Points

- Without school-community partnerships, disadvantaged children have the potential to be left out of the future marketplace. [14]
- Business internships and partnerships will provide more equitable technological competence to underserved students. [15]
- New York City implemented a Community Schools model that, over three years, reduced student absenteeism, positively impacted math and ELA standardized test scores, and reduced disciplinary incidents for non-high school students. [6]
- The U.S. Department of Education just launched an online educational effort to

train teachers on how to incorporate family-engagement learning models and anticipates spending over \$100 million to support family-engagement learning efforts in the future. [16]

Key Facts

- New research studies show U.S. students’ post-pandemic learning losses to be over two standard deviations lower for math and over one standard deviation lower for reading, with impoverished students behind an additional 20% in math and 15 % in reading. [17]
- New school models harnessing school-community partnerships can mitigate learning losses, improve technology competency, and create more equitable learning environments and outcomes. [15]
- Business investment in schools also benefits corporations. Harvard Business School research found that companies practicing social responsibility significantly outperform their counterparts over the long-term. [18]

Next Steps

Based on the extensive benefits this program is proven to have for students, this policy should be implemented. Currently, President Biden is proposing an increase of federal funding to Title I schools from \$16.5 billion to \$36.5 billion. If the funding is approved by Congress, President Biden

should direct the Department of Education to allocate those funds to the implementation of the community school model in all Title I schools nationwide to close COVID-19 learning gaps and increase educational equity across the nation. These funds should be used to expand school-community partnerships by providing tax incentives to businesses in Title I school communities. Second, these funds should be used to build-in robust, integrated student supports by offering after-school programs as well as physical and mental health services from trained professionals.

Action Plan Snapshot

The New York State United Teachers (NYSUT) supports the implementation of community schools. [19] They believe that community schools “help schools move towards educational equity by supporting students and families that have food insecurities, lack stable housing, internet, and Wi-Fi, (winter) clothing, access to critical mental and physical health services and other essential needs.” [fact sheet] Furthermore, education authorities from think tanks and universities are proponents of this model to accelerate learning to make up for pandemic losses. [7, 14, 15]. The Department of Education is already supportive of the family-engagement learning model and is spearheading efforts nationally to help train teachers in this pedagogy. [16]. There would be little opposition from teachers and administrators to the implementation of this new model. The NYSUT can lobby government officials to implement this policy at the federal level.

Hakeem Jeffries, the leader of the Democrat Party in the House of Representatives, supports equitable education programs. His education platform states that “every single child throughout America should learn reading, writing and arithmetic at the highest level possible.” [20] Jeffries has awarded \$500,00 to the New York Sun Works, Inc’s STEM with Hydroponic Farming in the Classroom Project to support the partnership between the company and the New York Eighth District’s public schools. [20] With Jeffries supporting community-school partnerships, he will most likely support legislation to implement the Community School model nationwide. Additionally, Democratic Congressman Alexandria Ocasio-Cortez has advocated for federal funding for educational programs that support disadvantaged students. [21] These two representatives could push the House of Representatives to approve Biden’s funding proposal. As the leader of the party, Jeffries could use his power and leverage to ensure the funding is allocated.

Once the House of Representatives has approved the increased federal funding for public schools from \$16.5 billion to \$36.5 billion, President Biden can direct the Department of Education to ensure that every district uses the increased funding to implement a Community Schools model. President Biden already supports the Community Schools model, and his administration has stated that they are “committed to increasing and supporting the adoption of community school models across the country.” [22]

Based on the proven benefits of Community School models and the extensive political support that already exists, this policy can be successfully implemented at the federal level.

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Mandating Federal Holocaust Education in Public Schools

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It is imperative that Congress pass federal legislation requiring Holocaust education in all public schools, K-12, in order to curtail antisemitism and ensure that, even with the passage of time, the U.S. never forgets the atrocities of the Holocaust.

Background

Antisemitism and anti-Jewish hate crimes are at all-time recorded highs in the U.S. [1] It is imperative that students are educated at age-appropriate levels about the Holocaust throughout their primary schooling. [1] With the world growing further removed from the Holocaust over the past eight decades and survivors passing away, average American knowledge and understanding of the Holocaust is declining. [1, 2] Many U.S. adults have a basic comprehension of the Holocaust, but fewer than half “correctly answer multiple-choice questions about the number of Jews who were murdered or the way Adolf Hitler came to power,” along with other vital facts. [1, 2, 3] Outside of the direct educational benefits of providing proper Holocaust instruction, increased Holocaust knowledge is statistically tied to a better feeling towards and treatment of Jews, a positive effect greatly needed in today’s increasingly antisemitic world. [2]

Policy Idea

Because of the decline in Holocaust knowledge in the U.S. population, Congress should pass a federal mandate requiring Holocaust education in all public elementary and secondary schools. [1, 2, 3] This policy would introduce a curriculum outline for

all K-12 teachers, helping them sensitively and appropriately educate their students on the Holocaust and other genocides. [4, 5] As students age and mature, so should the content they are taught. This curriculum should be approved by school districts, which can delegate Holocaust education to certain subjects. All public elementary, middle, and high schools should be required to provide a unit of instruction within their curriculums to discuss the dangers of prejudice and extremism. Students should also be required to learn the importance of personal responsibility in advocating against such threats. [3, 4]

Policy Analysis

It is inappropriate and unrealistic to expect elementary-aged children to comprehend the Holocaust, which is why earlier education should focus on themes of discrimination. No young child should be exposed to the actual brutality of the Holocaust, but it is appropriate to use allegorical teaching. One such resource for elementary aged education is Eve Bunting’s *Terrible Things* in which the book’s namesake captures species after species, eventually emptying the forest clearing, symbolizing Nazi purges of Jews, Roma, and other minority groups. [5,6] Middle grade students are

mature enough to understand and benefit from works such as “First They Came For” by Martin Niemöller, which mirrors the moral of Bunting’s children’s story while portraying actual facts about the Holocaust. [5, 6] By the time students reach high school, they should be working with biographical and historical texts, such as *Night* by Elie Wiesel and *Maus* by Art Spiegelman, both of which portray the harsh realities of the Holocaust. [7, 8] This progressive exposure system educates high school students, effectively and appropriately increasing Holocaust knowledge. [6] This policy will remedy the intellectual discrepancy between America’s younger and older generations, ensuring the preservation of history and its lessons as time goes on. [4, 5, 8]

Talking Points

- Strong historical education in primary and secondary schooling is essential.
- Greater Holocaust education leads to individuals having warmer feelings towards Jews. [5]
- The Holocaust and World War II were pivotal events in both America and the world that must not be forgotten.

- Younger generations must be consistently and reliably educated on such critical events.
- Over twenty states already require some form of Holocaust education in public schools. [3, 4, 5, 6]

Key Facts

- 11% of U.S. Millennials and Gen Z believe the Jews caused the Holocaust. [2]
- 64% of U.S. Millennials and Gen Z believe in compulsory Holocaust education. [2, 1]
- 2022 had the largest amount of antisemitic hate crimes and incidents in the past 10 years. [1]
- 85% of Americans believe in at least one anti-Jewish trope. [1]

Next Steps

This policy must be implemented and become federal law. The U.S. Congress has previously passed legislation in support of Holocaust education through the Never Again Education Act, which was signed into law with bipartisan support. [8] The Never Again Education Act expands the U.S. National Holocaust Memorial’s education programming, providing a variety of resources, curriculums, and guides for teachers and school districts alike. [8] While the Never Again Education Act represents progress, the increased educational material it produces does not reach every school or every student. [8] Federally mandated Holocaust education in schools guarantees the benefits of the Never Again Education Act impact children

regardless of state or school district lines.

Action Plan Snapshot

Mandatory Holocaust education has wide, bipartisan support as shown by the Holocaust Education and Antisemitism Lessons Act (also known as the HEAL Act), which was introduced in the House of Representatives on January 27th, 2023 and later brought to the Senate on April 25th of the same year. [9, 10] The HEAL Act has bipartisan support in both the House and the Senate with endorsements from Congresswoman Kathy Manning (NC-6), who currently serves as the Co-Chair of the House Bipartisan Task Force for Combating Antisemitism, and many leaders in the Jewish community, such as Jonathan Greenblatt, the CEO of the Anti-Defamation League. [10, 11] The HEAL Act’s bipartisan support signifies that this policy requiring Holocaust education from kindergarten to high school graduation will also have support in Congress. There is significant evidence of the benefits to this policy and its necessity is clear. It must be implemented at the federal level.

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Enhancing Career Technical Education: An Education for All

By Ria Sodhi, rs928@cornell.edu

It is necessary to increase access to Career Technical Education programs on a national level while also providing a curriculum that is relevant and up-to-date, practical instruction and experience, industry-recognized credentials, and support services to all students regardless of their geographical location or socioeconomic background.

Background

Direct instruction, which is the primary teaching method in most schools, is relied upon by 81% of educational institutions. This approach may cause many students to feel disconnected from the contextual challenges they will face in the real world. [1] Some schools solve this problem by implementing Career Technical Education (CTE). CTE's goal is to prepare students for the workforce and make academic material easily understood by placing concepts in a practical context. CTE programmes give practical training and experience in a particular industry, such as agriculture, automotive technology, construction, health care, information technology, and many more, to prepare students for the job. Classroom education and practical, hands-on training are frequently combined in CTE programs through internships, apprenticeships, or other work-based learning opportunities. They also provide qualifications and certifications that are acknowledged in the business, which can aid pupils in showcasing their competence to employers and enhancing their chances of landing a job. CTE equips high schoolers with the academic and technical know-how, training, and skills required to excel in upcoming vocations and develop

into lifelong learners. [1] High school students who go through CTE graduate at a rate of roughly 90%, which is 15% higher than the national average [1]. Overall, CTE programs assist students by bridging the gap between education and employment by giving them the skills and experience they need to thrive in their future careers. [2]

Policy Idea

Career technical education (CTE) is a successful strategy for preparing students for the job and filling the skills gap in many industries. The federal government should increase access to CTE programs on a national level, especially for students who might not have access in their immediate communities to ensure the equitable distribution of these resources. [3] CTE programs need a curriculum that is current and relevant, practical instruction and experience, industry-recognized credentials, and support services.

Policy Analysis

The remarkable advancements in CTE have made it a highly sought-after and viable option for students of diverse talents and interests. For at-risk children, vocational and technical education (CTE) has been shown to increase high school graduation rates.

Students' postsecondary education, employment prospects, and income may all rise as a result of taking CTE courses, particularly as a concentrated program of study. [4]

Vocational training improves high school graduation rates for high schoolers at risk of dropping out by 16% on average. [4] Additionally, studies on effective CTE pathways and programs reveal that they lower dropout rates, promote postsecondary enrollment, and give students the opportunity to obtain dual enrollment credits, certifications approved by the industry, and technical high school diploma endorsements. [5] Increased student engagement through CTE routes has the potential to boost high school graduation rates and postsecondary achievement. [5]

All students should have access to opportunities to discover directly how their academic work pertains to potential professional routes and vice versa in order to be prepared for the occupations of our complex, dynamic, and quickly globalizing future. Every school district across the United States should have access to programs that enable this exposure and offer students a concrete product like college credit or a professional credential.

Talking Points

- Federally funded CTE expansion can reduce educational inequity and better prepare students for success in the workforce. [11]
- In over 7,000 schools and communities across the nation, CTE programs have been successfully implemented and has proven effective in improving students' career readiness. [11]
- The rising demand for skilled workers in various businesses is exemplified by the need for qualified mechanics at automotive repair shops. These shops require skilled individuals to service and repair cars effectively. By offering automotive technology training, CTE can equip students with the skills to meet this demand and pursue careers in the automotive industry. [12]

Key Facts

- 65% of all US occupations will require postsecondary education or training by 2025, highlighting the importance of CTE programs. [7]
- CTE program participants have a higher graduation rate (93%) than non-participants (81%). [8]
- 53% of US jobs are in middle-skill occupations, making CTE programs important for preparing students for these positions. [9]

- Only 60% of Boston public school students complete their four-year studies on time, emphasizing the need for CTE programs to increase graduation rates and better prepare students for the workforce. [1]
- Direct instruction is prevalent in most schools, leaving students disconnected from real-world problems. [10]
- CTE programs bridge the gap between school and the workforce, equipping students with the knowledge and skills they need to succeed in their careers. [10]

Next Steps

Begin by identifying and forming a coalition of stakeholders who support the cause, including educators, business leaders, policymakers, parents, and students. This step should be completed within two months. The next step should focus on creating an effective media outreach strategy to raise public awareness about the importance of CTE programs and the need for additional federal financing. This step should also be completed within two months. Subsequently, it is essential to engage with local, state, and federal political leaders and lawmakers to advocate for more funding for CTE programs, which could take anywhere from three to six months. It is also crucial to collaborate with educators and administrators to identify gaps in CTE program offerings and create solutions to increase access for marginalized populations, such as low-income students and students of color. This process may take between six to twelve months.

Action Plan Snapshot

It is important to collaborate with educators and administrators to identify gaps in CTE program offerings and solutions for increasing access to marginalized populations, such as low-income students and students of color. This process should take between six to twelve months.

Outreach on campus, in the community, and in politics is also a key part of the action plan. Outreach includes holding community forums and town hall meetings to discuss the relevance of CTE programs and the need for more financing with parents, students, educators, and local business leaders. Garnering support also involves meeting with political figures to educate them on the benefits of CTE programs and to lobby for more financing. Additionally, collaboration with local businesses and industry leaders to provide work-based learning and internship programs for CTE students is important. These outreach initiatives should be ongoing.

The action plan also includes legislative initiatives. It is important to advocate for increased federal support for CTE programs, especially financing for the Carl D. Perkins Career and Technical Education Act. Collaborating with policymakers to create regulations that increase access to CTE programs for underprivileged groups while also aligning CTE programs with industry demands is another important step. These legislative initiatives should be ongoing as well.

Another key component of the action plan is forming alliances, which involves establishing

collaborations with local business leaders and industry professionals to contribute expertise and resources to CTE programs. It also entails collaborating with advocacy organizations and non-profits that support CTE programs to promote the message and improve visibility.

Finally, the action plan includes a media communication strategy. This includes creating a social media campaign to promote awareness of the value of CTE programs and the need for more federal funding. It also involves creating press releases and media comments to share success stories and emphasize the impact of CTE programs on students and the local economy. Collaborating with local media outlets to spread the word and reach a larger audience is also important.

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ENVIRONMENTAL & TECHNOLOGY POLICY

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Greening America: Proposing Carbon Tax as Critical Step Towards a Sustainable Future

By Camille Brady, chb233@cornell.edu

The Biden administration should enact a universal carbon tax of \$25 per ton of CO₂ to reduce CO₂ emissions by 50-52% before 2030. Non-renewable energy producers — domestic and international — will be affected by this tax to ensure eco-friendly practices in the U.S.

Background

For decades, climate science professionals have stressed the importance of reducing greenhouse gas (GHG) emissions, gasses that trap heat in the earth's atmosphere. Should current emission levels persist, there is a 50% chance that the earth's surface temperature will exceed 1.5°C in the next nine years.

[1] This increase will lead to detrimental effects on the climate by increasing the frequency and intensity of natural events such as flooding and extreme drought. [1] Domestically, the United States increased GHG emissions by an estimated 1.5% in 2022, most of which originated from transportation, energy systems, and industrial sectors. [2] GHG emissions in the U.S. negatively affect the entire country via extreme natural events but predominantly impact low-income and marginalized communities that lack the necessary resources for preparing and coping with climate-related events. [3] To mend such disparity and cut GHG emissions, experts recommend carbon pricing — an initiative that incentivizes GHG emitters to reduce their carbon footprint by attaching a financial consequence to increasing CO₂ emissions, the dominant greenhouse gas. [3] However, in the U.S., there is substantial state-level variation in carbon pricing due to

the lack of a federal mandate. The Biden Administration must consider the urgency of climate change and mandate a national carbon pricing scheme to catapult an eco-revolution that not only significantly reduces CO₂ emissions, but also stimulates the U.S. economy.

Policy Idea

The Biden administration should mandate a universal carbon tax of \$25 per ton of CO₂ — contributing towards the government's climate goal of reducing CO₂ emissions by 50-52% before 2030. Rooted in transparency and contemporary climate science, the upstream tax will target non-renewable energy producers, including natural gas, coal, and oil suppliers while incentivizing clean energy sources and rewarding those who already use clean energy. Furthermore, the carbon tax will apply to those who import overseas to ensure that what is brought into the U.S. remains eco-conscious.

Policy Analysis

The accumulation of CO₂ in the earth's atmosphere is a pressing issue that cannot be fought without nationwide compliance and cooperation. Nationally mandating carbon pricing eliminates turmoil at the state level by promoting

uniformity and reducing poverty. Abroad, British Columbia has experienced success in CO₂ reduction by implementing a revenue-neutral carbon tax to signal to its economy that a transition toward net-neutrality is necessary. [4] By creating a revenue-neutral tax policy, British Columbia eliminated the disproportionate effects on low-income communities associated with carbon taxing initiatives and simultaneously increased clean economy jobs by 12.5% since 2010, reaping further benefits. [4] Not only that, they were able to reduce overall emissions in the province by up to fifteen percent. [4]

While a carbon tax must continuously move with the ever-changing cost of abatement, it is easier to administer and is less expensive than cap-and-trade, especially when implemented as a tax on non-renewable fuel production. [5] Currently, a carbon tax is also the more politically favored emission reduction strategy as well. [5] In the long-term, an upstream carbon tax might lead fuel industry powerhouses to increase consumer prices, which might marginally affect low-income and middle-class communities, but this outcome could be mitigated by distributing the revenue from the carbon tax in the form of federal, per capita household rebates. [6]

Depending on how broadly the \$25 tax is applied to the energy industry, the U.S. could accumulate approximately \$125 billion in annual revenue from enacting this policy, which would ultimately account for raised market prices. [6] With benefits outweighing costs, imposing a federal carbon tax on fuel production can serve as an effective, CO₂-reducing strategy.

Talking Points

- Persistent turmoil at the state level necessitates the need for a *national* carbon pricing mandate that streamlines CO₂ emissions.
- A carbon tax is the more politically favored emission reduction strategy. [5] When utilized as a tax on non-renewable fuel production, it is inexpensive to initiate and easy to administer. [5]
- The U.S. could accumulate approximately \$125 billion in annual revenue from imposing a universal carbon tax of \$25 per ton of CO₂ emitted, accounting for inevitable increases in market prices. [6]

Key Facts

- Should current emission levels persist, there is a 50% chance that the increase in earth's surface temperature will exceed 1.5°C in the next nine years, leading to adverse effects on climate through the increased frequency and intensity of natural events. [1]
- CO₂ emissions in the U.S. increased by 0.8% in 2022 while the EU achieved a 2.5% reduction in CO₂ emissions due to the

transition from non-renewable to renewable energy. [7]

- Currently, the proposed domestic target to reduce CO₂ emissions by 50-52% before 2030 is not consistent with the 1.5°C temperature limit, requiring moderate improvements in policy.

Next Steps

The implementation of this policy begins with the House of Representatives, which, under the encouragement of the Biden administration, should introduce a universal carbon tax of \$25 per ton of CO₂ to eliminate state-level variation. Upon the passage of the bill, this tax will target non-renewable energy producers in the U.S., including those who import internationally to minimize the carbon footprint of the energy industry, effective immediately. Further, the carbon tax will only be lifted once the energy market is 100% renewable. The Environmental Protection Agency (EPA) will be responsible for nationally implementing the carbon tax and issuing regulations to ensure that each state is complying with the agreements laid out in the bill.

Action Plan Snapshot

Levying a carbon tax on non-renewable energy producers will essentially decrease the demand for non-renewable energy and simultaneously incentivize such producers to transition to renewable energy. In the interim, the federal government can use the revenue generated from the carbon tax to fund consumers' transition to renewable energy use via the adoption of solar panels, geothermal HVAC systems, or hydropower.

Instituting a carbon tax increases public support because it financially benefits a majority of households, especially those of low- and middle-income. [9] Even in the absence of political messaging, with or without a rebate, approximately 50% of constituents support a carbon tax. [9] A large number of congressional members actually support putting a price on carbon because it is fast, effective, and durable. [8] To help mobilize support for this bill, proponents should consider targeting political figures such as Senator Christopher A. Coons of Delaware and Senator Dianne Feinstein of California for their endorsement given that they have been vocal supporters for progressive climate change legislation. Together, Senators Coons and Feinstein have introduced the Climate Action Rebate Act of 2019, which imposes a carbon tax on the "use, sale, or transfer of certain fossil fuels and fluorinated gases that emit greenhouse gases into the atmosphere". [10] In tandem with gaining political support, advocates must connect with various environmental organizations, including the Citizens' Climate Lobby and RepublicEN, who support the enactment of a carbon tax. Given the bipartisan divide behind the implementation of the carbon tax, it is difficult to predict how quickly this mandate will take to officialize. Furthermore, it is also difficult to predict how long the tax will be in place, as the mandate would remain until the U.S. achieves a clean energy economy. However, as exhibited by Canada, which successfully issued a carbon tax within a span of six months, it is evident that the carbon tax is a policy that can be implemented

quickly without major legal challenges.

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Twiage: The Solution to Closing the Radio Patch in Emergency Medicine

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To better the quality of emergency medicine, policymakers should implement Twiage on the state level to improve the means of communication between Emergency Medicine Services and hospital emergency departments.

Background

The recent exponential growth of technology has birthed numerous revolutionary apps that strive to improve the general way of life. For instance, John Hui, MBA '15, co-founded Twiage, an app designed to close the “radio patch” between Emergency Medical Services (EMS) and hospital emergency departments (EDs).

Although the U.S. leads the world in the development of technological innovations, it ranked last in healthcare outcomes compared to 11 other high-income countries in a Commonwealth Fund analysis. [1] Two key factors have significantly contributed to this quality issue: the lack of financial incentives for healthcare providers to improve resources and the failure to leverage innovations in information technology. [2]

To combat this national problem, Twiage provides an accessible solution to improving healthcare quality—specifically within emergency care. In EMS and EDs, there is inefficient communication between paramedics and hospitals, especially when patients are transferred between the two departments. [3] For example, a 2019 study that analyzed 253 EMS radio transmissions in Washington, D.C. concluded that approximately one-third of the radio communications

were ineffective, and half failed to convey patients’ stability or vital signs. [4]

Developed in 2014, Twiage overcomes this communication barrier by eliminating hospitals’ lack of preparation and chaotic nature for incoming emergency care patients. [5] With functions that ensure instant dispatch of patient information, the Twiage app revolutionizes medical communication and improves the quality of care in emergency medicine.

Policy Idea

To improve the quality of emergency care nationwide, Twiage should be implemented on a state level through a targeted roll-out in public hospitals and ambulances. By using a growth strategy monitored by state councils, a network effect would be created in each state. In doing so, Twiage will significantly improve communication between EMS and EDs through the widespread use of its app. To combat issues of data breaches, a portion of the collected revenue should be allocated to the development of Twiage’s cybersecurity team.

Policy Analysis

Twiage aims to improve the quality of care in ERs by addressing “throughput” inefficiencies in the

flow of patients. More specifically, Twiage optimizes the delivery of emergency medicine by improving care coordination between EMS and EDs. This technological advancement in care coordination proves to be a constructive measure, as a 2023 study showed that an effective measure to minimize overcrowded ERs was to optimize human resources. [6]

With radio communication, EDs can only receive vague patient information, since airwaves are considered public domain. [7] Through Twiage, EMS and EDs have real-time communication that allows paramedics to relay HIPAA-compliant data like EKGs, IDs, on-scene videos, and ETAs. [5] Without the complications of frequency interferences and losing radio signals, Twiage eliminates the time-consuming “game of telephone” between multiple hospitals. [8] Moreover, Twiage provides a central dashboard that allows regional dissemination with other broadcasting hospitals, creating a wide net of transmission. [5]

When Twiage was implemented in its affiliated hospital systems, such as Virtua and Atlantic Health System, there was a 65% decrease in EMT wait times, a 60% decrease in ED door-to-door time, and an average of a 90-second reduction in notification time vs.

radio calls between EMS and EDs. [5] OSF Healthcare noted that it was because of Twiage that “patients only have to stop in ED long enough to get signed in and then head off to treatment...” [8] Overall, Twiage can decrease wait times, better initial hospital conditions for patients, and improve the delivery of emergency medicine.

Talking Points

- Twiage allows paramedics to directly send HIPAA-compliant data like ETAs, EKGs, vitals, ID photos, and on-scene videos to EDs. [4]
- When Twiage was implemented in the OSF HealthCare Saint Francis Medical Center, it took EMTs an average of 30 seconds to enter a case’s information rather than the two minutes it takes to initiate a radio call. [9]
- 80% of the OSF EMS providers felt Twiage improved their ability to hand off patients to EDs. [9]
- With advanced notification of a stroke through Twiage, hospitals can reduce the cost of hospitalization by approximately half or by \$10,000. [10]

Key Facts

- The U.S. ranked last in healthcare outcomes compared to 11 other high-income countries, according to a Commonwealth Fund analysis. [1]
- Two key factors of the U.S. healthcare quality issue are the lack of financial incentives for healthcare providers to improve

resources and the failure to exploit new innovations in information technology. [2]

- A 2019 study that analyzed 253 EMS radio transmissions in Washington, D.C. concluded that approximately one-third of EMS radio communications were ineffective, and half failed to convey patients’ stability or vital signs. [4]

Next Steps

To optimize the effectiveness of Twiage, a network effect needs to be created to incentivize hospitals and EMS to replace the heavily relied-upon radio communication system with Twiage. Therefore, Twiage should immediately appeal to state governments with results from successful case studies to create or instruct existing emergency medical services state councils to implement Twiage in state public hospitals and public ambulance companies. By using a market development growth strategy monitored by the state council, the state government can jumpstart a minimum efficient scale so that Twiage can move the learning curve down in terms of product improvement in the future and potentially expand to private hospitals as well.

Action Plan Snapshot

Before appealing to state governments, Twiage should garner the support of EMS associations like the National Association of Emergency Medical Technicians (NAEMT) and the American Ambulance Association (AAA). Since Twiage only charges subscription fees for its software-as-a-service model to hospitals and is

free to use for EMS, national EMS associations will be easily persuaded to support Twiage services. [11] By using the influence of national EMS associations as leverage, state governments would be more easily persuaded to implement Twiage within their state public hospitals and public ambulance companies. Successful case studies, such as the OSF study or the Ridgewood Valley Hospital case study, should additionally be used by Twiage to convince state governments further to support implementation. [9,12]

After Twiage is established in state hospitals and public EMS services, state councils should monitor the usage of Twiage as well as its effectiveness through monthly reviews in its early stages. As Twiage continues to improve its app through the feedback from these reviews, increasingly better results should also push private hospitals to implement Twiage. Since the app is already proven to improve the treatment of strokes and heart attacks, which can decrease expensive hospitalization costs for hospitals, these positive effects should further incentivize private hospitals to adopt Twiage. [10] Moreover, pushing state hospitals and public ambulance companies to implement Twiage creates a network effect. A network effect causes the value of the service to grow as the number of users increases, a well-known example being the Internet. [13] Therefore, more private hospitals and private ambulance companies will be motivated to implement Twiage from its increasing user base and users’ reliance on the product.

Additionally, state councils should push Twiage to create their own cybersecurity team or rely on

an external cybersecurity company such as Palo Alto Networks. By decreasing their susceptibility to data attacks, Twiage can strengthen its argument to healthcare providers for using their communication systems rather than the radio system.

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FOREIGN POLICY

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A Multilateral Approach to Restructuring Indonesia's Drug Laws

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Indonesia needs to restructure its zero-tolerance drug laws, as the consecutive increased death penalties and unjust persecution infringe on international and domestic human rights. A multilateral approach is recommended to overhaul Indonesia's zero-tolerance policies.

Background

Indonesia's strict prohibition on drugs has existed since 1976, but they have recently led to an increase in death penalty sentences as well as gender and racial discrimination. [1]

The number of death penalty cases in 2022 doubled from 355 to 146 in 2021, with nearly 60% of defendants on death row for drug-related charges. [2, 3] Prison density has skyrocketed since President Jokowi declared a war on drugs in 2016, with reaching maximum capacity at 91% in 2020. Half of the prison incarcerations were for drug-related offenses.

Additionally, Indonesia regularly makes international headlines for foreign nationals being sentenced to death for drug smuggling. For example, Brazilian and Filipino nationals were given death sentences, drawing international condemnation, as well as the recall of an Australian ambassador. [4,5] In addition, Indonesian president Joko Widodo publicly encouraged extrajudicial killings in the investigation of narcotic cases, justifying Indonesian police's heightened extrajudicial killings. [6]

Promises to alleviate Indonesia's criminal code have only resulted in revisions for harsher sanctions punishing narcotic use and possession. [8]

Policy Idea

As Indonesia's "zero tolerance" drug policies begin to infringe on international human rights law, the issue should be approached as a human rights violation. Neighboring countries and countries previously affronted by the issue should file multiple state-to-state complaints against Indonesia for repeated violations of international human rights. Resulting recommendations from the United Nations Human Rights Council will motivate efforts to resolve immediate arbitrary death penalty cases, as well long-term constitutional issues.

Policy Analysis

The specific international complaints should cite the Convention against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment; the International Covenant on Civil and Political Rights; the International Covenant on Economic, Social and Cultural Rights; and the International Convention on the Protection of the

Rights of All Migrant Workers and Members of Their Families. These conventions are only a fraction of the numerous statutes Indonesia violated by conducting torturous interrogation methods, arbitrary arrests without informing the defendant of the charge, and court trials in a language foreign nationals cannot comprehend.

The UNHRC recommends restructuring Indonesia's penal drug code, reparations for the foreign nationals involved, and more long-term international involvement. Respectively, example recommendations should include legal mechanisms to report extrajudicial efforts to higher authorities above grassroots law enforcement, immediate release of foreign nationals currently imprisoned for smuggling drugs like Mary Jane Veloso, formation of third-party organizations responsible for international advocacy.

Activism from the international community proved effective in helping to resolve domestic violations of human rights. One such case is the role of United Nations Human Rights in alleviating human rights issues in Nepal. Nepal's "People's War" of 2005 resulted in countless Nepalese disappearances and killings,

whose resolution was partly attributed to the international donor community and their involvement [8]. Due to Nepal's heavy reliance on international aid and reputation, the recommendations submitted by the United Nations Human Rights Council to counter human rights violations were taken and implemented seriously. Considering Indonesia's similar reliance on international aid, it is reasonable to assume that the UNHRC's strong condemnations of the violations caused by Indonesia's drug policy will be taken seriously.

Talking Points

- Indonesia faces a domestic dilemma in its constitution with regards to drug laws.
- Specific and relevant articles from broad human rights articles must be used, for example the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, and the International Convention on Civil and Political Rights.
- In addition, a multilateral approach, heavily modulated by an international committee such as the United Nations Human Rights Committee, must be used in order to emphasize a multilateral approach that does not infringe on Indonesia's national sovereignty.

Key Facts

- A recent prison fire in 2021 called Indonesia's

prison system into question.

- 60% of defendants are on death row because of drug charges.
- Indonesia's prison density reached nearly maximum capacity at 91% in 2020
- Death sentences for foreign nationals made international headlines.
- Recent laws only made drug laws even harsher, reinforcing gender and race discrimination.

Next Steps

If implemented correctly, a multilateral approach towards Indonesia's growing infringement on its citizens' political and cultural rights would stem growing international tensions before Indonesia's extrajudicial imprisonment of foreign nationals is interpreted as outright antagonism. Such a policy approach acknowledges concerns of countries on the fringe of the human rights scene like the Philippines and Mexico and reminds other countries of their universal commitment to human rights—thus encouraging increased international participation from Indonesia and other developing countries.

Mobilizing attention and support on an international scene is a bottom-up process. Smaller details such as adequate investigation into whether all domestic remedies have been fulfilled in international law must first be refined before amassing regional, and then international, support. Through an international investigation of Indonesia's drug-related crimes, more research can be conducted on adjacent issues, such as Indonesia's overburdened prison system and

racial and gender discriminatory arrests.

Action Plan Snapshot

First, enough foreign ambassadors must be mobilized to foster a substantive global consensus and attention surrounding Indonesia's drug law enforcement. For example, Colonel Amilkar Bernabe Lemus and Bryan B Lao, Mexico's and the Philippines's foreign ambassadors for Indonesia respectively, can introduce their citizens' unjust sentencing to the UNHRC when discussing foreign policy strategies. Generating attention at the grass-roots level will galvanize the UNHRC into conducting independent investigations into aforementioned cases in Indonesia, hopefully providing rapid solutions to foreign nationals currently awaiting the death penalty and examining cases like the arrest of four foreigners in Jakarta's Soekarno-Hatta airport in March 2023. [9] Including independent reports into the UNHRC's regular sessions will persuade other countries into supporting multilateral intervention.

Only after reliable information on Indonesia's consistent and grievous violations is produced can several states file state-to-state complaints against Indonesia. [10] When the United Nations Human Rights Committee decides to conduct an inquiry, reporting states should urge regionally and economically relevant committee members to participate in the inquiry process. Malaysia, the Philippines, and Brazil should be some of the first countries to engage in the inquiry process, as their geographic and economic relations with Indonesia

will incentivize Indonesia to take future UNHRC recommendations seriously. By involving Indonesia in UNHRC's inquiry procedures, overburdened prison densities and gender discrimination can also be investigated. [10] Information-gathering procedures on every level of international law (locally, regionally, and internationally) will sufficiently inform policy recommendations for Indonesia, such as establishing more flexible drug laws and/or establishing an independent advocacy group specifically for the advocacy of condemned foreign internationals and immigrants.

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Saving TikTok from a Ban through Regulation

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Since the Trump administration's 2020 TikTok ban, Congress and the public are increasingly scrutinizing foreign social media platforms over privacy, repression, and censorship concerns. This proposal aims to address these concerns through platform-wide regulations instead of a politically repressive and economically protectionist ban.

Background

In 2020, the Trump administration issued an executive order banning “any transaction” with TikTok and WeChat. According to the Trump Administration, “TikTok, WeChat automatically captures vast swaths of user information.” This data collection threatens to allow the Chinese Communist Party access to Americans’ “personal and proprietary information.” TikTok also serves as “a mechanism for keeping tabs on Chinese citizens [abroad]”. [1] Furthermore, there are credible reports of TikTok censoring content critical of China and having links to the CCP’s United Front party organization, which is in charge of influencing overseas organizations. [2]

While Trump’s executive order was defeated in court, the prospect of a TikTok ban resurfaced recently with the Biden administration banning TikTok on federal government devices. [3] In TikTok’s CEO’s testimony before Congress, many also raised broader concerns over the potential theft or misuse of the large amount of data social media platforms gather on its users and the proliferation of harmful, extremist, or false information. [4]

However, as the court ruling overturning Trump’s similar WeChat ban pointed out, a ban violates first amendment rights in

the name of national security. [5] It would also stifle the competition that drives innovation; TikTok owes its success to a powerful algorithm and short clips from which American companies have successfully learned (e.g. YouTube shorts). [6] Therefore, an alternative approach to address these concerns without stifling free speech and innovation is urgently needed.

Policy Idea

Appropriate regulation can mitigate concerns over privacy, censorship, and repression. TikTok proposed establishing a subsidiary, TikTok US Data Security Inc. (USDS), governed by an independent board of directors that answers to the Treasury Committee on Foreign Investment (CFIUS). To protect privacy, American user data should be stored locally and only transferred overseas to engage with users and content outside the country. Oracle should host TikTok servers and monitor incoming and outgoing data. To address censorship and misinformation concerns, USDS should handle content moderation; auditors should also have access to TikTok’s recommendations algorithm. [7]

Policy Analysis

USDS potentially offers the technical and legal means to protect user privacy and prevent censorship. Building a database for

surveillance and repression requires large-scale, long-term data transfers that audits and network traffic monitoring can detect. While much will depend on the rigor of the audit itself, the framework of permitting audited cross-border data transfers is generally accepted by European General Data Protection Regulations and China’s own Personal Information Protection Law. [8] TikTok’s source code and algorithms will be available to auditors, who can investigate cases of foreign influence and censorship.

However, USDS struggles to address wider privacy and content moderation concerns. The amount of data TikTok gathers in one place, while not significantly more than other platforms, is a data security concern in itself. [4] Additionally, while USDS may stop outright censorship, broader data security and content moderation of extremist, harmful, or fake content is, as TikTok’s CEO admits, “not unique to us”. [9] Thus, USDS is a step in the right direction, but its success will depend on the execution of regulators and auditors at Oracle and CFIUS. [7] Regulating TikTok is feasible. TikTok has indicated its willingness to foot the \$1.5 billion setup cost plus an additional \$0.7-1 billion a year in operating costs to run USDS, [7] guaranteeing their presence in the US market that is projected to bring in \$8.75 billion of

advertising revenue in 2023. [10] Users will also not notice much difference. They will still have access to content outside the US, albeit at slightly slower speeds. [7]

Talking Points

- To protect privacy and security, TikTok will store American user information locally; Oracle and CFIUS will monitor and audit incoming/outbound data transfers.
- To prevent censorship, USDS will be responsible for content moderation; auditors will have access to the source code and algorithms. [7]
- Content moderation is an industry-wide problem that USDS does not fully address. [4]
- TikTok is willing to foot the \$0.7-1 Billion per-year bill for USDS.
- Users might notice slightly slower speeds when accessing content outside the US. [7]

Key Facts

- TikTok was known to censor content critical of the CCP. [1]
- TikTok is known to capture user information similar to other social media companies, which may end up in the hands of China and be used to monitor overseas dissidents. [11]
- The judge who overturned Trump's similar WeChat ban ruled it violated first amendment rights. [5]
- American social media platforms are competing

with and learning from TikTok. [6]

- Legislation for a nationwide TikTok ban is under deliberation. [4]

Next Steps

While the USDS plan can potentially prevent censorship and protect privacy, it is a relatively untested idea with much depending on its execution. Thus, the CFIUS should consider adopting the USDS plan as a one-year probationary pilot program. CFIUS should consult with TikTok, industry experts, users, and other stakeholders and publish a public report on USDS's performance. If the pilot program proves successful, the US should introduce legislation to regulate all foreign social media platforms based on the USDS model.

As an article in the Stanford Law Review points out, sector-wide regulation "creates predictability and notice for firms within each sector on how to comply." It also levels the playing field for firms and can "prevent the abuse of executive discretion," [12] thus also refuting Chinese allegations that America is unfairly targeting TikTok. [13] Furthermore, many of TikTok's data security and content moderation concerns are not unique to TikTok and require broader regulation.

Action Plan Snapshot

The greatest challenge to implementing USDS is political in nature. As Vox points out, "it's not clear when or even if CFIUS will officially sign off on the plan." [14] The fate of TikTok legislation is the product of wider US-China relations and domestic political factors about which this proposal

cannot speculate. In the 3/23/2023 hearing in Congress, bipartisan receptions to USDS were either wary or outright hostile. Furthermore, multiple competing proposals are on the floor from different bans to the sale of TikTok to an American company.

The regulation of foreign social media platforms will ultimately be a part of a wider comprehensive social media regulation regime. The controversy over TikTok has increased the awareness of the pressing need for this regime, including many congressmen like Rep. Jay Obernottle (R-CA) Rep. Ann Kuster (D-NH). USDS should only be the first step in this regime. Irrespective of the success of its probationary period, this policy's lessons will be highly instructive for a future comprehensive regulatory regime of the likes of the European General Data Protection Regulations. Once the legal framework is in place, a specialized federal internet regulation agency could be created for enforcement. The current USDS arrangement ultimately relies on the technical expertise of Oracle and other third-party auditors to determine compliance with these laws. A centralized enforcement agency can improve enforcement standards by consolidating the much-needed specialized resources needed for this difficult task.

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HEALTHCARE POLICY

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Expanding Medication for Opioid Use Disorder (MOUD) Facilities to Reduce Overdoses

By Joan Joseph, jaj266@cornell.edu

As opioid overdoses torment the US, a new solution emerges with promising results— Medication for Opioid Use Disorder Facilities. MOUD provides behavioral therapy alongside medications that wean individuals off Opioids. Legislation encouraging states to implement more facilities is vital to ending the opioid crisis.

Background

The opioid crisis is one of the fastest-growing issues plaguing the United States healthcare sector. Fueled by large conglomerates like Purdue Pharma, the crisis has resulted in the death of nearly one million Americans since 1999. [1] The opioid epidemic unfolded in waves from the mid-1990s to the present day. While each wave encompassed all kinds of opiates in use, they are characterized into three waves: rises in prescription, heroin overdoses, and synthetic opiate overdoses. [2] From 2010 to 2021, overdose rates increased from twenty-one thousand overdoses per year to eighty thousand overdoses per year—the rate increase by 300%. [3] People in rural communities are affected four times more often than those in urban areas, partly due to factors like unemployment, chronic injuries, overworked physicians, and prescription sharing. [4] After the Great Recession, rural communities could not financially recover as fast as other communities. Family businesses foundational to rural communities closed their doors indefinitely, and while unemployment has decreased in recent years, it is not enough to revive the communities. The National Survey on Drug Use and Health found that people who worked jobs were less likely to

abuse substances; therefore, it makes sense that an Opioid Use Disorder (OUD) is quite common in towns where employment is low. Additionally, in rural work like mining, manufacturing, and agriculture, chronic injuries, which are treated through opiates, are very common. Since rural doctors also have a larger patient load and are overworked, opioids are easier to prescribe than repeatedly filling physical therapy prescriptions and monitoring an individual's pain progress. [5] Ultimately, since rural and urban areas lack many drug abuse resources and therapies, the epidemic rose uncontrollably and unchecked among unemployed and working individuals.

Policy Idea

The United States Government should expand Medication for Opioid Use Disorder (MOUD) facilities (formerly known as Medication Assisted Treatment—MAT) to help lower the prevalence of OUD in the US, targeting rural counties and prison populations. MOUD therapy uses a combination of counseling and behavioral therapy alongside medications to wean patients off opioids and end drug dependency. The medications used in MAT therapy eliminate addiction by stabilizing dopamine receptors and blocking euphoric receptors in the brain that create the

drug high. The medications also help reduce the body's cravings for opioids, while the therapy aspect of MOUD aims to strengthen the psyche, therefore helping individuals overcome addiction.

Policy Analysis

MOUD therapy is proven to be incredibly effective. According to a study conducted by the South Dakota Department of Health, "90% of patients who used MOUD maintained their sobriety when evaluated at the 2-year sobriety mark." [6] Unfortunately, although MOUD is effective, only 7,322 specialized clinics exist, and within those clinics, there are irregularities. [7] For example, some clinics only use buprenorphine, naltrexone, or methadone rather than the combination drug therapy that MOUD requires. Providing clinics with access to all three medications is crucial for medical professionals to help build successful treatment courses for each individual. The medications are safe when used in a controlled environment under the supervision of medical professionals. [8] This policy is also key in reducing the large substance-abuse-related costs that the nation absorbs yearly. OUD accounts for \$35 billion in healthcare costs, \$14.8 billion in criminal justice court related costs, and \$92 billion loss in productivity. [9] The

expansion of MOUD therapy can also reduce the amount of people incarcerated for drug-related violations and greatly reduce the cost of medical care as MOUD therapy aims to be a permanent solution to ending addiction. [10] A decrease in drug-related violations can also help reduce the financial and staffing stresses currently felt by the criminal justice system. [11] Since around 24% to 36% have an OUD, expanding MOUD facilities can reduce recidivism, allowing people a truly fresh start. [12]

Talking Points

- There have been around 1 million opioid overdoses since 1999.
- Expanding MOUD clinics will save billions of dollars in healthcare and criminal justice costs.
- The medications used in MOUD are not addictive/replacements for Opioids.
- MOUD can specifically alleviate the financial and staffing burdens faced by prison and reduce recidivism.

Key Facts

- Cities like Baltimore that utilize MOUD therapy have seen decreases in opioid related deaths. [13]
- Individuals that have undergone the full 90-day MOUD treatment program have seen up to a 50% decrease in relapse rates, while other forms of de-addiction medications have only reduced relapses by 26%. [14,15]

- MOUD therapy is important because it can also alleviate financial burdens that the nation faces: \$35 billion in healthcare costs, \$14.8 billion in criminal justice court related costs, and \$92 billion loss in productivity.
- The medications used in MOUD therapy to replace opioids are not addictive and will not create a new addiction to replace the OUD. [16]

Next Steps

The federal government should provide funding for MOUD therapy and take initiatives to expand the program into every state with a focus on rural areas and prisons since it can help put an end to the ongoing drug crisis. Because MOUD therapy is successful and backed by countless research studies, there is no need for a trial run before full-scale intervention. The federal government should allocate funding for states to open specialized MOUD treatment clinics which ensure the use of the opioid-weaning drugs alongside behavioral treatments. Medicaid should also help cover costs, so rural underprivileged communities can take advantage of the life-changing treatments. Medicaid's involvement is also important, as 18% of its beneficiaries have some form of a substance abuse disorder. [17] Additionally, the money that states receive from the Purdue Pharma settlement should be reallocated into funding MOUD therapy. Greater funding in rural communities can also help curb future addiction by providing educational resources.

Action Plan Snapshot

The policy proposal should have an implementation timeline of around five years and must be spearheaded by the federal government. However, due to the polarized political climate, a crucial component of the plan aside from funding is to educate the general public. Due to the polarizing conversation surrounding addiction and negative reactions towards treatments that temporarily replace drugs with other drugs, it is important to begin outreach programs to help people support the plan. Many people view MOUD therapy clinics as alternative places that condone drug use since opioids are being temporarily replaced with medications like methadone, buprenorphine, and naltrexone. The "Not In My Backyard" mentality – residents of an area fight the construction of new developments in their zipcodes- motivates legislators to be against the policy, as they do not want to upset their voter base. Educational programs like pamphlets, news segments, and speeches from prominent figures in the healthcare industry can help align both parties to the same goal of ending addiction with the most effective way researched. [18] Additionally, if insurance companies were to accept MOUD therapy as a treatment for addiction, then the proposed legislation would be easier to enact. To do so, partnering with healthcare lobbying groups like the Coalition to Stop Opioid Overdoses would be beneficial. When the policy is approved by the government, some structural issues that have harmed the effectiveness of existing programs should also be addressed. For example, there needs to be more medical personnel trained in

MOUD therapy and handling deaddiction. [19] With the appropriate federal funding, insurance coverage, and reduced stigma, MOUD therapy has all the resources it needs to effectively rid a community of OUD.

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Mandating Higher Wages for Medical Residents Working in ACGME-Accredited Hospital Systems

By Rachel Kim, rhk76@cornell.edu

The Accreditation Council for Graduate Medical Education (ACGME) should increase the minimum salaries for physician residents in all years of training by 15% with annual increases tied to inflation, so residents can receive a fair wage that is commensurate with their education, experience, and training.

Background

Resident physicians work between 40 to 80 hours per week, and the 2022 AAMC Survey of Resident/Fellow Stipends and Benefits shows that the average first year resident salary was \$60,942. [1, 2] As residents are not yet practicing physicians, they are ineligible for overtime wages and paid time off (PTO) benefits. [3] Many have accrued educational debt from undergraduate and medical school, resulting in a national average debt of \$170,000 for U.S. medical school graduates. [4] Expecting residents to sustain themselves with a salary much too low for the educational qualifications and hours worked leads to burnout and work-related stress.

The average salaries for residents have increased minimally between 2014 and 2022 and are shown to be below the average U.S. cost of living. [5] Furthermore, research shows that, when adjusted for inflation, the average salaries for residents did not increase more than \$5,000 in the past 40 years, yet the value that residents bring to hospital systems is so great that a strict enforcement of the 80-hour workweek and a required 5-hour nap during extended shifts is estimated to cost the country \$1.6 billion dollars. [6,7] The majority of residents have started families, and

the long shifts and low salaries have led to increasing attrition rates among residents. Though rates differ by specialty, highly demanding fields like emergency medicine (EM) have experienced attrition rates of 23% annually. [8]

Policy Idea

The ACGME should raise their minimum salary requirements for residents in hospitals by implementing a revision of their accreditation standards, which would require hospital systems and organizations to make adjustments to meet the new wage expectations. The minimum salaries should be reflective of 15% of the 2022 standards as imposed by the ACGME and increase annually in line with inflation. The committee should reconvene to make such changes to better medical care outcomes and support healthcare professionals across the country.

Policy Analysis

Increasing the minimum salary for physician residents in hospitals would alleviate not only the financial burden but also the wellbeing of physician residents as they work a demanding career. Research shows that 76% of internal medicine residents at the University of Washington met the criteria for burnout using the Maslach Burnout Inventory (MBI),

reflecting the significant mental burden that residency training poses on residents. [9] Job satisfaction is particularly important for residents, as burnout can lead to serious consequences in the healthcare setting, contributing to decreased productivity levels as well as increased risk of potentially fatal medical errors. [10] Furthermore, with an estimated medical physician shortage of up to 124,000 physicians by 2034, the salary raise may be able to retain current residents and prospective individuals to slow this growth. [11] By increasing the attractiveness of the program, the quality of medical care will continue to increase in the long term which is vital with a physician shortage and the increased onset of chronic illnesses and an aging population. Individuals who may have been deterred by the low salaries may be convinced to pursue medicine, and this policy would increase accessibility of medical careers to lower-income individuals previously dissuaded.

Talking Points

- Resident physicians work 40 to 80 hours a week, yet the average first-year salary is \$60,942, causing many to burn out and have work-related stressors. [1, 2]

- The ACGME should raise resident salaries by 15% by making changes to the accreditation standards and reflecting modifications to wage expectations.
- Increasing resident salaries will not only raise the satisfaction for residents and their families but also lead to long-term improvements in productivity and positive patient outcomes in hospitals. [12]

Key Facts

- Many residents are accruing an average of \$170,000 of educational debt from their undergraduate and medical schools. [4]
- The average salaries for residents haven't been increasing in line with inflation, as the salaries haven't increased more than \$5,000 in the past 40 years. [6]
- Demanding fields like emergency medicine have been experiencing high attrition rates of up to 23% annually. [8]

Next Steps

Local Committee of Interns and Residents (CIR) chapters should convene and discuss ways to bring about higher wages and other resident benefits, not only in their respective communities but also throughout the country. [13] Patient advocacy groups and other community organizations can help raise awareness on the impact of burnout and low salaries on patient care, particularly the significant, detrimental consequences on patient outcomes and hospital revenue. Furthermore, engagement with

professional organizations such as the American Medical Association (AMA) and the Association of American Medical Colleges (AAMC) would be helpful, as they have significant influence within the healthcare industry and could help ultimately build momentum toward these efforts. CIR chapters, with the support of these additional groups, should meet and consult the ACGME to adopt formal changes that mandate higher minimum wages for residents. Furthermore, both residents and physicians alike could participate in ACGME's annual survey to further relay their feedback on the importance of higher salaries for the well-being of residents and improved patient care in the hospital. [14]

Action Plan Snapshot

One potential source of funding for the proposed increase in medical resident salaries could come from the ACGME's accreditation process. By mandating higher minimum wages for residents, hospitals would be required to provide better salaries in order to meet the accreditation requirements. This change would create financial incentives for hospitals to increase resident salaries, as failure to do so could result in loss of accreditation. Though such modifications to the accreditation process would likely not be sufficient in garnering enough funding for the increased resident salaries, they would still be a significant source of funding that would also ensure hospitals are held accountable for providing fair compensation for their own residents. Other methods for funding with hospitals may be possible with reallocation of resources, identifying inefficiencies

in the system or payments from Medicaid in some states.

The ACGME could also lobby federal lawmakers to allocate increased funding to subsidize hospital budgets to compensate for the increased resident salaries. Working with organizations such as the National Resident Matching Program (NRMP) and the Centers for Medicare & Medicaid Services (CMS) would be helpful in securing additional funding for resident compensation. Obtaining funding directly from the government would mean that the financial burden would fall less on individual hospitals and also decrease deterrence by hospital administrators when higher resident salaries are mentioned. With local CIR chapters, professional organizations, ACGME, and government working together and advocating for higher salaries, these groups can help create a more sustainable and equitable healthcare system for health professionals.

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Improving Mental Health Support Access in NYC Public Schools: Action Needed Now

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The lack of adequate mental health support in New York City public schools is a serious problem that must be addressed. Serious policy intervention is needed to ensure that students receive the mental health resources they need in a timely and effective manner.

Background

According to a recent audit released by the New York State Comptroller's Office, the Department of Education (DOE) in New York City (NYC) lacks the staff and training to provide adequate mental health support to students. The report shows that over 400 schools lack social workers, and 80% of schools with social workers fail to meet the recommended staff-to-student ratio of one social worker for every 250 students. [1] The report also finds that the DOE has been in violation of state law requiring mental health education to be included in the curriculum, meaning that students are not receiving the necessary education to understand and manage their mental health. [2] With over 1-million students, the NYC school system is one of the largest public school systems in the nation, and the lack of mental health resources provided is a pressing issue that requires immediate attention. [3] Further, the shortage of mental health resources and staff in NYC schools is a reflection of a broader national trend. According to the National Alliance on Mental Illness, one in six children in the U.S. has a mental health condition, but fewer than 50% receive any form of treatment. [4] This statistic is concerning, as untreated mental health conditions can have

significant, detrimental impacts on a child's academic performance, social relationships, and overall quality of life.

Policy Idea

NYC policymakers, in conjunction with NYC Public School officials, should carry out the successful implementation of a comprehensive mental health support system in all NYC public schools. This process would involve hiring additional mental health professionals and social workers and providing ongoing training for school staff on identifying and addressing mental health concerns. By taking a proactive approach to mental health, the school system can create a supportive and nurturing environment for all students, which will ultimately lead to better academics and health outcomes for both individuals and the district as a whole.

Policy Analysis

Studies have shown that providing mental health support in schools leads to improved academic outcomes and better mental health for students. In a study published in the *Journal of Child Psychiatry and Human Development*, researchers examining 395 elementary school students over the course of three years found that students with better mental health showed higher

academic achievement than those with poorer mental health. [5] Assessing mental health through self-report questionnaires that measured symptoms of anxiety and depression as well as academic outcomes measured by standardized tests, researchers suggest that mental health and academic achievement are closely linked in elementary school students. [5] Such findings indicate that if NYC public schools further efforts to promote mental health and well-being for students, positive effects on their academic performance can transpire.

Additionally, research has shown that early intervention for mental health issues in schools can prevent more serious mental health challenges later in life. [6] By providing adequate mental health resources and support in schools, students can learn effective coping skills, develop resilience, and receive timely interventions when needed, which can prevent the escalation of mental health issues into more severe conditions. [7] These interventions can result in reduced long-term costs associated with mental health care, as early intervention can prevent costly hospitalizations or treatments in the future.

Addressing the lack of mental health support in NYC public schools aligns with the

principles of equity and social justice. Students from marginalized communities often face additional barriers in accessing mental health care outside of school. Therefore, providing comprehensive mental health support within schools can ensure that all students, regardless of their background, have equal access to the mental health resources they need.

Talking Points

- The lack of adequate mental health support in NYC public schools is a problem that requires immediate attention. [1]
- Implementing a comprehensive mental health support system in NYC public schools, including hiring additional mental health professionals and providing ongoing training, can lead to improved academic and mental health outcomes for students. [7]
- Early intervention in schools can prevent more serious mental health challenges later in life, reducing long-term costs associated with mental health care. [7]
- Providing mental health support in schools aligns with principles of equity and social justice, ensuring that all students have equitable access to the mental health resources they need. [4]

Key Facts

- Over 400 schools in NYC lack social workers, and 80% of schools with social workers fail to meet the recommended staff-to-student ratio of one social

worker for every 250 students. [1]

- One in six children in the U.S. has a mental health condition, but fewer than 50% receive any form of treatment. [4]
- Students with better mental health tend to have higher academic achievement, indicating a link between mental health and academic outcomes. [7]
- Early mental health intervention in schools can prevent more serious mental health challenges later in life, leading to reduced long-term costs associated with mental health care. [1]

Next Steps

NYC policymakers should allocate funding to hire additional mental health professionals, such as school counselors, psychologists, and social workers, to ensure adequate staffing levels in all schools. These advancements should be done in conjunction with NYC Public School officials to assess the staffing needs of each school and allocate resources accordingly. Additionally, school staff, including teachers, administrators, and support personnel, should receive regular training on identifying and addressing mental health concerns among students. This instruction should include training on recognizing signs of mental health issues, providing initial support, and referring students to appropriate mental health resources. Lastly, the DOE should establish partnerships with local mental health organizations to provide additional support and resources to schools. These could include mental health

screenings, counseling services, and referrals to outside mental health providers for more intensive interventions.

Action Plan Snapshot

During the pre-implementation stage, initial outreach to key stakeholders, like NYC policymakers, NYC DOE officials, mental health organizations, parents, and community leaders, will be required to raise awareness about the lack of mental health support in NYC public schools and the need for policy intervention. Further, the development and implementation of a comprehensive PR campaign, including social media, press releases, community events, and partnerships with local media outlets to increase public awareness and support for the policy idea will boost its visibility. Additionally, regular updates and progress reports to stakeholders throughout the implementation process shall be required in order to maintain engagement. Should this policy be approved, implementation efforts will focus on hiring additional mental health professionals and social workers and providing ongoing training for school staff. Outreach efforts will continue with community forums, town hall meetings, and partnerships with local media to generate support and promote the benefits of the mental health support system in schools. Lastly, after a set system is implemented, efforts will focus on monitoring and evaluating the effectiveness of the policy, as well as ongoing outreach to ensure continued support. Data on student outcomes, staff feedback, and utilization of mental health services will be collected and analyzed to

inform improvements. PR efforts should continue through regular updates to stakeholders, media coverage, and success stories shared through social media and other platforms. Overall, this action plan will focus on generating widespread support through strategic outreach, coalition-building, engagement with key stakeholders, and leveraging public and media advocacy efforts to ensure the successful implementation and sustainability of the policy idea.

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Increasing Access to Healthcare: A Proposal for Expanding Manufacturer Copay Assistance Programs

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To tackle limited healthcare access for patients needing specialty medications, this proposal advocates for expanding Manufacturer Copay Assistance Programs, aiming to reduce financial burdens, boost medication adherence, and foster equitable health outcomes.

Background

The issue of limited access to healthcare, particularly for patients requiring specialty medications, has persisted for decades, leading to growing inequities in health outcomes. [1] One primary factor driving this challenge is the high cost of specialty drugs, often making them unaffordable for patients without insurance coverage or with high copays and deductibles. [2] Affected populations include individuals with chronic conditions, such as cancer, multiple sclerosis, and rheumatoid arthritis, who rely on these life-saving medications. [3]

Various policy initiatives have attempted to address this issue, such as the Affordable Care Act (ACA), which expanded insurance coverage and limited out-of-pocket costs for certain populations. However, despite the ACA's positive impact, millions of Americans still lack adequate insurance coverage or face prohibitively high copays for specialty drugs. [4] In 2019, the Kaiser Family Foundation estimated that 30 million Americans were uninsured and 44% of insured adults had difficulties affording their

medications due to high out-of-pocket costs. [2]

Copay Assistance Programs have emerged as an innovative solution to alleviate the financial burden on patients. By having specialty pharmacy manufacturers expand these programs, this proposal aims to address the urgent need for change in healthcare access and affordability, particularly for vulnerable populations who depend on specialty medications. By doing so, it seeks to build on previous policy efforts and address the persistent gaps in healthcare access and affordability.

Policy Idea

This proposal recommends expanding Manufacturer Copay Assistance Programs to enhance healthcare access for patients requiring specialty medications. The expansion would involve increasing funding allocated for both the program and eligible patients, broadening eligibility criteria, and simplifying the enrollment process. [3] By implementing these changes, more individuals with chronic conditions can benefit from reduced financial burdens, leading to improved medication

adherence and equitable health outcomes. [5] This policy idea builds on existing initiatives, targeting persistent gaps in healthcare affordability for vulnerable populations who rely on specialty medications. [6]

Policy Analysis

To evaluate the effectiveness of expanding Manufacturer Copay Assistance Programs, this analysis will focus on several research objective components: the affordability of specialty medications, medication adherence, and the impact on vulnerable communities.

Affordability: Studies indicate that high out-of-pocket costs are a significant barrier to accessing specialty medications. [2] Expanding Manufacturer Copay Assistance Programs could potentially lower these costs for patients. In a study examining the impact of copay assistance programs, Mossialos et al. found that such initiatives could reduce out-of-pocket expenses by up to 80%. [3] By increasing funding, broadening eligibility criteria, and simplifying the enrollment process, this proposal could lead to similar reductions in the financial burden for more patients.

Medication adherence: Poor medication adherence due to high costs is a critical issue for patients with chronic conditions, with 25% of patients not taking their medication as prescribed due to affordability concerns. [1] According to a study by Collins et al., copay assistance programs have been associated with improved adherence rates, with patients being 2.3 times more likely to adhere to their treatment regimens. [7] By expanding Manufacturer Copay Assistance Programs, the proposal could enhance medication adherence, leading to better health outcomes for patients requiring specialty medications.

Affected communities: The impact of expanding Manufacturer Copay Assistance Programs on vulnerable populations, such as low-income individuals, racial and ethnic minorities, and those with chronic conditions, is crucial to consider, as these communities disproportionately face challenges in accessing and affording specialty medications. [3] A study conducted by Smith & Johnson found that copay assistance programs can significantly reduce disparities in healthcare access for low-income populations, thereby fostering more equitable health outcomes. [5]

In conclusion, the expansion of Manufacturer Copay Assistance Programs has the potential to minimize costs, improve medication adherence, and enhance equitable access to specialty medications for vulnerable populations. By addressing these critical components, the proposal could be an effective means of tackling

the persistent gaps in healthcare access and affordability. [7]

Talking Points

The proposed policy would:

- Address growing healthcare inequities by focusing on vulnerable populations who disproportionately face challenges in accessing and affording specialty medications. [6]
- Target the affordability barrier for specialty medications, making them more accessible to those in need. [8]
- Build on existing policy efforts, such as the Affordable Care Act (ACA), to further improve healthcare access and affordability. [4]
- Potentially reduce out-of-pocket expenses by up to 80%, alleviating financial burdens for patients. [9]
- Improve medication adherence, with patients being 2.3 times more likely to adhere to their treatment regimens. [7]
- Foster equitable health outcomes for vulnerable populations by reducing disparities in healthcare access. [10]
- Address persistent gaps in healthcare access and affordability, ensuring that more people can obtain the necessary care and medications. [6]

Key Facts

The key facts related to the proposed policy are as follows:

- Growing healthcare inequities persist, highlighting the need for targeted interventions. [5]
- High costs limit access to specialty medications, creating barriers for patients who require them. [2]
- Despite the ACA's impact, gaps in coverage still exist, leaving many without adequate access to healthcare. [6]
- The expansion of Copay Assistance Programs targets the affordability barrier, making specialty medications more accessible. [3]
- Copay assistance programs can reduce out-of-pocket expenses by up to 80%. [9]
- Improved medication adherence is achieved through these programs, with patients being 2.3 times more likely to adhere to their treatment regimens. [7]
- The proposed policy addresses healthcare disparities for vulnerable populations, promoting equitable health outcomes. [10]

Next Steps

Given the potential of expanding Manufacturer Copay Assistance Programs to improve affordability, medication adherence, and equitable access

to specialty medications for vulnerable populations, this proposal recommends implementation. [4] To effectively expand the programs, the following steps should be taken:

1. Secure additional funding from federal or state governments, as well as private sources, to increase the capacity of Copay Assistance Programs. [9]
2. Broaden eligibility criteria to include more patients who face financial barriers or other challenges in accessing specialty medications. [5]
3. Simplify the enrollment process, ensuring that it is transparent and user-friendly. [3]
4. Conduct ongoing monitoring and evaluation to assess the impact of the expansion and make necessary adjustments to maximize the benefits for vulnerable populations. [7]

Action Plan Snapshot

To drive the expansion of Copay Assistance Programs into action, a comprehensive strategy must be developed, including a timeline, campus/community outreach, legislative actions, coalition-building, and a media communication plan.

1. Timeline:

- Months 1-3: Conduct research on the barriers to accessing specialty medications, current

program limitations, and potential improvements while gathering support from stakeholders, including healthcare providers, patients, and policy advocates.

- Months 4-6: Develop a detailed proposal for program expansion, outlining increased funding, broader eligibility criteria, and simplified enrollment processes.
 - Months 7-9: Engage with local, state, and federal policymakers to garner support and propose legislative changes to facilitate program expansion.
 - Months 10-12: Implement program expansion, monitor progress, and gather data on the impact of the expansion on the target populations.
2. Campus/Community Outreach:
- Engage with local colleges and universities to create awareness campaigns around healthcare access and the benefits of expanding Copay Assistance Programs. [10]
 - Conduct community workshops and town hall meetings to inform the public about the need for the expansion, its benefits, and ways to support the initiative. [4]
3. Legislative Actions:
- Collaborate with local, state, and federal policymakers to propose and advocate for

legislative changes that facilitate the expansion of Copay Assistance Programs. [9]

- Work with lawmakers to secure additional funding from government sources to increase the capacity of Copay Assistance Programs. [8]
4. Form Coalitions:
- Build partnerships with patient advocacy groups, healthcare providers, and other stakeholders to create a strong, unified voice in support of the expansion of Copay Assistance Programs. [10]
 - Collaborate with existing organizations and initiatives focused on healthcare access and affordability to share resources, expertise, and amplify the message. [6]
5. Media Communication Plan:
- Develop a targeted media campaign to raise awareness about the need for expanding Copay Assistance Programs and its potential benefits. [9]
 - Utilize social media platforms, press releases, op-eds, and interviews to share stories of individuals impacted by limited access to specialty medications, highlighting the

positive outcomes of the program expansion. [8]

By following this comprehensive action plan, the expansion of Copay Assistance Programs can be more effectively implemented, addressing healthcare inequities and fostering equitable health outcomes for vulnerable populations.

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Nationally Implementing Checklists to Reduce Medical Error

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Congress should standardize medical procedures with set treatment guidelines to reduce deadly medical error, ensuring patients can safely stabilize and heal.

Background

Medical error, the “preventable adverse effect of medical care, whether or not it is evident or harmful to the patient,” plagues the American healthcare system. [1] Causing over 250,000 deaths annually, medical error is America’s third leading cause of death. [2, 3] Devastation stems from such “poorly coordinated care, fragmented insurance networks, the absence or underuse of safety nets,...[and] unwarranted variation in physician practice patterns that lack accountability.” [3] This disorganization is so pervasive that 1 in 5 Americans have suffered from a medical error. [4] In fact, medical error often goes unreported, so the underreported issue is even more severe, even more deadly, than statistics can measure. [4] Using national uniform guidelines helps reduce healthcare discrepancies potentially harming patient health. For instance, standardizing the hospitalization of patients diagnosed with type 1 diabetes ensures every patient is properly stabilized and onboarded to the newest technology. With such uniformity, no patient is left behind. While some physicians may argue against such guidelines which supposedly reduce their freedom and physician art, these guidelines ensure basic healthcare needs are met and medical procedures occur. Across virtually every disease,

healthcare inequity based on geographic location or physician competency is reduced with national guidelines, as every practitioner follows a professionally agreed-upon approach. This data-driven methodology provides an equitable, systematic approach to healthcare. National medical guidelines enable the healthcare system to reach an approach where cost control, expertise, holisticness, and patient autonomy can flourish. [1]

Policy Idea

Saving a myriad of lives annually, implementing national guidelines for all American hospitals is vital in eliminating harmful medical variances and inadequacies. A conference of healthcare stakeholders should convene to produce the year’s medical checklists: a set of guidelines for standard hospital procedures to reduce medical error. National guidance is crucial. Taking the time and effort to formulate a federal process involving representatives from all stakeholders is key. With a list of comprehensive scenarios, medical checklists can help save the American healthcare system and all the patients within it.

Policy Analysis

Hospitals nationwide must adopt universal guidelines to

eradicate medical errors, protecting life-saving metrics from hasty check-ups, evaluations, treatments, or surgeries. As the National Library of Medicine’s Professor Woolf explains, medical guidelines “have increasingly become a familiar part of clinical practice.” [5] Such influential guidelines aid physicians by delineating concise instructions on proper stay length, tests, and medical services for each scenario. [5] Eighty-nine percent of participating hospitals improved care and patient outcomes, demonstrating clinical guidelines’ efficacy. [6] When implemented on a national scale, this successful measure enables hospitals to improve their safety precautions and health outcomes. To measure throughout implementation, comparing statistics of unnecessary medical deaths before and after implementation provides insight into efficacy. Health system CEOs, such as Dr. Vivian Lee of University of Utah Healthcare, already use them successfully. [7] Additionally, 70% of nations use medical checklists, reducing mortality by 50% and postoperative complications by 36% —plus enhanced teamwork and communication. [8] Overall, guidelines reduce discrepancies harming health. For instance, standardizing type 1 diabetic diagnosis hospitalizations ensure patients properly stabilize and

onboard to the newest technology. With uniformity, no patient is left behind. While some physicians argue against guidelines for their freedom and artistry, guidelines ensure basic healthcare needs are met and medical procedures are performed. Across virtually every disease, healthcare inequity based on geographic location or physician competency reduces with national guidelines, with practitioners following this evidence-based approach. This data-driven methodology provides an equitable, systematic approach. National medical guidelines enable healthcare to reach flourishing cost control, expertise, holisticness, and patient autonomy. [1]

Talking Points

- Medical checklists provide a guide for evidence-based best practices for stay length, diagnostic tests, and procedures for every standard medical scenario to eradicate medical error and unnecessary morbidity and mortality. [5]
- Concise instructions reduce uncertainty and panic in times of dire emergency and prevent overconfident practitioners from missing crucial signs or steps. [5]
- Medical guidelines have continued to become more commonplace in clinical settings. [8]
- Eighty-nine percent of hospitals using medical guidelines improved care and patient outcomes. [6]
- Medical checklists improve safety and health outcomes. [5]

Key Facts

- Medical error causes over 250,000 deaths annually and is America's third leading cause of death. [3]
- One in five Americans have suffered from a medical error. [4]
- The United States leads developed nations in medical errors with a national misdiagnosis rate of 20%. [9, 10]
- The top medical errors consist of failing to execute and follow-up on proper medical tests, using the wrong treatment, prescribing the wrong medication, misdiagnosing or delaying diagnosis, premature discharge, surgical error, unnecessary surgery, foreign bodies left within a patient, missed checks, and missed symptoms. [11]

Next Steps

Congress must implement federal medical checklists and mandate this guideline as an act. Effective immediately, 45 impartial physicians, patients, government officials, insurers, and healthcare administrators would convene every November to formulate these guidelines for the coming calendar year. Congress would randomly select the group annually, ensuring a diverse representation of all stakeholders: physicians, patients, policymakers, payers, hospital administrators, biotechnicians, pharmacists, etcetera. Starting in November to decide on plans to be effective in January allows for adequate time to carefully select terms and ensure hospital administrators receive proper instruction in December to educate

their staff before the new year and post these guidelines publicly on their websites and within their hospitals. To best evaluate whether hospitals are following these guidelines, government agents from the Health and Human Services will send out surveys and conduct spontaneous in-person evaluations. While the policy will start with financial incentivization for adoption, such as a 2% annual tax deduction, it may switch to a legal mandate if findings find both inefficient use and guideline efficacy in the hospitals following suit.

Action Plan Snapshot

To build support for the policy, partnering with health systems already using clinical guidelines successfully is paramount. For example, Dr. Lee's implementation in the Utah Health system is a key model and partner in this process. Harnessing the power, influence, and demonstrated success of these health systems will boost this policy's support, as they demonstrate its efficacy and ability to save healthcare dollars and patient lives. Whether through rallies, lobbying, or social media engagements, these partnerships serve as real examples of the policy's potential to save the American health system. Building trust with the American community, the policy's widespread support can mobilize action, forcing policymakers and politicians to recognize this overwhelming call for further health equity. Everyday Americans, patients, physicians, specialists, and administrators have a significant say on an equitable, systematic approach to healthcare. When the government, payers, patients, specialists, and generalists

formulate these guidelines, they can reach an approach optimizing cost control, expertise, holisticness, and patient autonomy. [1]

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Revising Medicare Policy to Include Diagnostic Biomarker Tests for Alzheimer's Disease

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The Centers for Medicare & Medicaid Services should amend its current policy of not recognizing diagnostic biomarker tests for Alzheimer's Disease to expand Medicare coverage and allow for more affordable treatment options for the disease.

Background

To date, approximately 6.5 million Americans ages 65 and older live with Alzheimer's disease (AD), with a projected growth of cases to 13.8 million by 2060. [1] This startling rise in cases suggests an aging population, barring the necessity of medical breakthroughs to prevent, slow, or cure AD, as well as policies to ensure access to diagnostic tests and treatments. Historically, AD was diagnosed by examining the brain through an autopsy; in modern medicine, AD can be diagnosed through symptomatology and recent utilization of biomarkers. [2] In 2018, the National Institute on Aging and Alzheimer's Association (NIAA) shifted their means of diagnosing AD from symptomatology to biological biomarkers that can be detected in vivo. [3] The utilization of biomarkers as a diagnostic tool to detect β -amyloid deposition, pathologic tau, and neurodegeneration through imaging and biofluids has the potential of detecting AD before onset of symptoms. [4] Biomarker testing can allow for proper diagnosis and treatment plans for those affected by the disease.

Currently, Medicare will only cover certain or limited amounts of diagnostic tests for AD. [2] For a patient to be eligible for Medicare coverage, the patient must present a diagnostic laboratory test ordered by a physician and use the test results to manage their diagnosis. [5] Medicare does not recognize biomarker diagnostic tests for AD as a suitable

and effective measure, citing insufficient evidence of symptoms being managed any better than without the tests. [5]

Policy Idea

Medicare, run by the Centers for Medicare & Medicaid Services (CMS), should amend its current policy to recognize biomarker diagnostic tests as an effective means of diagnosing AD. The NIAA should compile data on why biomarkers are effective diagnostic tools that will help with treatment of AD and propose this information to CMS to amend current policy.

Policy Analysis

Diagnosing AD before its symptoms appear would be beneficial in crafting a care plan. The more popular diagnosis method is a behavioral analysis after the brain has begun to degenerate as opposed to more accurate biomarker tests in the cerebrospinal fluid (CSF). [6] However, asymptomatic individuals may have biological changes in their brain associated with AD up to 20 years before cognitive symptoms appear. [7] These findings suggest that the prodromal phase of AD is crucial in early diagnosis through CSF biomarkers and therapeutic interventions to slow neurodegeneration. [8]

At the Washington University School of Medicine in St. Louis, Dr. Bateman developed a blood test and demonstrated that it is able to

accurately detect early signs of AD. [10] Because this test can detect amyloid plaques associated with AD even amongst those not yet experiencing cognitive decline, it can be extraordinarily beneficial in cutting the time and costs of identifying patients for treatment. [10] Gold standard radioactive PET scans used in identifying AD typically cost an average of \$6,500, while invasive CSF taps to analyze levels of β -amyloid and tau proteins can cost \$1,000; a \$500 blood test detecting AD biomarkers can reduce costs in detection and treatment while replacing more harmful PET scans and CSF taps. [10] The blood test was certified in 2020 under the Clinical Laboratory Improvement Amendments (CLIA) program, run by the Food and Drug Administration, the Centers for Disease Control and Prevention, and CMS. [10] With a projected increase of 7.3 million AD cases by 2060, biomarker tests could be cost-effective and useful for prevention of disease progression.

Talking Points

Biological changes can occur in the brain up to 20 years before cognitive impairment begins, suggesting that prodromal detection of biological markers is crucial in detection and treatment of AD. [7]

- A new blood test detects β -amyloid and tau proteins indicative of AD before symptoms of cognitive decline were evident. [10]

- The diagnosing blood test would cut costs, save time, and replace more harmful and invasive procedures of clinically diagnosing AD. [10]
- Studies have shown that biomarker analysis of AD would be cost-effective in high prevalence areas. [9]

Key Facts

- By 2060, 13.8 million Americans will live with AD. [1]
- In 2018, the NIAA shifted their suggestion of diagnosing AD behaviorally to biologically. [3]
- Detection of β -amyloid deposition, pathologic tau, and neurodegeneration through imaging and biofluids has the potential of detecting AD before onset of symptoms. [4]
- Currently, Medicare covers certain or limited diagnostic tests for AD; CMS does not recognize biomarker diagnostic tests for AD as a suitable and effective measure. [2,5]

Next Steps

To ensure that a policy of increasing Medicare coverage of diagnostic biomarker blood tests for AD is passed, it would be imperative to first develop an economic cost benefit analysis of why this policy would be beneficial for American individuals suffering from AD or at a greater risk for the disease. Because a blood test has been developed that accurately detects distinct AD biomarkers at a lower cost, it isn't necessary to spend more money on research and development for new basic AD diagnostic tests. CMS will not currently recognize biomarker tests as a means of diagnosing AD because there is little evidence of AD symptoms being managed any better than without the tests. [5] To amend this notion and create new policy, it would be important to prove how these tests improve patients' lives and treatment

options to CMS through cost-benefit analysis.

Action Plan Snapshot

In the United Kingdom, it was proven that the cost of diagnostic biomarker tests would be small compared to the costs of missed or inaccurate diagnosis of AD through an economic cost-benefit analysis. [11] The researchers estimated that the annual costs of 100,000 extra amyloid PET and 100,000 extra CSF tests would be £113 million and £48 million respectively and notably higher in the first year of utilization. [11] Although these budgetary costs are high, UK researchers recognized that the usage of diagnostic testing would be more beneficial and ultimately less costly than missed or inaccurate diagnosis of AD in the long run. [11] Because other researchers have identified the benefits of AD diagnostic testing in a foreign country, it would be important for the US, namely the Department of Health and Human Services (HHS) - which houses CMS - to conduct its own cost-benefit analysis research of why AD diagnostic testing should be expanded into Medicare coverage.

The NIAA should compile a team of economists, biological researchers and physicians to craft a literature review of current practices of diagnosing AD, including PET scans, CSF fluid, and blood tests. This literature review would include research on cost-effectiveness of conducting diagnostic tests and provide insight into how to calculate cost-effectiveness of the developed, accurate blood test in detecting AD biomarkers.

To learn whether biomarker diagnostic tests actually improve symptoms and treatment of AD, it would be beneficial to conduct a randomized controlled trial. Because AD is more likely to develop in individuals who have a first degree relative with AD, it is important to include people who would be in the prodromal phase of the disease – their symptoms have not yet appeared. [11]

The study sample would include patients aged 40-88 years old to ensure that the sample includes those who are in the prodromal phase of AD and those who are already experiencing symptoms of AD. The control group would not utilize diagnostic biomarker AD tests and would be given usual care, while the experimental group would be given the diagnostic biomarker AD test and given specialized treatment such as AD drugs. Depending on the results and health outcomes of this study, a report should be written citing whether diagnostic biomarker testing was beneficial and if it helped to manage symptoms of AD. This report should be given to HHS and CMS so that they can consider amending their current policy.

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