

# Peyk



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*Designed by Saeed Galali*



## THE GREAT CORRECTOR

I began writing this editorial on March 29th with a great deal of frustration and anxiety. I got through the first paragraph, where I cursed and gave the heavens and earth a piece of my mind, thinking it would give me some peace of mind. It didn't help. As I sat in my little garden full of spring flowers in bloom and sipping tea, thinking about what I really wanted to say, I noticed a hummingbird enjoying the adventure of her life at its best – darting among the lemon tree blossoms. With the understanding that there are no guarantees in life, including none that I will be around for the next editorial, I was certain that there would be enough write ups, far better than mine, that will go after the heavens and earth. I needed to share my own heart and my greatest wish we really learn something from this tremendously devastating tragedy... and then that we are re-energized to take action.

This pandemic might make you, too, wonder about the next day in your life. In this reflective mood I came upon a Persian translation of a recent write up credited to Bill Gates, but before going to print was notified that no, it was not his writing and at this point the author is unknown. Regardless of the author, I think the write up is worth reading and reflection (see quoted language below, as published in the *Chicago Sun-Times*, April 2, 2020). This situation has impacted the world population in so many ways. Medical, financial, and economic experts predict it will be a long time before some recovery. There has to be a purpose to what is happening to us.

There has always been a purpose behind such major tragedies, and yet mankind seems to never really learn the purpose. Nor have we made the changes that are necessary for us to live in harmony in this universe. I invite each of you to reflect on what purpose you can find in this tragedy. For me, I reflect on equality and brotherhood among mankind. With the recognition of the suffering of those in need, I am even more committed to the protection of the most vulnerable of our human family, especially our children. We are going through an unprecedented era and we have a tremendous opportunity to learn from this insidious virus and, more importantly, our response to it, and make the changes in our society that before may have seemed impossible.

"I'm a strong believer that there is a spiritual purpose behind everything that happens, whether that is what we perceive as being good or being bad.

As I meditate upon this, I want to share with you what I feel the Corona/ Covid-19 virus is really doing to us:

- 1) It is reminding us that we are all equal, regardless of our culture, religion, occupation, financial situation or how famous we are. This disease treats us all equally, perhaps we should to [sic]. If you don't believe me, just ask Tom Hanks.
- 2) It is reminding us that we are all connected and something that affects one person has an effect on another. It is reminding us that the false borders that we have put up have little value as this virus does not need a passport. It is reminding us, by oppressing us for a short time, of those in this world whose whole life is spent in oppression.
- 3) It is reminding us of how precious our health is and how we have moved to neglect it through eating nutrient poor manufactured food and drinking water that is contaminated with chemicals upon chemicals. If we don't look after our health, we will, of course, get sick.
- 4) It is reminding us of the shortness of life and of what is most important for us to do, which is to help each other, especially those who are old or sick. Our purpose is not to buy toilet roll.
- 5) It is reminding us of how materialistic our society has become and how, when in times of difficulty, we remember that it's the essentials that we need (food, water, medicine) as opposed to the luxuries that we sometimes unnecessarily give value to.

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PCC (Persian Cultural Center):

# PCC NEWS

## Persian Cultural Center Annual Meeting and Election

Dear PCC Members,

The Persian Cultural Center is committed to providing a safe and enjoyable experience for the Iranian American community. As you all may know, PCC typically holds its Annual Meeting and election for the Board of Directors in the third week of May. With the growing concerns about the COVID-19 pandemic, we understand that our members and their families' safety and health are the priority. The PCC Board of Directors has therefore decided to postpone this year's Annual Meeting and election to a later date, most likely around the end of September. We are hoping by then, we will be able to maintain a regular assembly for discussions around PCC plans and conduct a question and answer session with the candidates.

We are still accepting candidates for this year's election, so feel free to contact the PCC office with any questions. We'd like to offer our sincere gratitude to all of our PCC members for your continued support.

Stay safe and healthy,  
Persian Cultural Center Board of Directors

### COVID-19 Response

Here at PCC we are blessed to be able to reach out to those in need. Members of our community are facing many challenges with layoffs and furloughs due to COVID-19. We are seeing an increased need to reach out to these individuals and families more than ever. If you or someone you know is in need in anyway, please reach out to us, we mean that sincerely and wholeheartedly. For those who are able and willing to volunteer, your help is more than welcome during these times. Donations of any size are greatly appreciated, since the work of many is greater than one.

**WE APPRECIATE YOUR SUPPORT.**

### PCC Youth Committee

The youth group had their last Family fun night in February. It was a full house with a few new families. They have collected and donated two boxes of food to the SD Food Bank (Thanks to those who donated items). Unfortunately due to the COVID -19 they had not been able to visit the nursing home which they visited several times before during the year. The PCC Youth Committee is offering free remote tutoring to those who need help. The subjects are math, history, English, chemistry, and more. Please contact Fariba Babakhani, PCC at (858) 552-9355 or email [pcc@ppcsd.org](mailto:pcc@ppcsd.org) for more information.



### PCC's Board Meetings

Persian Cultural Center's board of directors holds its meetings every second Wednesday of the month. The March meetings took place at IAC. In compliance with social distancing guidelines, the April meeting was held online.

### On the Steps at SDMA - March 6, 2020

On March 6, 2020, The San Diego Museum of Art held a celebration in honor of Persian arts and culture on the steps of the museum at Balboa Park. The event consisted of: presentation of the works of local Persian artists; live music performed by Kourosh Taghavi and the Dornob group with Farhad Bahrami; dance performances by students of the Iranian School of San Diego; and a screening of the movie, "Children of Heaven."

### PCC events - March, April and May 2020

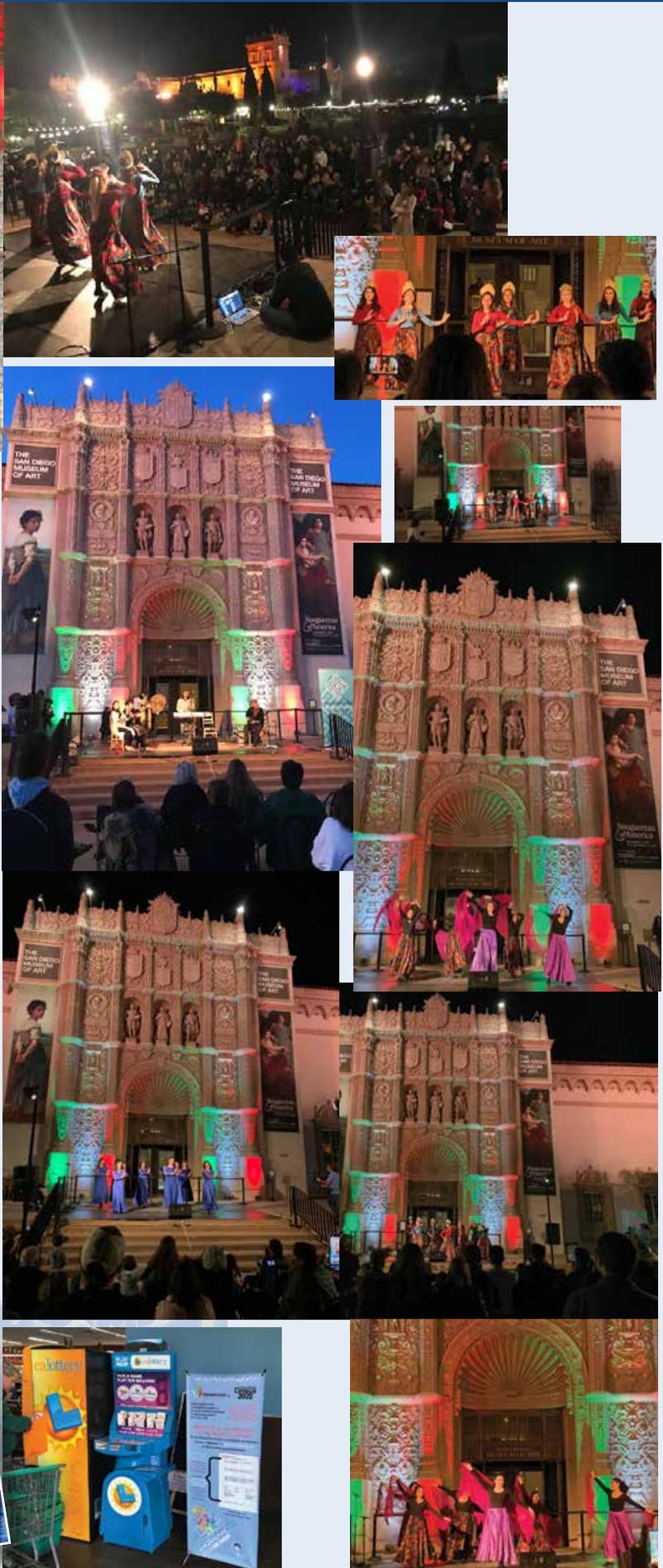
The Covid-19 outbreak and for the safety and health of the community, all PCC March, April and May events including all Nowruz events, Jong e Farhangi, Poetry night and Movie night were cancelled.

### Census 2020

PCC has been very active in reaching out to, and encouraging, the Iranian American community to participate in the Census, 2020. For this purpose, we have been using Peyk magazine, weekly mass emails, and social media to reach everyone in the community. PCC has also installed information banners in Balboa International Market, Atlas Market and North Park Produce Market.



Continued from page 3



6) It is reminding us of how important our family and home life is and how much we have neglected this. It is forcing us back into our houses so we can rebuild them into our home and to strengthen our family unit.

7) It is reminding us that our true work is not our job. That is what we do, not what we were created to do. Our true work is to look after each other, to protect each other and to be of benefit to one another.

8) It is reminding us to keep our egos in check. It is reminding us that no matter how great we think we are or how great others think we are, a virus can bring our world to a standstill.

9) It is reminding us that the power of freewill is in our hands. We can choose to cooperate and help each other, to share, to give, to help and to support each other or we can choose to be selfish, to hoard, to look after only our self. Indeed, it is difficulties that bring out our true colors.

10) It is reminding us that we can be patient, or we can panic. We can either understand that this type of situation has happened many times before in history and will pass, or we can panic and see it as the end of the world and, consequently, cause ourselves more harm than good.

11) It is reminding us that this can either be an end or a new beginning. This can be a time of reflection and understanding, where we learn from our mistakes, or it can be the start of a cycle which will continue until we finally learn the lesson we are meant to.

12) It is reminding us that this Earth is sick. It is reminding us that we need to look at the rate of deforestation just as urgently as we look at the speed at which toilet rolls are disappearing off of shelves. We are sick because our home is sick.

13) It is reminding us that after every difficulty, there is always ease. Life is cyclical, and this is just a phase in this great cycle. We do not need to panic; this too shall pass.

14) Whereas many see the Corona/ Covid-19 virus as a great disaster, I prefer to see it as a great corrector. It is sent to remind us of the important lessons that we seem to have forgotten, and it is up to us if we will learn them or not.”

*On behalf of our community and our Peyk Team, I wanted to take this opportunity to thank the real heroes: Doctors, nurses, medical teams, grocery store workers, cleaning staff, law enforcement, and the many others involved in giving their time so bravely to save us. Thank you, Thank you, and a thousand more Thanks!*

# Hard Times Call for Radical Empathy



The past four years have been a particularly volatile period in our world. We have witnessed the rise of ethno-nationalist leaders from Brazil to China, from India to Hungary, from the U.S. to the UK. These right-wing leaders are as unoriginal as they are xenophobic; their rhetorical toolkit is full of tired homophobic, racist, and sexist tropes, misused and abused by their predecessors many times in history. Bolsonaro has waged a colonial-style war on Brazil's indigenous population and their ancestral ecology. Modi is stripping vulnerable groups in India's Muslim population of their citizenship rights. Xi Jinping is subjecting China's Muslim population to every form of state abuse imaginable. And Trump's norm-shattering presidency has been a single ongoing assault on the legal rights of vulnerable Central Americans to seek asylum. These so-called leaders have exploited existing racial fault lines in our societies, tapped into valid economic anxieties and inequality, and framed themselves as the only political actor with the know-how and resolve to fix longstanding social ills. Let's call them the "Axis of Evil," recalling a phrase from the garbage bin of history.

The formation of this global "Axis of Evil" is by no means an exoneration of other political actors, including those who lean center or left. The left-wing president of Mexico, Andrés Manuel López Obrador, is a case in point; he was recently seen enjoying tacos with the mother of a drug lord while his country has been grieving the loss of innocent lives as a result of the U.S.-backed drug war. These leaders rose to power, among many other reasons, because they acknowledged that the status quo was no longer sustainable. In the U.S., millions of Americans who voted for Trump and Senator Sanders agreed with this sentiment. No matter how you choose to articulate the problems of the status quo—and I frame them as the unmistakable failures of neoliberal capitalism—these problems are no longer deniable regardless of your political disposition. Put simply, business done as usual has been deadly to millions of people who inhabit this earth. In January, another entity rose on the global stage that proved just as toxic and infectious as this "Axis of Evil:" COVID-19.

It mercilessly spread and left Trump in its wake. COVID-19 has exposed Trump's fatal incompetence, his worship of the capital market, his contempt for expert opinion, his thuggish attitude toward serious journalists, and above all, his profound disregard for human life. The past three months chronicle his confused efforts to avoid taking responsibility: "it's a hoax by the Democrats and the media, we got it under control, it will soon disappear, Ok, we should do social distancing, but we should open by Easter, maybe Easter is too early, but we should still get back to work soon." I'd like to know: where are those now who were saying for years that the government is part

of the problem, not the solution? Can you get tested at Amazon or Boeing? Where are those who said we need a businessman to run the country and that Washington insiders are all bad? We're in the middle of a global pandemic when we need scientific facts the most; instead, we keep getting Trumpian sales pitches: "private companies are making beautiful ventilators, the tests are beautiful, more perfect than my transcript" (his actual words!). Can anyone be entirely sure that he won't one day sell "tremendously beautiful graves" on national television? Never sure with Trump.

Confusion is the state of mind of a neoliberal capitalist system that has been selling the mythologized narrative of the "free market" with money falsely posing as a neutral mediator. This is the fiction upon which every administration since Reagan has justified reducing the ability of the government to operate its core functions and ceding control to the private sector whose bottom line is capital gain, pure and simple. During this global crisis, even the most clear-minded thinkers among us can feel overwhelmed, disoriented, and depressed, let alone this writer. I dreaded the idea of writing this article for so long precisely because I have not had the time to process my overwhelmingly disparate range of emotions: anger, sadness, fear, hope, relief. Instead of pretending that my thoughts need to cohere into a thematic whole, I will present to you my critical reflections, each corresponding with an emotion. These personal reflections ultimately speak to the state of our planet in the face of a shared global threat.

## Anger

I feel angry because this global pandemic was avoidable in many ways. China was aware of the health problems posed by the wet markets from which COVID-19 is thought to have arisen. Once COVID-19 broke out, the Chinese government silenced the doctor who tried to inform the world of the outbreak. This was a breathtakingly irresponsible and criminal act, now that its global implications are better understood. The Chinese government is responsible, in no small part, for this global pandemic. But the U.S. government has spoken from both sides of its mouth for years with regards to China. We are addicted to the cheap labor China offers the U.S. consumerist market, but we also complain about currency manipulations and theft of intellectual property. This hypocrisy was evident in the U.S. response to COVID-19 as well in the way Trump called it the "Chinese virus"—a racist phrase no doubt—and avoided taking responsibility for the late start and lack of preparation that marked his administration's response. The Chinese government did not decide to ignore a 69-page document that the Obama administration handed down to Trump's administration with detailed information on how to prepare for the next global pandemic. Trump's cronies did. This virus does not have a single birthplace for the ground condition that gave rise to economic disparity is a global problem. Poverty in many parts of our world is a death sentence and many governments around the world, from the U.S. to China, have utterly failed their people.

## Sadness

I have felt utterly heartbroken for so many people around me: small business owners, their laid-off workers, senior citizens locked inside nursing homes without their families, thousands of

Americans close to retirement whose 401(k) accounts have been just slashed by the volatility of the market, and employees of feudal-minded corporations like Amazon who are forced to keep working in unsafe conditions to provide for their families. Just search for the Op-Ed of a former Amazon employee named Chris Smalls who was fired after he demanded that Amazon provide employees with weakened immune systems paid sick leave. Meanwhile, Jeff Bezos just spent \$165 million on a new Beverly Hills mansion and paid zero dollars in taxes in 2018 thanks to the tax laws that Republicans passed in 2017. I feel sad because for years society bought into the fiction that CEOs like Bezos deserve to earn astronomical amounts of money because they create thousands of jobs and help turn the wheel of our economy. Thanks to this global pandemic, we've realized that the world does not need a Jeff Bezos when one's life is on the line. The world needs nurses, doctors, the janitorial staff of hospitals, grocery store employees, farmers (many of whom are undocumented), scientists, and many other underappreciated professionals. I have also felt profoundly sad for my countrymen who were let down by their corrupt leaders. 2020 has been a catastrophic year for them so far with no end in sight. The implications of the Iranian government's disastrously slow and botched response to COVID-19 may pose an existential threat to the Islamic Republic the likes of which they have not yet faced.

## Fear

I fear for the well-being of my loved ones, first and foremost. My heart is also equally with refugees and asylum-seekers who are trapped in terrifying proximity to different sources of danger from which they need to escape. The global community has come together to cooperate in the face of this shared threat, but ultimately it has acted along national lines by shutting down their political borders. What happens when refugees and asylum seekers' access to legal and human resources is cut off? What happens when the media is saturated with the coverage of an unfolding crisis and a racist administration takes advantage of it by deporting thousands of Central American asylum seekers without due process to their countries of origin? And these precious souls will take with them a pandemic for which their medical system has no response. There is also worrying news that *maras* or gangs in places like San Salvador are violently reinforcing the stay-home order because their main source of income—extortion—is now under threat. I fear that other world leaders will follow the example of Hungary's Viktor Orbán in adopting authoritative measures to grab powers not given to them by the constitution. I fear that the Democratic party is too inept to secure the 2020 elections, benefiting their rivals who operate through minority representation. Only time will tell how valid these fears are, and I sincerely hope to be proven wrong on all accounts.

## Relief

For decades, climate scientists had warned us of the dangerous effects of over-reliance on fossil fuel. We have faced, in recent years alone, many of those effects: extreme weather ranging from record-breaking heat to more regularly occurring hurricanes, food insecurity, and the destruction of endangered species and ecologies. Progressive

politicians have tried to amplify those scientific findings by presenting imaginative, if flawed, legislative solutions to the problems posed by the climate crisis. The Green New Deal is one such example. Many, mostly right-wing pundits of course, have attacked the New Green Deal in bad faith, instead of engaging its flaws and seriously debating its practical merits. As our entire human economy is undergoing unprecedented changes, many of its proposals seem more politically appealing and urgent than ever. For instance, why on earth is the U.S. government still subsidizing oil companies that have broken records in revenue in recent years? Seeing the ways in which all non-essential activities have stopped, one wonders: was it really necessary for different companies to send their employees across the continental U.S. for a meeting that can take place on Zoom or Skype? NASA has already reported a drastic drop in carbon emissions, which begs the question—why do we not try to alter our lifestyles to live in greater harmony with the earth that sustains us? For those reasons, I have felt relief since the world has come to a halt and our oceans, skies, and forests have begun to breathe. Besides COVID-19, nothing could have stopped a capitalist market designed to march on at the expense of those who make its wheels turn, even as they end up being crushed by it.

## Hope

Every tragedy offers hope only if we seize the moment to make things right. As an educator, I have seen so many acts of thoughtfulness and generosity in the past three weeks. Some companies are offering college students free high-speed internet for the duration of the spring semester (22% of Americans do not have access to the Internet at home). Many major academic databases and libraries around the world have begun to offer free access to their treasure trove of scholarly articles and books. Many universities have made available their courses on academic subjects ranging from computer programming to Shakespearean plays to learners around the globe free of charge. Many students with disabilities are relieved to be able to finally take courses from the comfort of their homes. One of the most pressing questions at the heart of capitalism is the grossly unequal ways in which information and resources are distributed. These acts of generosity, as heartwarming and urgently needed as they are, must fundamentally change something in the thinking of people in charge of financial and educational institutions. They must now realize, one hopes, that the older ways of walling up information inside a fortress that only money and privilege can open will contribute further to the growing wealth gap and economic disparity that will deliver another global pandemic in a few years' time. Now that we have seen a glimpse of what a new world can look like, we must fight the idea of business as usual from rearing its ugly head the moment this global pandemic is largely contained. Let's not forget what is at stake: democracy is an aspirational form of government fully functional only when information and resources are distributed equally. In the absence of access to information and material possession, there only exists a shadow of democracy. And such dangerous fiction will deliver more political victories to leaders who constitute the "Axis of Evil."

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# NOTHING LIKE A PANDEMIC TO MAKE THE CASE FOR UNIVERSAL HEALTHCARE IN THE U.S.

By Shaghayegh Hanson

The U.S. is the only developed country in the world without a universal health care system. While no country's healthcare system has been iron-clad against the COVID-19 pandemic, it is becoming increasingly clear that countries similarly large and/or as rich as the U.S. have been better prepared in their mitigation responses because of their universal healthcare systems. Whether voters and politicians, who often harbor misconceptions about a universal system, learn any lessons from this remains to be seen.

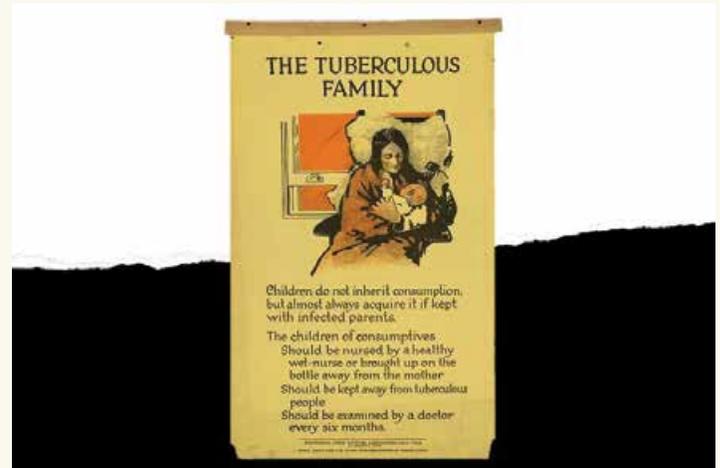
To be clear, no one is suggesting that universal healthcare is perfect. For example, in 2018, thousands of people demonstrated in London against the lack of funding for the U.K.'s National Health Service (NHS). They held placards that said things like, "Keep your hands off our NHS," and "Saving lives costs money, Saving money costs lives." However, Donald Trump seized the moment for his own political purpose, tweeting: "The Democrats are pushing for Universal HealthCare while thousands of people are marching in the UK because their U system is going broke and not working. Dems want to greatly raise taxes for really bad and non-personal medical care. No thanks!"<sup>1</sup>

The swift response to Trump from the ruling Conservative party in the U.K. reflected what all other developed nations in the world know to be true; the Health Secretary wrote: "I may disagree with claims made on that march but not ONE of them wants to live in a system where 28m people have no cover. NHS may have challenges but I'm proud to be from the country that invented universal coverage - where all get care no matter the size of their bank balance." Since then, the number of uninsured people in the U.S. has risen to approximately 30 million. Another 40 million are underinsured.

Moreover, far from "not working" and being "non-personal," the NHS has been successfully providing quality healthcare for over 70 years, which is why citizens and politicians of every background are highly protective and proud of the NHS. They willingly pay the taxes required for this service because they understand that, in the long run, it saves them from paying thousands more to insurance companies who may or may not cover them when push comes to shove. Unlike in the U.S., in the U.K., and other countries with a universal healthcare system, no one is afraid of becoming bankrupt in the event of a catastrophic medical emergency, such as being struck by a pandemic.

Just look at what Boris Johnson, the current Conservative party Prime Minister of the U.K. had to say after he was treated for COVID-19 and released from an NHS hospital: "The NHS has saved my life. Our NHS is the beating heart of this country. It is the best of this country. It is unconquerable. It is powered by

1 <https://www.npr.org/sections/parallels/2018/03/07/591128836/u-k-hospitals-are-overburdened-but-the-british-love-their-universal-health-care>



love.”<sup>2</sup> By this standard, he would be considered a revolutionary in the U.S.

When the virus initially hit the U.S., there were reports of doctors and emergency rooms turning away uninsured and/or underinsured citizens with symptoms. Tens of millions of citizens avoided medical attention, including testing and treatment, for fear of taking on the financial burden. These people went undetected. They became spreaders to all sections of society regardless of income or race.

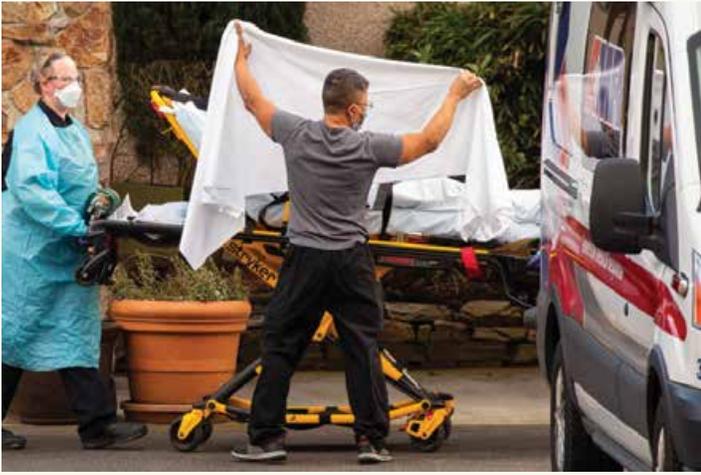
America's emergency rooms were already dealing with critical cases that could have been prevented if those patients had access to affordable or free care earlier. According to a Vox news article, "We know Americans delay care as a result of . . . cost barriers: in 2019, 33 percent of Americans said they put off treatment for a medical condition because of the cost; 25 percent said they postponed care for a serious condition. A 2018 study found that even women with breast cancer — a life-threatening diagnosis — would delay care because of the high deductibles on their insurance plan, even for basic services like imaging."<sup>3</sup> It is hardly surprising that, under these circumstances, a pandemic would compound and highlight these major inequities and inefficiencies in the U.S.'s patchy health care system. One need only look at the preliminary statistics from Michigan, Virginia, Illinois, Minnesota, North Carolina, Arkansas and Louisiana, to see how the virus is disproportionately affecting the African-American community which has long suffered economic insecurity.<sup>4</sup> Many in these low-income communities are dealt a triple-layered blow; they are more vulnerable due to untreated, long-term underlying conditions, they often have essential-service jobs that expose them to the virus on a daily basis, and they are less able to afford testing and treatment.

Trump initially announced that testing for the coronavirus would be

2 [https://www.youtube.com/watch?v=wkBbap\\_SIUw](https://www.youtube.com/watch?v=wkBbap_SIUw)

3 <https://www.vox.com/policy-and-politics/2020/3/16/21173766/coronavirus-covid-19-us-cases-health-care-system>

4 <https://abcnews.go.com/Politics/coronavirus-disproportionately-killing-black-community-experts/story?id=70011986>



free but did not guarantee free treatment. Now, the administration says it plans to use money set aside in the \$2 trillion stimulus package, to pay hospitals for treatment of uninsured coronavirus patients. But this money was intended to fund the immediate frontline needs of hospitals. How the funding will actually be allotted in practice in the coming weeks and months is far from certain, and subject to the whims of a president who believes he has total decision-making authority over anything he chooses, and who has fired the Inspector General in charge of overseeing the disbursements of the money. As of the writing of this article, an uninsured San Diego woman, who was tested for the virus after showing symptoms, received a bill for \$897.60 from Scripps Memorial Hospital in La Jolla for the service. She thought, as did many, that the tests were to be free.<sup>5</sup> She has since negotiated a reduction of her bill to \$700 and is on a payment plan. Apparently, what Trump meant by “free” was that those with insurance would be relieved of their co-payment for testing. Where does that leave the 30 million who have no insurance, people, who arguably, need the monetary assistance even more than those who already have some form of insurance? Why, after all these weeks of strategizing against the spread of this pandemic, is there still a possibility that millions will not be able to afford testing? As the Financial Times put it: “To treat testing as an afterthought risks allowing the coronavirus epidemic to become even more serious than it already is. Effective diagnosis is the bedrock of an effective medical response. Just as much as vaccine development, testing should be considered a vital public good.”<sup>6</sup> In his latest briefing, Governor Cuomo of New York, stated that the “unvarnished truth” was they could not do enough testing which would be the key to reopening the economy.

In the meantime, at the time of this writing, the United States has overtaken Italy as the country with the highest number of coronavirus deaths, that is, 26,334 people (as of this writing). We have 618,893 reported cases and many unreported. 6.6 million people have filed for unemployment benefits. Hospitals and their staff are begging for essential protective gear and other supplies. States are outbidding each other for ventilators. New York Governor Andrew Cuomo has said, “It’s like being on eBay, with

50 other states bidding on a ventilator.”<sup>7</sup> Instead of centralizing the purchase of supplies and then distributing according to need, the federal government has joined the auction, with FEMA successfully outbidding some states. The price of ventilators has skyrocketed.

We are all now pinning our hopes on a vaccine against coronavirus, but the Secretary of Health and Human Services, Alex Azar, cannot promise such a vaccine will be affordable to all. Of course, as long as private payment is concerned, it most certainly will not be affordable for some. And with the economy in such bad shape and millions unemployed, the number of those uninsured and underinsured will surely rise, exacerbating the current crisis.

A recent article in Slate magazine reminded readers that when germ theory was first acknowledged in the U.S. in the late-nineteenth and early twentieth centuries, Progressive Era reformers tried to “convince elites to care more about the health of the poor.”<sup>8</sup> The New York City health commissioner at the time wrote that “[d]isease binds the human race together as with an unbreakable chain.” The novel coronavirus underscores the truth of this statement. The U.S. is learning, the hard way, that universal healthcare is not just a “moral” proposition targeting the poorest of us, but a tool of sound governance that protects all of us.

Sources:

- <https://www.npr.org/sections/parallels/2018/03/07/591128836/u-k-hospitals-are-overburdened-but-the-british-love-their-universal-health-care>
- <https://www.inquirer.com/health/coronavirus/coronavirus-covid19-universal-health-care-coverage-20200310.html>
- <https://www.latimes.com/opinion/story/2020-03-05/op-ed-time-to-ramp-up-medicare-to-pay-for-universal-coronavirus-care>
- <https://slate.com/culture/2020/03/coronavirus-medicare-for-all-history-pandemic-social-safety-net.html>
- <https://www.theguardian.com/commentisfree/2020/mar/21/medicare-for-all-coronavirus-covid-19-single-payer>
- <https://www.vox.com/policy-and-politics/2020/3/16/21173766/coronavirus-covid-19-us-cases-health-care-system>
- <https://www.marketplace.org/2020/04/01/ventilator-bidding-war-covid19/>
- <https://www.cdc.gov/nchs/fastats/health-insurance.htm>
- <https://www.nytimes.com/2020/04/03/upshot/trump-hospitals-coronavirus.html>
- <https://www.bbc.com/news/world-us-canada-52245690>

5 <https://www.nbcsandiego.com/news/local/coronavirus-test-comes-with-hefty-price-tag-for-uninsured-san-diego-woman/2305782/>

6 <https://www.ft.com/content/60633b9a-621d-11ea-b3f3-fe4680ea68b5>

7 <https://www.marketplace.org/2020/04/01/ventilator-bidding-war-covid19/>

8 <https://slate.com/culture/2020/03/coronavirus-medicare-for-all-history-pandemic-social-safety-net.html>

# LIVING LEANER AND LIGHTER:

## Is there a positive side to a calamity like COVID-19?

The new coronavirus outbreak has been an eye-opening and life-changing event. Social distancing has affected our family lives, our travels, and of course, our financial situations. However, with any unexpected event and calamity—as disruptive as it might be—there is a positive side and a lesson to be learned. In this case, there is an opportunity to re-evaluate our lifestyle.

Hopefully our current worries for our health and our bank account will translate to wiser and more logical behavior when it comes to our shopping habits and our insatiable appetite for more material objects. Perhaps this is the time to redirect our thoughts toward a *lighter* and *leaner* lifestyle and to differentiate between what we need and what we want.

As human beings, we all have a certain degree of desire for more possessions. This is particularly true with the American lifestyle from the baby boomer generation forward. These habits are associated with pride in ownership, power, and even a false sense of happiness.

According to U.S. Census reports, while the average family size has dropped from 3.67 members in 1940 to 2.6 members in 2010, the average single-family home size has exploded from about 1,100 square feet to 2,392 square feet. The number of second or vacation homes increased from 739,594 in 1940 to 3.6 million in 2000. And, as the average house size expanded, Americans have been eager to fill that space with electronic devices, appliances, furniture, clothes, and other personal possessions.

All of this begs the question, do more material possessions and/or property equate to greater happiness? Here is the finding:

“One out of twenty people makes an adjusted gross income of at least \$161,579 per year, and one in one hundred makes \$369,691 or more. Are these people truly happy as a result of their earnings? Only up to a point, argue social scientists as reported by PNAS. According to the Legatum Institute’s Prosperity Index, Norway is the world’s happiest country, while the U.S., with a higher per capita income and much greater economy, ranks 11th.” (Source: *Money Crasher*.)

This is sound evidence that more wealth and luxury does not result in happiness. In fact, having too much often results in physical and mental stress, especially if we are faced with a sudden life-changing event and are forced into an immediate lifestyle transition.

Elana Miller, a prominent psychologist, points out: “Having too much is hazardous to a healthy way of life. The more you own, the more time and energy you spend keeping track of it, and the more you worry about breaking or losing what you worked so hard to get. It keeps you locked down and forces you to work when you do not want to.”

So, what can we gain as we navigate this new terrain that is the novel coronavirus? We gain the understanding that narrowing our scope of possessions and material gain can, in fact, contribute to a healthier and happier lifestyle. If there were ever a time to exchange material possessions for more mental and physical health, that time is now. We are living in a moment, if not *the* moment, to expand our wellness by decreasing those things we truly don’t need.

Zohreh Rastegar  
Washington, DC  
[www.lifesimplifiedpro.com](http://www.lifesimplifiedpro.com)



**SDGE**

Public Announcement

Sempra Energy utility™

## SDG&E INITIATIVES TO HELP CUSTOMERS DURING COVID-19

In these unprecedented and challenging times, we hope you and your family are healthy and safe. We are all in this together and our hearts go out to all those directly affected by the virus, as well as their families, friends and coworkers.

We understand that with the coronavirus outbreak comes hardships such as financial losses and changes to people’s livelihoods. To ease the burden on customers, SDG&E is **suspending service disconnections for nonpayment** until further notice. If you are struggling to pay your SDG&E bill, please call SDG&E’s Customer Contact Center at 1.800.411.7343 and they can help you make payment arrangements that work for you. SDG&E is temporarily **waiving late payment fees** for business customers whose finances have been affected by the coronavirus. The company does not charge residential customers late payment fees.

SDG&E has decided to **postpone all non-critical planned outages** and will only proceed with outages related to emergencies, public safety and wildfire mitigation. It’s a stressful time and SDG&E is doing everything they can to minimize customer disruptions.

SDG&E is proud to serve this community and provide support in any way they can. That’s why they’ve partnered with other San Diego leaders to launch the COVID-19 Community Response Fund. This fund will help support local nonprofit groups that help the needy with food, rent and utility bill assistance. **SDG&E donated \$1 million** to support programs and help organizations address the growing effects of the coronavirus outbreak. If you’d like to learn more about what SDG&E is doing to help during this pandemic, or to get the latest updates, visit [sdge.com/coronavirus](http://sdge.com/coronavirus).



## An Interview with Senator Toni Atkins, California's Senate President pro Tempore, About Census 2020 and the Iranian American Community

Ali Sadr- Senator Atkins, on behalf of members of the Persian Cultural Center; our readers, and the Iranian American community at large, I would like to express my sincere appreciation for your participation in this interview. This interview is about Census 2020 and obstacles preventing minorities like us from actively and fully participating. Please allow me to give you a little background about our community and what I think those obstacles are. I would then ask you some questions that I have received from some of our readers. We would like to see—as one of the highest-ranking officials in the State of California—what you would suggest in gaining people's trust to have a complete count of the Iranian American community.

The Iranian American community is a relatively young ethnic community in the U.S. A good majority of us have moved to the U.S. in the past 40 years and chose this country to be our homeland. Our level of education and economic participation is among the highest in the country. Yet when it comes to the census, there is mistrust. According to the federal classifications, Iranians are considered “white.” However, practically, government agencies and society at large do not consider people with Iranian descent “white.” We are being scrutinized and discriminated against at the border, in TSA lines, in workplaces, etc. We are considered a minority without benefiting from minority rights. We understand that this is mainly due to the behavior of the current government of Iran. But that government is one of the main reasons we are here. There are estimates of between one to two million Iranian Americans in the U.S. No one knows the exact number because people are reluctant to indicate their real origin when participating in the census. They are afraid that, like Japanese Americans during World War II, they will be rounded up and put in a concentration camp. Unfortunately, the policies and the behavior of the current administration haven't been helpful.

With this background, here is my first question:

- Is the census safe? If I answer the census and give my race or nationality, could I be the subject of scrutiny from local, state, and other federal entities?

**Sen. Toni Atkins:** Yes, and you will not be subject to any scrutiny from any other government authorities. Responding to the 2020 Census is safe and secure, and individual responses are confidential and protected by law. It's a short questionnaire that asks about who lives in your household, how they are related to one another, and the age, race, and ethnicity of each person. The U.S. Census Bureau does not share your information with any other local, state, or federal entities. It does not ask for financial information or your Social Security number, and there are no citizenship questions on the 2020 Census.

Ali Sadr- Even if, as an Iranian American, I want to indicate my actual race and origin, none of the boxes on the census form represents me. What efforts are being done on state and national levels to finally include a category for “Iranian” or even something close like Middle Eastern and North African descent?

**Sen. Toni Atkins:** The Count Me 2020 Coalition, of which I am a member, is a non-partisan group of more than 150 civic and community-based organizations from San Diego and Imperial Counties. Member organizations are committed to ensuring a complete and accurate count of the 14 populations identified by the

State of California as “hard-to-count” – this includes the Middle Eastern/North African population. When responding to the race/ethnicity questions, we are encouraging anyone of Middle Eastern/North African descent to mark “some other race,” then write in your family's origin (for example, Iranian, Lebanese, Palestinian, Egyptian, etc.). If you identify with any other race included on the form, please mark that as well. Above all, though, remember to write in where you or your family are from. This will send a clear message to the federal government that they need to expand their categories to explicitly include Middle Eastern and North African nationalities.

Ali Sadr- Persian Cultural Center and many other Iranian groups suggest that members of the community mark any of the race categories in Question 9 of the census form, but write in “Iranian” in the space provided. Is the census going to count and report these?

**Sen. Toni Atkins:** Yes. The Census will count these answers in the “other” category.

Thank you so very much for your time. It was a great honor for me to have this conversation with you.

### About Senator Toni Atkins

Toni G. Atkins was born and raised in southwestern Virginia, the daughter of a miner and a seamstress, and graduated with a bachelor's degree in political science from Emory & Henry College in Emory, Va.

In 1985, she moved across the country to San Diego, California, to help care for her sister's young son while her sister served in the U.S. Navy. In San Diego, before becoming involved in public service, she worked as director of clinic services at Womancare Health Center.

Atkins served as an aide to San Diego City Councilmember and LGBT trailblazer Christine Kehoe, and, in 2000, was elected to replace Kehoe as the council's District 3 representative. During her eight-year tenure, Atkins provided steady leadership as interim Mayor of San Diego amid a challenging and tumultuous time at City Hall.

“Throughout her career, Atkins has been a champion for affordable housing, the natural environment, healthcare, veterans, women, and the LGBTQ community.”

Elected by voters to the state Assembly in 2010, Atkins served there for six years. In 2014, her colleagues selected her to be the Speaker of the Assembly – she became the first San Diegan and the first lesbian to hold the position. Atkins counts a major \$7.5-billion water bond and creation of the state's first Earned Income Tax Credit among her proudest accomplishments.

In 2016, Atkins was elected to represent the 39<sup>th</sup> District in the state Senate and was appointed to the prestigious Rules Committee, in addition to the committees on Transportation and Housing, Health, Labor and Industrial Relations, and Natural Resources and Water. Among the bills she got passed and signed was SB 2, which created a permanent source of funding for affordable housing, a signature piece of legislation she had worked on for seven years.

In January 2018, after just one year in the Senate, she was elected by her colleagues to be the next Senate President pro Tempore. In March 2018, she was sworn in, becoming the first woman and the first openly LGBTQ person to lead the Legislature's upper house.

# An Interview with **Michele Silverthorne**, A leading outreach and education authority for San Diego and Imperial Counties, regarding the Iranian American community and the Census 2020

Ali Sadr- It is a great opportunity for me discuss with you some of our concerns regarding the Census 2020. The Iranian American community is one of the “hard to count” communities in the US. It appears that there are at least two issues involved here. In one hand there is a mistrust with federal government that we identify ourselves as Iranian American. In another hand, since there has never been a place on the forms for us to identify ourselves as Iranian, there is no clear and realistic count of us. So, one cannot be certain the we are really “hard to count”. The questions I am presenting here are questions and concerns brought to my attention from the members of the community. I had the opportunity to discuss these questions with Senator Toni Atkins. However, I thought presenting some of those question with you will bring a hands on and a complementary responses.

First question: *Is the census safe? If I answer the Census and give my race or nationality, could I be the subject of scrutiny from local, state and other Federal entities?*

**Michele Silverthorn:** The Census data is safe and cannot be shared with any other agency, as mentioned, but it also cannot be shared with law enforcement or a landlord. In general, we share more personal information when we make an online purchase than we will by taking the 2020 Census. The information collected is used to produce statistical data. The Census Bureau cannot share any of your information that could identify you or anyone in your household.

Ali Sadr- *Even if as an Iranian American I want to indicate my actual race and origin, none of the boxes in the census form represents me. What efforts are being done on state and national levels to finally include a category for Iranian or even something close like Middle Eastern and North African descent?*

**Michele Silverthorn:** For the 2020 Census, write in your race and origin if the options provided do not apply. There are many campaigns across the nation encouraging each of us to respond accurately. One of these is the **Write In Iranian campaign**. This campaign was launched by the **Public Affairs Alliance of Iranian Americans (PAAIA)** and **Pars Equality Center** to ensure an accurate count of the Iranian American community.

Ali Sadr- Persian Cultural Center is a member of **Iranianscount** coalition too that suggest that members of the community mark any of the race categories in Question 9 of the census form but write in “**Iranian**” in the space provided. Is the census going to count and report these?

**Michele Silverthorn:** Historically, this is a population that has been undercounted, and this is the first time the U.S. Census Bureau is encouraging respondents to write out their national origin underneath their chosen racial category.

Ali Sadr- *In this pandemic, should we care about the census?*

**Michele Silverthorn:** Yes, absolutely. The COVID-19 health



pandemic is a resounding reminder that we have to ensure, through participation in the 2020 Census, that our communities have the federal, state, and local funding it needs to meet San Diego County health needs and concerns. Filling out the census helps make the Middle Eastern and North African community more visible and helps us be more prepared for future public health emergencies.

Ali Sadr- *How can individuals get involved with the Census and get people to participate?*

**Michele Silverthorn:** This year, for the first time ever, you can fill out the Census for your household online with your tablet, laptop or smartphone. You can respond online or by phone in one of 13 languages and utilize a language guide in 59 other languages, large print and Braille. If you have questions prior to completing the 2020 Census, you can go to [CountMe2020.org](https://CountMe2020.org) to see a list of toll-free phone numbers and a list of San Diego community based organizations that offer education and support. Our community-based organizations cover 63 languages and you likely can speak with someone in a language that you are most comfortable. By now, most households will have received three mailers to invite them to participate in the 2020 Census. Starting this week, if you have not yet responded online or by phone, a questionnaire will arrive in the mail. When you complete the Census include everyone who was living in your home on April 1. Please be sure to count babies and children (all ages), close or extended family members, people who are not related to you, and people staying with you without a permanent place to live. Learn more about who to count and any special circumstances here: <https://2020census.gov/en/who-to-count.html>

To learn more about the Write in Iranian campaign and download a toolkit go to <https://paaia.org/census/individuals>

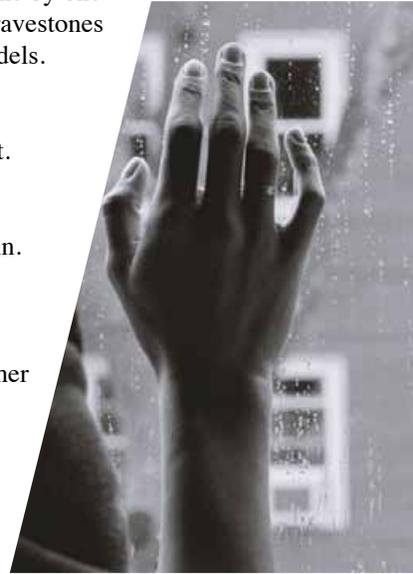
If you'd like to get involved with the Count Me 2020 Coalition, and get more people to participate in the 2020 Census, contact one of our partner organizations to learn more about their outreach work at <https://www.countme2020.org/coalition-partner-portal/>

# Waiting for My Turn

By Majid Naficy

After two weeks of staying at home  
I go at dawn to the street again  
For stair-climbing.  
The stairway has been boarded up.  
There is no one on the street  
And only the wind talks with leaves.  
I remember that year when in Tehran  
My comrades were shot one by one  
And buried without any gravestones  
In the Cemetery of the Infidels.  
First was Sadeq,  
Who had a charming smile.  
I visited his grave with Ezzat.  
Second was Ezzat,  
Who had passionate eyes.  
I visited her grave with Hossein.  
Third was Hossein,  
Who had strong hands.  
I visited no other graves,  
Escaped from one house to another  
And finally crossed the border.  
But now where can I escape  
From this world-wide pandemic?  
This time I must stay home  
And wait for my turn.

March 29, 2020



## در انتظار نوبت خود

مجید نفیسی

پس از دو هفته خانه‌نشینی  
سپیده‌دم دوباره به خیابان می‌روم  
برای پله‌نوردی.  
پلکان را تخته کرده‌اند  
هیچ کس در خیابان نیست  
و تنها باد با برگها حرف می‌زند.  
آن سال را بیاد می‌آورم که در تهران  
رفقاییم یک‌به‌یک به خاک افتادند  
و بی‌هیچ سنگ‌گوری خاک شدند  
در گورستان کافران.  
یکم صادق بود  
که لیخندی دل‌نشین داشت.  
با عزت سر خاکش رفتیم.  
دوم عزت بود  
که چشم‌هایی پرشور داشت.  
با حسین سر خاکش رفتیم.  
سوم حسین بود  
که دست‌هایی توانا داشت.  
دیگر سر هیچ خاکی نرفتیم  
از خانه‌ای به خانه‌ی دیگر گریختم  
و سرانجام از مرز گذشتم.  
اما اینک ازین ویروس جهانگیر  
به کجا می‌توانم گریخت؟  
این بار باید در خانه بمانم  
و نوبت خود را انتظار بکشم.

بیست‌ونهم مارس دوهزاروبیست

Ali Sadr- *When does the data get compiled and published?*

**Michele Silverthorn:** The 2020 Census's official count ends on August 14, 2020, so be sure to fill it out for your household by then. In December, the U.S. Census Bureau will deliver its official counts for the nation to the President and Congress as required by law. By March 31, 2021, the Census Bureau will send redistricting counts to the states. This information is used to redraw legislative districts based on population changes.

According to the "72-Year Rule," the National Archives releases census records to the general public 72 years after Census Day. As a result, the 1930 census records were released April 1, 2002, and the 1940 records were released April 2, 2012. The 1950 census records will be released in April 2022. That means the 2020 records will be released in April 2092.

Ali Sadr- *Can anybody access the general information?*

**Michele Silverthorn:** General information is available for all to access. Currently you can see general response rates for the nation and down to the census tract at <https://2020census.gov/en/response-rates> And anyone can learn more about the 2020 Census at <https://2020census.gov/>. To get help filling out the Census, get your questions answered, or get involved with our efforts to make sure everyone is counted, visit [CountMe2020.org](https://CountMe2020.org).

Ali Sadr- Thank you very much for your time and good luck.

*Michele Silverthorn has been leading the 2020 Census outreach and education work for San Diego and Imperial counties since March of 2019. She is the Project Lead for Count Me 2020 led by United Way of San Diego County. Michele has more than 16 years of experience in nonprofit management, philanthropy and grant making, and community development with organizations focused on marginalized communities. She is a strong program leader and effective project manager that concentrates on workflow optimization and strategic implementation. With her work spanning grassroots community based organizations to multi-million dollar funders she is a successful communicator across stakeholder constituencies and has a robust understanding of San Diego and Imperial counties community and philanthropic landscape. Her previous work has focused on the underserved, whether through grants programs focused on homeless, vulnerable children, and working poor populations; immigrant worker health issues; food systems; or as a Peace Corps Volunteer in El Salvador. Michele received her bachelor's degree from Cal Poly San Luis Obispo in City & Regional Planning and master's degree from Brandeis University in Sustainable International Development. After hours you can find her with her husband, boys, and puppy in the mountains, camping and hiking.*



# EDUCATIONAL SERIES

## The Science of

# Nutrition

## Can Foods Combat Viruses?

By: Mohammad Ahrar, PhD



### Introduction

A wealth of information about viruses, especially the novel coronavirus (COVID-19), are found in the news media and websites. We have no intention of discussing the disease or mentioning the ways of prevention or giving any medical advice. In this article, we will review the basics of the immune system and how some nutrients may help improve the immune system, which can alleviate the severity of bacterial and viral infections.

### How the immune system fights diseases

The immune system is a broad term and includes different organs (such as the liver, bone marrow, spleen, and lymph nodes), white blood cells (WBCs), and some blood proteins that work together to protect us from pathogens such as bacteria and viruses. We are born with a certain level of protection, referred to as innate immunity. The acquired immune system protects the body from a specific invader by creating antibodies as they are exposed to a new pathogen such as COVID-19 for the first time. It can take several days for antibodies to develop. But after the first exposure, the immune system will recognize the invader and defend against it. WBCs, also called immune cells, play a major role in the immune system.

**WBCs get training to fight** - Like other cells of the body, WBCs have special receptors made of complex sugars and proteins on their cell membranes. The receptors can detect any foreign chemicals, such as bacterial or viral proteins, and become activated to produce different chemicals against them. There are different types of WBCs in the body, including lymphocytes, monocytes, natural killer cells, and phagocytes to name a few.

**How immune cells are activated** - WBCs, especially lymphocytes, need to learn about the invaders and develop special weapons to be ready to respond to an invasion. Some lymphocytes are trained in the thymus gland, located under the breastbone (referred to as T lymphocytes or T-cells, where T stands for thymus). Some other lymphocytes are primed while they are still in bone marrow (referred to as B lymphocytes or B-cells, where B stands for bone marrow). Now let's see what these cells learn.

a) T lymphocytes – As soon as they detect a bacterial or viral protein, T lymphocytes develop special chemicals on their cell membranes that work as sensors to detect foreign substances. Additionally, they release chemicals that not only activate themselves to react, but also alert other WBCs to come into combat with invaders.

b) B-lymphocytes - When B-cells encounter a foreign protein, they rapidly make baby cells (referred to as plasma cells) that release special antibodies against specific foreign proteins. However, it can take several days for antibodies to develop. But after the first exposure, antibodies can stay in the blood for months or years, and will recognize the same invader quickly and defend against it. That is how vaccines develop immunity against specific antigens.

c) Phagocytes (macrophages) - The antibodies, as well as other chemicals released by other immune cells, will trigger bigger WBCs referred to as phagocytes. The hungry phagocytes can work at different fronts and aggressively engulf many invaders at a time and destroy them.

How foods can help develop better immunity

Based on the explanation cited above, we can conclude that reproduction of new immune cells and synthesis of new chemicals—which are made of mainly complex proteins—requires the availability of essential nutrients, such as good quality proteins, carbohydrates, fats, minerals, and vitamins.

**1- Proteins** - When we eat foods that contain protein, digestive enzymes break down proteins and the absorbed amino acids will be used by our body cells, including immune cells, to build their own proteins and enzymes necessary for cellular repair, reproduction, and metabolism. There are 20 amino acids that are necessary for synthesis of a protein molecule. All 20 amino acids must be available to the cells, otherwise no protein will be synthesized. Good quality proteins or complete proteins provide all 20 amino acids. Sources of good quality, “complete” protein **include**, with the exception of gelatin, all animal sources of protein, such as red meat, poultry, fish, eggs, and dairy products. Plant proteins (except soybean and quinoa, which are complete proteins) are considered incomplete proteins because one or more essential amino acids are lacking or inadequate in them. See *Peyk* #162 for more information about proteins.

**2- Carbohydrates** - are a quick source of energy for all the cells in the body, including the immune cells, and should be provided in the diet. Information about carbohydrates are discussed in *Peyk* #163

**3- Fats** - are an essential part of the cell membrane in all cells. Fats are also a good source of energy for cells, including immune cells. More information about fats can be found in *Peyk* #159 and #160.

**4- Minerals** - such as sodium, potassium, calcium, zinc magnesium, and copper are an integral part of cellular metabolism. The importance of some minerals is discussed in *Peyk* #175.

**5- Vitamins** - are involved in chemical reactions in the cells and are essential for the proper function of the immune cells. The importance of some vitamins is summarized below:

**Vitamin A** - Reports indicate that vitamin A helps to ensure production of healthy fast-growing epithelial tissues, such as those lining the air ducts in the respiratory system and other mucosal membranes.

Vitamin A is found in carrots, broccoli, spinach, and fruits (such as apricots banana, blackberries, and cantaloupe). Most dark-green leafy vegetables are good sources of provitamin A, which will be converted to active vitamin A in the body. More information about vitamin A is found in *Peyk* #169.

**Vitamin D** – This vitamin is mainly known for its effect on calcium ab-



sorption and metabolism; however, as a hormone, it has a much broader effect on general health. According to the National Center for Biotechnology Information (NCBI), vitamin D receptors are present in many cell types, including immune cells, such as antigen-presenting-cells, T-cells, B-cells and monocytes.

Vitamin D promotes a strong immune system. A recent Italian article confirmed that vitamin D is essential for the functioning of an immune system that can help fight COVID-19. The vitamin enhances the pathogen-fighting effects of monocytes and macrophages (large WBCs) and alleviates the symptoms of the disease if infected by the virus. Studies have also shown that vitamin D may influence human genes that control the immune system. Researchers from Boston University School of Medicine found that higher vitamin D levels in healthy individuals have a significant impact on the genes controlling illnesses, such as cancer, autoimmune diseases, and cardiovascular disease (2). Some studies show that supplementation of 1,200 IU of vitamin D per day to the diet of a group of children during winter reduced the risk of influenza infection in the experimental group by more than 40. Although a daily intake of 10,000 IU cholecalciferol (vitamin D3) is considered safe according to the Endocrine Society, please consult with your physician before taking any vitamin supplement because fat soluble vitamins may interfere with metabolism of other nutrients.

Good sources of vitamin D are found in cod liver oil (1 tablespoon provides 1,360 IU), herring, salmon, and sardines. More information about vitamin D can be found in *Peyk* #170.

**Vitamin C** - The role of vitamin C as an antioxidant was discussed in *Peyk* #173. Besides its effect on preventing unstable molecules, such as free radicals that cause harm to cells, some research shows that Vitamin C contributes to immune defense by supporting various cellular functions of both the innate (born with) and adaptive (acquired) immune system. Vitamin C can also be accumulated in phagocytic cells, such as neutrophils, and enhance chemotaxis (production of toxic substances against pathogens) and phagocytosis to destroy pathogens. It has also been shown that vitamin C enhances differentiation and proliferation of B-cells and T-cells, likely due to the gene regulating effects; hence, the stronger the immune system, the better the protection against bacterial and viral infections.

Vitamin C is abundant in berries, broccoli, Brussels sprouts, cantaloupe, cauliflower, grapefruit, honeydew, kale, kiwi, mango, nectarine, orange, papaya, snow peas, sweet potato, strawberries, tomatoes, and red, green, or yellow peppers. For more information about vitamin C, visit *Peyk* #173.

**Vitamin E** - Vitamin E is a potent antioxidant that prevents the oxidation of polyunsaturated fatty acids and oxidative radicals that affect general functions of the cells. Studies show that there were 1,000-fold fewer bacteria in the lungs of laboratory animals that received vitamin E sup-

plements. Other studies show that vitamin E plays an important role in the differentiation of immature T-cells in the thymus gland. It has also been shown that vitamin E supplements significantly boosts immune response in the elderly. In 37 women, aged 90–106 years old, NK cell (an important immune cell) activity was positively associated with increased levels of vitamin E supplementation, and it was concluded that vitamin E is an important nutrient for maintaining the immune system, especially in aged individuals.

Vitamin E sources include broccoli, avocado, chard, mustard, turnip greens, mangoes, nuts, papaya, pumpkin, red peppers, spinach, and sunflower seeds. See *Peyk* #171 for more info.

**Folic acid** – The most important function of folic acid is production of DNA and development of new cells, including immune cells and red blood cells. To have a strong immune system, you need to have an adequate amount of the folate in your daily diet. Studies have shown that quick responses of T lymphocytes to certain pathogens is decreased in folate-deficient humans, and the thymus gland that activates T-cells is preferentially affected.

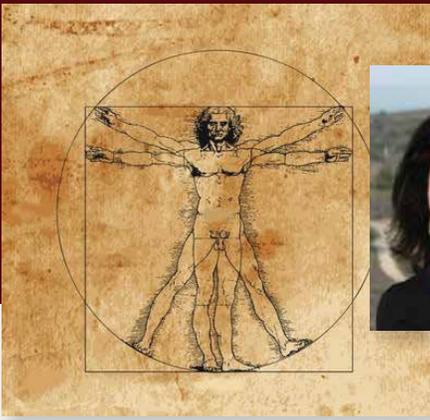
Good sources of folate include dark green leafy vegetables such as spinach, broccoli, asparagus, dried peas, and beans. See *Peyk* #186 for more info.

## Effect of exercise on immune function

It is widely agreed that regular moderate exercise is beneficial for immunity. A study of more than 1,000 men and women showed that those who walked at least 20 minutes a day, 5 days a week, had 43% fewer sick days than those who did not exercise. One experiment with people ages 61 to 76 suggested that moderate exercise helps counteract the natural decline in the immune system that occurs with age. Any strenuous physical activity will stimulate bone marrow to produce more lymphocytes that are responsible for our immune system. (*Peyk* #168) However, an interesting study shows a different view, in that arduous exercise, such as running a marathon, can suppress immune function, leading to an “open-window” of heightened infection risk in the hours and days following exercise. It is not clear, however, that infections are more likely to be linked to inadequate diet, psychological stress, insufficient sleep, or pathogen exposure at social gathering events like marathons, rather than the act of exercising itself.

### Selected sources

- 1- [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3738984/#\\_\\_sec1title](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3738984/#__sec1title)
- 2- <https://www.ncbi.nlm.nih.gov/pubmed/10714244>
- 3- <https://www.health.harvard.edu/staying-healthy/foods-that-fight-inflammation>
- 4- <https://www.hopkinsmedicine.org/health/wellness-and-prevention>
- 5- <https://www.sciencedaily.com/releases/2020/03/200331162314.htm>



By Sanaz Majd, MD

## COVID-19 Q&A

It is vital to remember that the COVID-19 virus is one like we have never seen before, hence its previously assigned name “novel” coronavirus. We are still learning how it behaves since its birth in December 2019. At this moment in its infancy, in order to answer many of your questions, we need to draw some conclusions based on how its cousins Middle East Respiratory Virus (MERS) and Severe Acute Respiratory Syndrome (SARS) behaved, both also coronaviruses.

Also note that this pandemic is very rapidly evolving, with new information released up to multiple times a day. This is common with any new viral outbreak. And much of the statistical data that we have is still based on how this virus behaved in China. Therefore, the information we have today may change tomorrow as we learn more about how it behaves in the United States and other countries.

But here are some of the most common questions about this pandemic and their answers based on the information that we have available today:

**Question: There are rumors that two groups of drugs used to treat hypertension called Angiotensin Converting Enzyme (ACE) Inhibitors (examples are *lisinopril* and *benazepril*) and Angiotensin II Receptor Blockers (ARB) (examples are *losartan* and *valsartan*) may increase the chances of contracting the COVID-19 virus. Should I consider changing my blood pressure medication?**

The fear is that the COVID-19 virus, like the coronavirus strain that caused SARS, binds to certain receptors (or doorways of sorts) called ACE-2s on the lung cells of people taking these medications, and that these drugs may actually upregulate (or increase) the levels of these receptors and the virus may then enter the cells. So the concern is that there may be an increase in the COVID-19 susceptibility of the people treated with these medications as a result. But so far there is no real evidence of this.

In fact, the American Heart Association (AHA) and various other expert groups have issued a joint statement to dispel this since the claim surfaced. The AHA strongly recommends that patients continue treatment with their current blood pressure medications because there is no clinical or scientific evidence to suggest that treatment with ACE inhibitors or ARBs should be discontinued right now because of the COVID-19 infection.

**Question: There are also rumors that taking ibuprofen may exacerbate COVID-19 symptoms. Is this true and, if so, what can I take instead?**

The suggestion is that the ACE-2 receptor is also upregulated not only in those who take ACE-Inhibitors and ARBs, but also in those who take ibuprofen, naproxen, and other anti-inflammatories. There has also been a suggestion that the COVID-19 virus binds and uses this receptor to enter our cells more easily as a result. But, again, there is no basis for these claims.

The U.S. Food and Drug Administration (FDA) and various expert groups have responded by stating that there is no evidence that taking these groups of drugs plays a role. The World Health Organization (WHO) even responded that they do not recommend against the use of ibuprofen and that there is no scientific evidence behind these claims.

However, if acetaminophen (the generic for *Tylenol*) is as effective to treat your symptoms, it can often be taken in lieu of anti-inflammatory medications to treat aches and pains. But of course you should always run it by your own physician.

**Question: How can I best handle touching packages that I'm receiving at home?**

According to the Center for Disease Control (CDC), we know that coronaviruses, such as SARS and MERS, do not tend to survive well on surfaces, and are unlikely to spread from packages that are shipped over days or weeks. It is not the main way this virus seems to spread. It primarily spreads from people-to-people via respiratory droplets in the air from those who cough or sneeze and then release these droplets within 3 feet of their vicinity. This is the reason for the 6 feet social distancing, to allow some extra safety room in addition to that 3 feet.

So far, no positive cases of COVID-19's spread via mailed packages have been reported in the U.S. But if you are still concerned about handling mailed packages, simply recycle the box after opening, while careful not to touch your face, and then wash your hands right after.

**Question: Who is considered higher risk?**

The case fatality rate (CFR), which is the ratio of deaths over positive cases, will vary depending on how healthy infected people are. Most of the information we have had up to now is from China,

but the CDC just released a report confirming China's findings that the most high-risk medical conditions currently seem to be:

- Cardiovascular disease
- Diabetes
- Chronic lung disease
- Hypertension
- Cancer

And the CDC recently added two more chronic conditions to the list:

- Smoking
- Kidney disease

Note that the CFR will also vary by age. That is, according to China, most deaths have occurred in those age 60 or higher, with the rate increasing with each decade significantly. Children are deemed the lowest risk, but note that they are often carriers who pass it on to vulnerable adults.

The CFR reported for various age ranges include:

60-69 years old = 3.6% CFR  
70-79 years old = 8% CFR  
>= 80 years old = 14.8% CFR

As we obtain more studies and statistics from the U.S. and other countries through time, we will be able to answer this question more thoroughly.

**Question: Is it true that water consumption every 15-30 minutes will reduce the risk of infection with COVID-19?**

Absolutely not. This is one of those false COVID-19 myths that have spiraled out of control. Drinking water will not decrease the risk of getting infected. However, if you get sick and unable to keep fluids down, the dehydration can significantly increase your risk of landing in the hospital. So, if you are sick, make sure you're drinking plenty of fluids. Otherwise, simply drink to thirst.

If something sounds suspicious, please question it and seek scientific evidence.

**Questions: The CDC is now recommending face cloth coverings for all essential outings. But what about gloves? Should I wear gloves when out shopping?**

Wearing gloves does not seem to be very helpful or protective. I often see shoppers who are wearing gloves touching pieces of fruit, placing it back in the produce pile, then picking up their phone to text, touching their hair/face, then their cart, then opening up their wallets or handling their credit card -- all while using the same pair of gloves.

Think of all the surfaces you touch. If you are planning on touching your personal belongings and/or yourself and then touching any of your purchased products or shopping cart (and vice versa), you have just cross contaminated everything.

And what happens when you leave the store? You still have the items that you have purchased in your car trunk that you have touched using the same gloves that you used to touch the shopping

cart. And do you wear the gloves until your ride back home? What about your steering wheel!? Where do you dispose of your gloves if you are to take them off after leaving the store?

It does not have to be complex, and simply requires a bit of common sense. Instead of gloves, simply avoid touching your face the entire shopping trip, and after leaving the store then cleanse your hands in the car for at least 20 seconds with hand sanitizer. When you arrive home, wash your hands.

**Question: Where can I obtain a mask?**

As a last plea, please leave surgical and N95 masks alone -- there is a very serious shortage amongst medical facilities on the front lines and trenches. The CDC recommendations are to cover your mouth and face with a cloth covering. Using a simple scarf or homemade mask will suffice. There are various resources online with instructions on how to create your own mask (see one below).

To learn more, please refer to several YouTube videos I have dedicated to this topic where I dive in to a greater depth. And here are a few credible sources of information on the COVID-19 pandemic for those of you seeking to learn more:

CDC: [www.cdc.gov/coronavirus](http://www.cdc.gov/coronavirus)

WHO: [www.who.int/coronavirus](http://www.who.int/coronavirus)

Podcast COVID-19 Commonsense Conversations on the Coronavirus Pandemic, hosted by physician Dr. Ted O'Connell: <https://tinyurl.com/tes6dggk>

CDC recommendations for cloth coverings (and instructions on how to create your own): <https://tinyurl.com/uxphv12>

**Please stay home, stay safe, and stay healthy.**



The advertisement features a stack of 'Peyk' magazines with various covers, including one with a pink floral design. The background is blue with white and yellow text. The logo for the PCCS Cultural Center is visible in the top right. Contact information is provided in Persian and English.

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Short Story

# That's Bull'!

By Ali Sahebalzamani



The water flows over the skin on the back of my hands; it takes a moment for it to soak through the ashen layer of dead skin particles covering my knuckles. The first couple of days after the quarantine, our supervisor insisted we sing happy birthday twice, out loud, whenever we washed our hands. It looked as if we were reciting a prayer to ward off the evil spirit. By the fourth day we had stopped doing it.

Jess comes in through the doors, and walks through the skyward chair legs towards us, in the back. She is middle-aged with smiling eyes; a pleasant co-worker, to be sure, if a somewhat jittery one. Pulling down the bandana covering her mouth, she greets me with the usual "Hey buddy!" Not looking up from the sink, I say "Welcome back Jess" to the back of her head. Immediately the inside of my mask is filled with the smell of my own breath. She is packing up her next delivery. Squinting at the delivery tag on the first box, she says "it's a big one, ain't it!" I nod my agreement, again, to the back of her head. Having dried my hands with the recycled brown paper, I unconsciously curve my fingers; the skin on the tips of my fingers feels tight, like a rubber glove blown full of air.

- Oh hell, are you kidding me? That's bull' man! Yo! John! You seen this?

Our manager looks up from his computer screen:

- What's wrong?
- Look at this address, man, that's an urgent care unit... and it's not even a contactless delivery! I am NOT going in there.
- Let me see... Oh wow! That's two, four, six... fourteen items; it's probably a donation.
- That's bull' man! You better call 'em! Call 'em an' tell 'em they're gonna have t'come out and take their food from me 'cause I ain't going in there!
- And get a load of this tip! This is definitely a donation.

Jess is biting the corner of the nail on the index finger of her left hand. The fear in her voice is echoed in grunts and nods by the other two drivers in the room. They look so primitive; standing there with their hands hidden in their pockets. John hands the tag back to her:

- Yeah, they can't expect us to actually go inside the clinic. Read that phone number for me please.

From behind me someone says "Just dial nine-one-one!" The drivers chuckle eagerly, like cavemen, puffing out their chests, pretending they are not afraid. John hangs up the phone, not having spoken:

- They're not answering. I'll call them again in a bit. You can take a different order if you want, I'll have Anthony take this one.

At this, Anthony takes his hands out of his pockets and looks up, smiling crookedly:

- I'm on break. You want me to clock back in?
- Hold off on that for a moment, we'll see what happens.
- Okay, but I'm not going inside that hospital either.

Dialing again, John looks at him sideways and says nothing. We all watch him listen to the dial tone. Except for Jess; she is, with practiced movements, loading up a different delivery bag. John hangs up again. "No answer. I'm sure they'll be careful when taking the order from you. And the tip is pretty generous. Plus, these are

healthcare workers, after all. They're risking their lives for us. So why not just take the delivery?" Anthony smiles that same crooked smile, somehow managing to make it seem apologetic: "Yeah, you're right, but my son has asthma; gotta be careful not to infect him."

A customer walks in. When I take his order to him, he is on the phone: "...look, all I know is that I haven't actually seen anyone infected by it... hang on..." he holds out the cash. Looking around me I pick up a menu and hold it out for him to put the cash on; he rolls his eyes and wrinkles up the corner of his mouth. Once he has left I wipe down the reception desk with alcohol. Afterwards I rub sanitizer gel onto my hands; it makes the back of my hands scream.

John hangs up the phone: "They said they can't come out." Turning to Anthony: "So, you're not taking the delivery?" He shakes his head from side to side, a glimmer of embarrassment in his eye. John turns to Todd but before he can open his mouth, Todd speaks: "Sorry boss." John crosses his arms and averts his eyes, radiating frustration like a furnace.

"I'll take it," I say. They turn, wide-eyed; Anthony has even raised his right eyebrow.

"But you're not a driver," says John.

"You could put Anthony or Todd in the computer as making the delivery and I'll go instead."

"Well, that's an idea but are you absolutely sure you want to take that risk?"

"It's a choice between either going out on a delivery and getting that tip or staying in and sweeping the lobby for nothing." I see it on the faces of the drivers: finally they realize that if I go on the delivery they will be stuck here cleaning the store. I can see cowardice wrestle with greed and sloth. John is studying their faces, too. Finally cowardice wins, as always. Reluctantly, John nods at me to take the delivery. Anthony has already started to sanitize the tables; like a priest, consecrating the temple with odorous balm. It smells like gin.

A chill wind blows outside. The smell of wet soil and the fractured reflection of streetlights on the asphalt remind me of home. My fingers are folded firmly around the wheel, at nine and three. I am acutely aware of the skin being pulled over my knuckles. Under the irregular halo of traffic lights I try, unsuccessfully, to see if my skin has opened up yet. To my left and right, sit empty parking lots, fringed by closed stores.

I park right in front of the clinic. Inside, I am greeted by a petite nurse with hair cropped close to her scalp. She comes with her muffled voice; gloved hands reaching out to take the food. She looks happier than I expected; more relaxed. The whole thing lasts less than two minutes and it is practically contactless. As I am getting into the car, a paramedic sitting in the back of his ambulance exhales smoke and nods at me.

I park the car in front of the house. After opening the door, I await someone to come and spray me with alcohol. To avoid bringing the evil spirits into the hearth, one must be anointed before passing the threshold. I take off my coat and shoes and put them away in the "purgatory room" where everyone leaves their outside clothes; it is cold, but a peaceful place, nonetheless, as all places of transition should be. I savor the smell of Lysol. I think I'll stay in here for a bit.

# Nush-e-Jan

Persian Cuisine

From Najmeh Batmanghelij's  
"Cooking in Iran – Regional Recipes & Kitchen Secrets"

## TURMERIC CHICKEN WITH SUMAC AND LIME

From *The New Persian Kitchen*

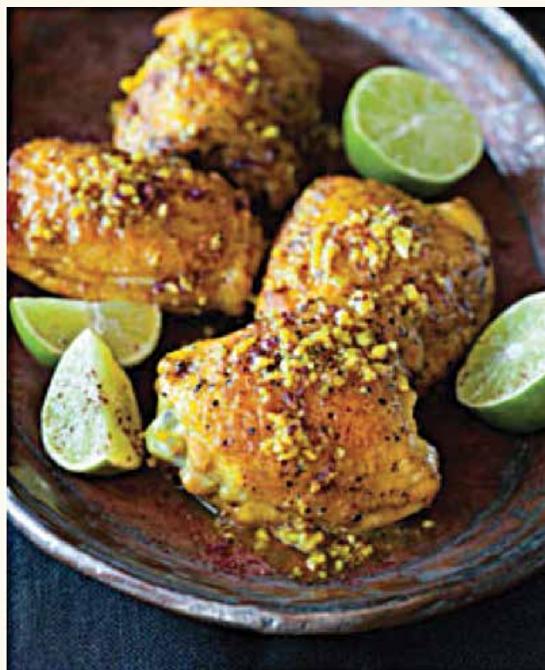
### Ingredients

- 1 teaspoon ground turmeric
- Sea salt and freshly-ground black pepper
- 4 bone-in chicken thighs
- 2 tablespoons grapeseed oil
- 3/4 cup water
- 4 cloves garlic, minced
- 2 juicy limes, halved
- Sumac, for garnish

### Directions

In a small bowl, mix the turmeric with 1 tablespoon of salt and 2 teaspoons of pepper. Place the chicken on a rimmed baking sheet and sprinkle with the spice mixture, turning to coat both sides. Heat a large skillet over medium-high heat and add the oil. Brown the chicken well on both sides, about 7 minutes per side. Pour in the water, then add the garlic, stirring it into the water. Bring the water to a boil, then turn down the heat to low and cover. Braise the chicken for 25 minutes, until the inside is opaque. Transfer the chicken to a serving platter, turn up the heat to high, and reduce the cooking liquid for a few minutes, stirring occasionally until it is slightly thickened. Season to taste with salt and pepper and pour the sauce over the chicken.

Dust the chicken with sumac and additional pepper, garnish with lime halves, and serve.



## SAFFRON CORN SOUP

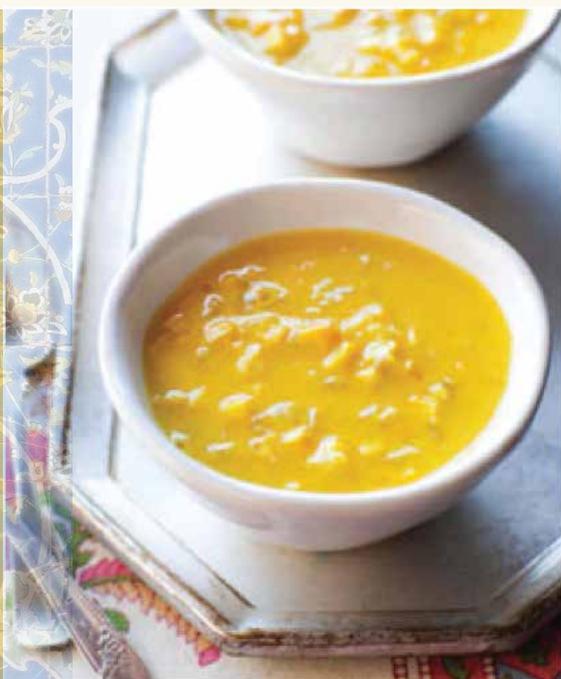
### Ingredients

- 3 tablespoons grapeseed oil
- 2 yellow onions, finely diced
- 1 teaspoon ground turmeric
- 6 large ears of corn, shucked
- 3 dried limes, soaked in hot water for 15 minutes
- 6 cups chicken stock or water
- 1/2 teaspoon saffron, ground and steeped in 1 tablespoon hot water
- Sea salt and freshly ground black pepper
- 2 to 3 tablespoons freshly squeezed lemon juice

### Directions

Heat the oil in a stockpot over medium heat and cook the onions for about 10 minutes, until they start to brown. Add the turmeric and corn. Pierce the limes with a knife or fork and add them to the pot along with their soaking water. Add the stock and bring to a boil. Cover and simmer for 15 minutes, until the corn is just tender.

Squeeze the limes against the side of the pot with a long spoon to extract their concentrated flavor before removing them from the soup. Blend half of the soup in a blender, then return it to the pot. Add the saffron and season to taste with salt and pepper. Add lemon juice to taste and serve.



# Race and Census

By Hooshyar Afsar

As most of us know, the 2020 Census is under way. This is very important for our Iranian-American community because there is a history of Iranian-Americans being undercounted, therefore depriving our community from an accurate count resulting in under-representation. There is now a national coalition encouraging Iranians to write in Iranian no matter what box they pick. Census question number 9, which asks about race, allows everyone to write in their national origin regardless of which box they pick. While I agree with writing in Iranian, let's shed some light on race and being Iranian.

What is race? Sociologists define race as a social construct. It means that race has no biological and scientific basis. If there was any doubt about this fact, with the mapping of human DNA in the 1990s, it was proven that as humans we share 99.98 percent of our DNA with each other all over the planet. So, why was this construct created?

Colonial powers created this construct for economic and political gain predominantly in the fifteenth century. Over four hundred years after the first slave ship arrived at the shores of Jamestown in the present day state of Virginia, race and racism still persists as it has been interwoven into the economic, social, and political fabric of society. Colonial powers used the notion of race to promote racism, justifying the "supremacy" of the "white" race. They created slavery as a racial cast system because they needed the labor of millions of African slaves to build the colonies. Slavery as a dominant racial cast system was eventually abolished all over the world, yet racial cast systems persisted by way of mutation.

In the United States, slavery mutated into convict leasing and then the regime of segregation (Jim Crow laws) and now mass incarceration/mass deportation. Today, many sociologists do not separate xenophobia and all forms of anti-immigrant bigotry from racism. In a way, the racist stereotype of black-person-as-a-criminal was first complemented by Latin-x person as illegal (hence a criminal) and then by middle-eastern person as a terrorist (hence a criminal). I argue that despite the U.S. government's recognition of Iranians and Arabs as "white" in 1978, our community has been subject to overt and covert racism in the United States with many brazen manifestations including national registry for all Iranian students during the hostage crisis and the Muslim-ban instituted by the



Trump administration. Between 2017 and 2019, 50% of all visitor and immigrant visas denied by the Trump administration (over 34,000 applicants) were Iranian applicants. In a sense, the Muslim ban might as well be called the Iranian ban. In other words, Iranians today have a 1.5% chance (one in sixty four) of getting their visa application approved by the U.S. State Department. Being deprived of new immigrants arriving in the United States, our community faces an existential threat by the way of a blocked pathway for new members.

In spite of our community being subject to racist and discriminatory policies, the fact is that many Iranian-Americans consider themselves "white" and are influenced by racist notion of whiteness. Unfortunately, close to a century of misinformation feeds this narrative. Confusing the ancient word "Arya" (meaning noble) with the notion of an "Aryan" race born of the Reza Shah's fondness of Hitler and the Third Reich feeds the misconception. Assuming that Iranians are "white" is a double whammy for our community.

Why is it a double whammy? First and foremost, it deprives us of our identity and exact count in the census that has many negative ramifications for our community, including being under-counted and therefore being under-represented. Secondly, by claiming that we are "white" we further reinforce the notion of "whiteness" and disarm our community to fight racism and all facets of discrimination in all societal and judicial arenas. In fact, there are well-documented cases of anti-discrimination lawsuits lost by Iranian-Americans because we have failed to show that we are discriminated against based on national origin because of defendants' insistence on their whiteness. There are also inspiring stories of second generation Iranian-Americans such as young students who vouched for a new racial identity in the University of California system thereby gaining support to build and grow their own community within the campuses of that statewide learning institution.

So, what kind of action best represents the interest of our community when answering question number 9 of the 2020 Census? Choose "Some other race – Print race or origin" box and write in **Iranian**. If you are from a mixed family (one Iranian parent), you can pick two boxes, one representing the non-Iranian parent plus "Some other race ..." box with a write-in of Iranian.

# سرشماری

سرشماری یعنی

تأمین منابع  
برای  
جامعه ما

مدارس

آتش نشانها

مسکن

جادهها

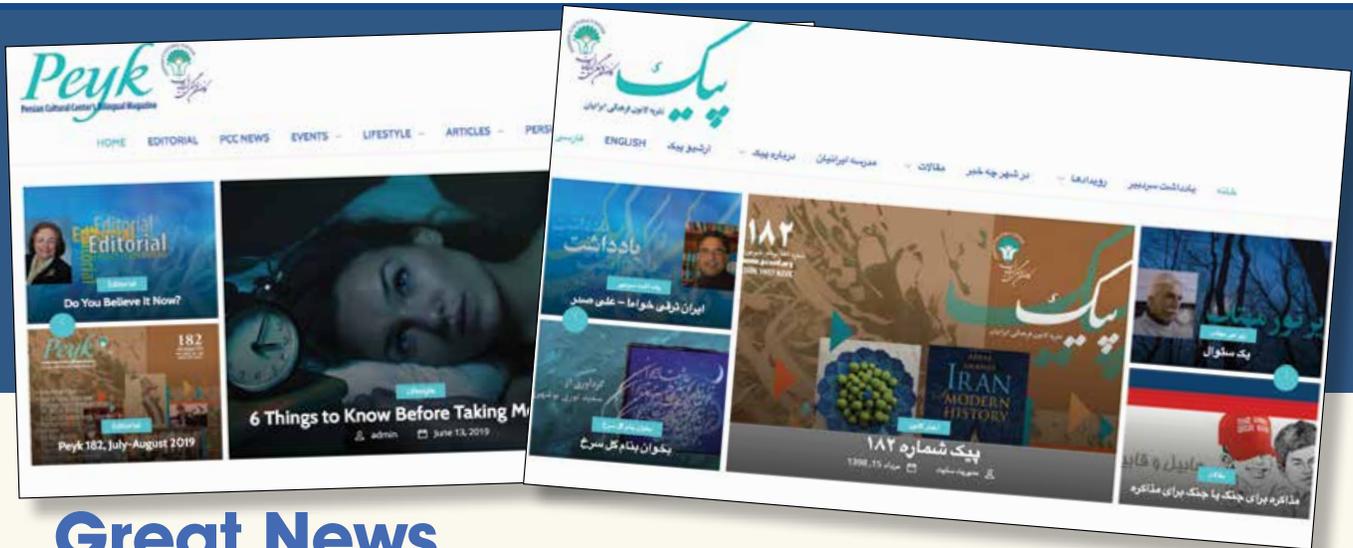


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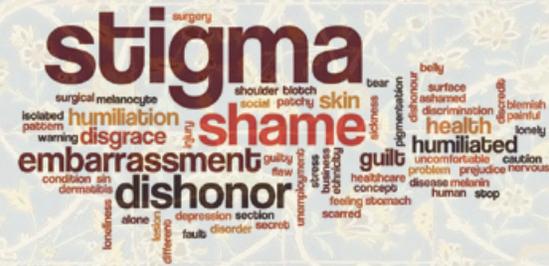
خواننده گرامی،  
در پاسخ به تقاضای شما، خوشحالیم به اطلاع برسانیم که نسخه آنلاین پیک از این پس در دسترس شما خواهد بود. آدرس وبسایت ما [peykmagazine.com](http://peykmagazine.com) است. در این سایت شما می‌توانید به طور مستقیم با ما و نویسندگان مقاله‌ها ارتباط برقرار کنید و نظرات خود را با ما در میان بگذارید. شماره‌های گذشته پیک کماکان در آرشیو ما در [pccsd.org/peyk](http://pccsd.org/peyk) در دسترس شما است.



# Stigma of Mental Health in the Iranian American Community

## Part 1

By Lily Mojdehi



One of the most beautiful and important values of Iranian culture is the importance of friends and family. As a collectivist culture, community is at the core of so many of our customs, celebrations, and traditions. My parents both reminisce and are still in awe of my grandparents' incredible hospitality and how they opened their home to guests almost every day of the week. Nothing brought them more joy than togetherness. Gatherings brought them a sense of peace and comfort, because it reminded them of their life in Iran, living in constant community.

I have learned from my elders that life is enjoyed to the fullest when shared with family and friends who become "family." Whenever I encounter an Iranian family friend, they immediately ask me, "How are your mom, dad, and brother?" In essence, what they are really asking is, "How are *you*?" because how my family is doing directly connects to how I am doing. I do not only represent myself as an individual, but also my family and the larger community as a collective.

Living inside a collectivist culture positively impacts our mental wellness because there is comfort in knowing you have a built-in support network. However, our love for socializing and surrounding ourselves with our family and friends does not erase the fact that many Iranians in the U.S. experience mental health challenges.

According to the World Health Organization, mental health is defined as a state of well-being in which the individual is aware of their own abilities, can face normal stresses of life, works fruitfully, and is able to make a contribution to their community. Mental illness, on the other hand, disrupts a person's ability to think, feel, and relate to others and their daily life.

One challenging aspect of living within a collectivist culture is feeling pressure to always represent yourself and your family as respectable, happy, successful, and strong. It is simply not human to constantly feel well and put together. As immigrants and children of immigrants, we have experienced different forms of trauma and hold unique vulnerabilities.

Similar to physical health, mental health is individual and subjective. Our health and wellness in general can change over time and even throughout one day. For example, it is common to sometimes wake up feeling sick, yet gain vitality towards the end of the day. Similarly, it is natural to have moments or days filled with sadness, anger and, nervousness as well as moments or days filled with joy and positive energy. If these moments or days of sadness, lethargy, and other symptoms of depression last for two weeks or more, it is vital that you seek extra support from mental health professionals and their trusted community.

Mental health and wellness look and feel differently for each individual and that is one of the reasons why it is important for us to become aware of not only our physical health, but also how our mental and physical health are connected to each other. Commonly, mental illness shows itself through physical symptoms. These

symptoms often manifest themselves as head, stomach, and back aches, or chronic fatigue. The Persian language has a number of phrases that describe the mind and body interconnection. For example, "khafe shodam" literally translates to "I am suffocating" and figuratively translates to "I feel overwhelmed." This phrase shows how physical symptoms—such as feeling claustrophobic—are connected to mental health symptoms of feeling nervous, upset, and overextended.

Just as mental illness symptoms vary depending on the individual, so do treatment plans. Mental health can be treated and maintained through different forms of healing such as dietary changes, movement, community, medication, therapy, expressive arts, and myriad of other wellness modalities.

Mental illness is common and treatable. One in five adults in the U.S. experiences a mental health disorder each year. According to studies conducted by 250 clinical psychologists in Iran, about one fifth of Iranian children and adolescents experience mental health challenges, anxiety disorder being the most prevalent. Unfortunately, the Iranian American community has not often been included in mental health research, thus the exact numbers of Iranian Americans experiencing mental health challenges are unknown.

Mental health and wellness in the Iranian community is a topic that is not openly discussed for various reasons, including the stigma attached to this topic. Stigma can be defined as the attitudes and beliefs that lead to rejection, avoidance, or fear of those we perceive as being different. In other words, stigma is a negative label, often attached to people or their experiences. A common label that I have heard describing someone experiencing hardship or mental health challenges is crazy, or a "deevune," a term with negative connotations. This stigma in our community may cause those who are experiencing mental health challenges to feel shame in sharing their feelings, leading them to isolation and preventing them from seeking help. In order to avoid this, it is important to normalize conversations surrounding mental wellness in general.

Hopefully, this article will help us reduce, as a community, the stigma of mental illness as a legitimate health concern. By doing so, we will also reduce and even take away the barriers for seeking out help. Instead of asking ourselves "what will the community think and/or say about me?" I invite you to ask "how can I express myself honestly and authentically with my community?" We can fulfill each other's needs for love and connection if we take a moment and think "how am I feeling?" and "who can I support?" I urge you to come together and amplify our community's care. Let's continue to socialize collectively, while mindfully caring for each other.

*Lily Mojdehi is an Iranian American woman from San Diego, who grew up dancing at the Persian Cultural Center of San Diego. Majoring in sociology, she recently graduated from Bard College in New York and now works as a Middle Eastern outreach coordinator for Breaking Down Barriers, a county funded program aiming to reduce the stigma of mental health through education and prevention programs. Contact: lilym@jffssd.org*