

## Emergency Planning for Coronavirus on Campus

ALEX CLARK  
LIFE EDITOR

As Coronavirus spreads in the U.S., A-State is planning what measures will be taken if the campus becomes affected. Students have received multiple emails regarding COVID-19. The most recent was received yesterday at 11 a.m.

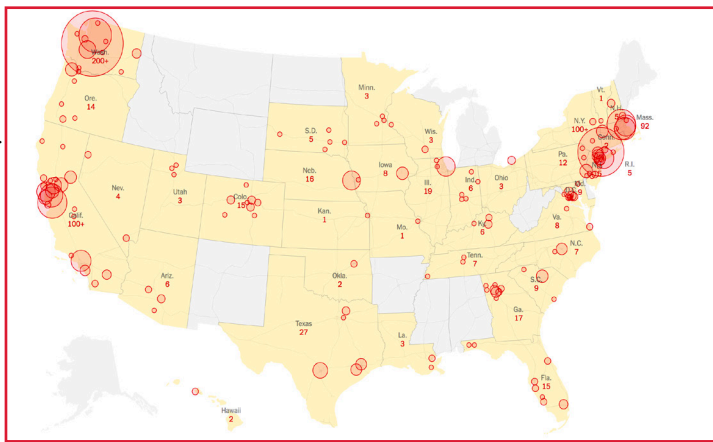
In the most recent email, Chancellor Kelly Damphousse explained that the CDC and U.S. Department of Education encouraged higher learning institutions to plan what to do if COVID-19 affects their campus.

Instructors have been told to begin exploring the possibility of shifting to all courses being online, rather than face-to-face. This follows many universities on the coasts taking this precaution, as well as Vanderbilt University, a non-coastal school. Damphousse acknowledged

the above map shows reported cases of COVID-19 by county in the U.S. Some classes, such as labs, may be hard or impossible to shift to online-only. Options will be explored to accommodate this.

There has been no final decision made to transition to online-only courses yet, as there are still no confirmed cases of COVID-19 at A-State or

in Arkansas. Although courses will continue a normal for the time being, the Convocation of Scholars banquets set for April have been cancelled. Also according to Damphousse, "Decisions on other large events will be made in the coming days. We have not made any other decisions, but we do want to be prepared to move quickly if we need to do so."



INFOGRAPHIC COURTESY OF "THE NEW YORK TIMES"

To avoid getting sick, wash your hands frequently and stay away from others showing symptoms or that have told you they are sick. If you are sick, see a doctor and avoid physical contact with others.

## HIV Symposium at A-State

JOHN NORRIS  
CONTENT CREATOR

A-State saw the Delta HIV Symposium on Friday. Hosted by New York Institute of Technology College of Osteopathic Medicine at Arkansas State University, the event aimed to help health care educators and professionals learn more about prevention, management, and treatment of HIV/AIDS.

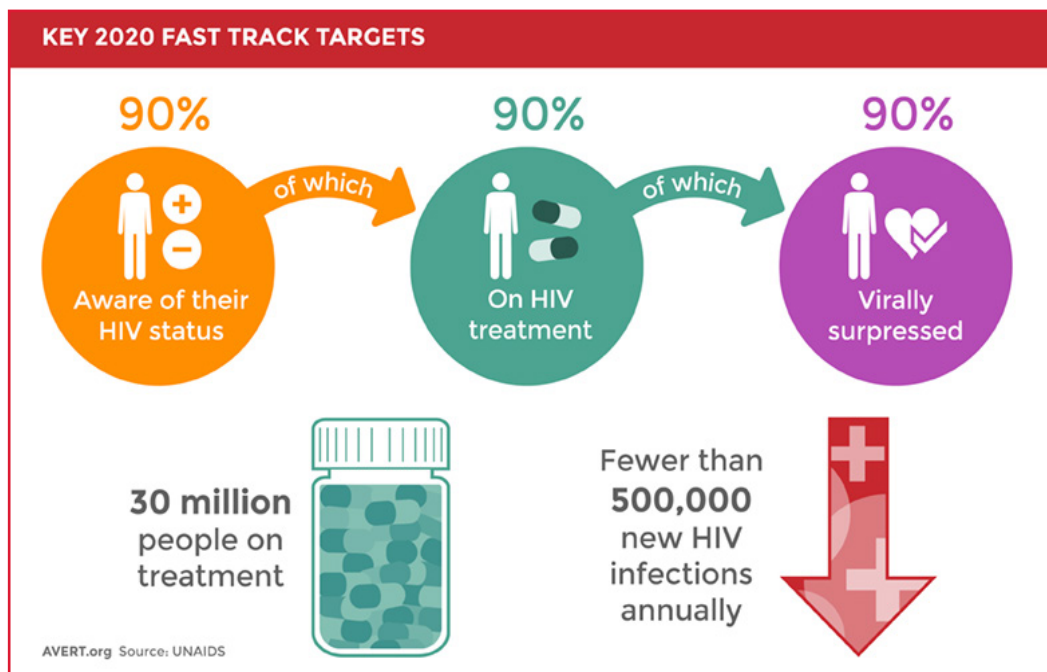
Throughout the event, which ran from 8 a.m. to 4 p.m., several speakers touched on a wide range of topics: from recent developments in treatment to plans for the future. While aimed at health care professionals and educators, the information was useful for average community members as well.

Of particular note were the discussions that

centered around the community, and how it is a vital part in the lofty (yet realistic) goal of zero new HIV infections by 2030. While alarming statistics were thrown around at an incredible pace, an optimism seemed to fill the air.

Most of the problems were based in a lack of resources - be it educational, financial, or otherwise - and the goals stated at the symposium are based in alleviating those deficits. While it will take incredible effort to enact the proposed solutions, what is more incredible is that the solutions already exist.

While initiatives this ambitious are difficult to follow through, it's difficult to see such a concentrated effort towards community-based change by passionate professionals and not walk out with a shared optimism.

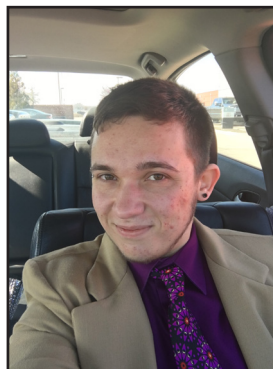


INFOGRAPHIC COURTESY OF UNAIDS VIA AVERT.ORG

UNAIDS 2020 fast track strategy shows what they have introduced as the "90-90-90" targets. This would be key in eliminating AIDS as a health threat by 2030.

## Tucker Tells All

FEATURE BY TUCKER PHILLIPS  
NEWS EDITOR



Tucker Phillips is a junior political science major from Salem, Arkansas.

When I was 13, I was first exposed to the idea of being not straight. That idea clicked with me, so I came out to my parents as bisexual. Since I grew up around this area, the reaction could have been better. Looking back, it also could've been a lot worse. It's been eight years since the first time I came out. A lot has changed since then, and there isn't much I'd do differently.

When I was 16, falling down the Wikipedia rabbit hole let me to the concept of being transgender. For me, that instantly clicked. I've never been a terribly girl-ish person. I grew up using pocket knives and helping my dad do home repair tasks. When I learned that I had options, I jumped into research. I first thought I might be non-binary (sometimes abbreviated to NB.) When my sister asked me how I felt each day, however, I realized I always responded by requesting to be referred to as a guy. So, I'm a transgender male -- a person born with a traditionally female body, but who does not identify with that.

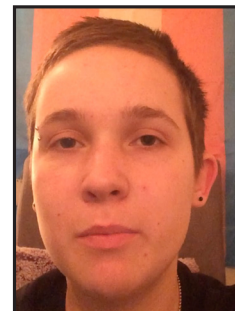
I came out to my immediate family in 2016-2017, during my senior year of high school, and began hormone replacement therapy (HRT) in September 2018, the fall of my sophomore year at A-State. I went to Planned Parenthood; they operate on informed consent, so as long as you know what you're getting into, you're good.

The first change that I noticed was my voice. I went to an event the weekend after my first shot that involved a lot of yelling. My voice got rough from all the shouting, and it just never came back up. Another early change was an increase in libido, along with some sensitivity and growth in relevant areas.

Because this is basically a self-initiated puberty, I did get a lot of acne again. In fact, this one was worse than the first time around. My voice

started cracking during the first couple weeks, but it kept settling in deeper than where it had been previously. I started to notice all the hair on my body was getting thicker.

One thing I didn't hear from other trans people was the fact that starting testosterone shots weakens your immune system. Due to the fact it's technically a steroid, it did make me more susceptible to illnesses for a while. I compensated by eating a lot of vitamin C. For people transitioning using estrogen, it's important to have a lot of calcium to maintain bone health.



Phillips, pre-medical transition

Over the first few months, my body fat migrated from where it was distributed across my body to mainly being in my torso. This effect goes the opposite way for people starting estrogen.

Building muscle also became a lot easier after I started HRT. I could bulk up a lot just by doing the things I was already doing every day.

I recently noticed that my hairline has shifted from being straight across my forehead to being a widow's peak. One of my friends told me that they experienced this much earlier, so I may have been late on the uptake. However, everyone reacts differently to this type of treatment. I've noticed a lot of similarities to my brother's teenage years, so family can be a good indicator. My facial hair is finally starting to come in well, something that also took my brother a while.

Now, what is appropriate to ask a person who tells you that they're trans? Name and pronouns. That's it. It's no one else's business what a person has done or wants to do with their body. Most people wouldn't ask a random classmate about their detailed medical history, and those who would should reassess their idea of polite conversation.

If you're like me: I know it's a tired cliché, but it really does get better. Five years ago, I never would've guessed where I would be now. In another five years, I think I'll be exactly where I want to be. As it is, I'm happy.

If you need a helping hand along the way, I'd recommend the Crisis Text Line (text "home" to 741-741.) They've helped me out of a tight spot before.

For more resources and a video comparison, check [theherald.home.blog](http://theherald.home.blog).

GRAPHIC COURTESY OF ALLEVENTS.IN

The Northeast Arkansas Susan G. Komen Race For The Cure will be hosted April 25. Registration opens at 7 a.m. at Centennial Bank Stadium, as well as a survivor breakfast being hosted at 7 a.m. at the Woodard McAlister Family Club. The Survivor Parade will begin at 8 a.m., and the 5k will begin at 9 a.m. Related events will be held April 24 and include the More Than Pink Party hosted at the St. Bernard's Auditorium at 5:30 p.m., and the Men's Pink Pump Run at 6:30 p.m. More information can be found at [komenarkansas.org](http://komenarkansas.org).

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