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Deadline nears for pirate art designs

The Painted Pirate Project will place decorated, 6-foot-tall pirate statues in highly visible locations throughout the city.

Mike Grizzard
The Daily Reflector

Nags Head has its winged horses. Washington, N.C., has its crabs.

Athen, Ga., has its bulldogs. Chicago has its cows.

Gainesville, Fla., has its gators. Toledo, Ohio, has its frogs.

Norfolk, Va., has its mermaids. Cincinnati and Seattle have their sows (well, pigs).

Next April, Greenville will have its Pirates.

The Greenville-Pitt County Chamber of Commerce and the East Carolina Alumni Association, in conjunction with the ECU Office of Centennial Events, is promoting the Painted Pirate Project, which will place decorated, 6-foot-tall pirate statues in highly visible locations throughout the city. All proceeds from the public art project will benefit the Historic Fleming House Renovation Fund and the East Carolina Alumni Association Scholarship Fund.

“It’s going to be a great source of pride and has the potential to build spirit within our community, for the city, for the university,” said Paul Clifford, associate vice chancellor for alumni relations at ECU.

The trend of public art projects featuring decorated animals began in Zurich, Switzerland, in 1998, when 800 painted cows appeared throughout the city. Chicago joined in a year later with 360 cows to commemorate the cow that allegedly kicked over a lantern and started the Great Chicago Fire of 1871.

Other cities have since tapped into their heritage for similar projects. Carolyn Thompson, ECU’s coordinator of centennial planning, said showing a pirate was natural for eastern North Carolina, given the university’s mascot and the history of pirates in the region.

The idea for the public display came out of planning for ECU’s centennial this year and the inaugural PirateFest, which was held in April.

“It can be quite a lucrative project, and many cities are getting into it to try raise some money but also to have a real eye-catching art project,” Thompson said. “It creates a lot of enthusiasm, a lot of foot traffic, so that’s what we hope our public art project will do as well for the city of Greenville.”

The original design for the pirate was created by Glenn Eure, an ECU alumnus and artist who resides along North Carolina’s Outer Banks. The unpainted, hollow fiberglass prototype weighing about 60 pounds stands in an office at the chamber of commerce downtown.

Design proposals from artists are due June 15, and designs will be selected in July. Sponsors may either select a submitted design or commission an artist to design a Pirate. The decorated Pirates will be unveiled at the second PirateFest in April.

Susanne Sartelle, president of the chamber of commerce, said an “open call” had been issued for artists, including e-mails to current and former students in ECU art program and art teachers in the Pitt County public schools.

No drawings had been submitted as of Tuesday.

“We have had some verbal interest,” Sartelle said. “The word’s out there.”

Sartelle said, unlike other art projects in other cities, Greenville would allow advertising on the pirates. She said one feature of the prototype is the ability to remove the sword and place with a sign or other form of advertising.

“One of the things that we found that we didn’t like in a lot of the other projects was that no advertising was allowed, no logos of businesses or anything like that,” she said.

“We kind of thought that we should allow that.”

Three levels of sponsorships, which will be solicited through December, are available. Sponsorship levels are $2,500, $5,000 and $7,500.

Sponsored and decorated pirate statues will be displayed from six months to a year — a time frame to be determined — at prominent public places throughout Greenville, then will become the property of the Pirate Project Committee to be auctioned. Captain level sponsors ($7,500) take ownership of their pirates after the display period.

Plans call for a Parade of Pirates during ECU’s Homecoming and an auctioning of the statues during the 2009 PirateFest.

“The ultimate goal is to have a gala ... where these are auctioned,” Sartelle said.
Support cut for student loans

The costs for an average loan might go up by $2,400, if subsidies fall by $750 million.

BY TIM SIMMONS
STAFF WRITER

The lender that handles about 60 percent of North Carolina’s student loans could find itself having to charge more in the future.

How much more depends on the details of a proposed $750 million cut in government subsidies to student-loan lenders. The cut is part of a larger budget approved by federal lawmakers last week.

A reduction of that size could increase costs by as much as $2,400 over the life of an average 10-year student loan, said Steve Brooks, executive director of the N.C. State Education Assistance Authority.

Such estimates are mostly an educated guess at this point because budget details involving higher education are certain to change numerous times before final decisions are made in September, Brooks said.

“While it will be hard to hold the cost of loans down based on the subsidy reductions they have talked about so far,” he said.

The student loans most likely to be affected would be those beginning in the 2008-09 school year.

House and Senate education committees are scheduled to start detailed discussions Wednesday after both chambers approved a preliminary budget in May that will guide the debate. Education spending overall is expected to increase in the 2008 budget.

Subsidy cuts, however, are particularly important to North Carolina because of the unique role of the College Foundation of North Carolina.

The foundation is a nonprofit organization closely affiliated with the UNC system and state government. With a current annual loan volume of about $600 million a year, it handles a majority of the state’s student loans — and virtually all of them on some campuses, such as UNC-Chapel Hill.

Unlike private lending companies, which often use the subsidies to improve the bottom line, the foundation uses the federal money to reduce the cost of loans.

For example, subsidy money is used to eliminate loan origination fees, provide discounts for customers who don’t miss payments or even to forgive penalties. State officials say the approach allows the foundation to offer the lowest student loan rates of any nonprofit group in the country.

But if Congress approves the cuts being discussed, it could mean an annual hit of about $3.6 million a year to the foundation’s bottom line, Brooks said.

The subsidy program was designed to encourage private lenders to make more student loans. But Democrats who control the budgeting process would rather see financial aid increased in direct federal assistance programs, such as Pell Grants.

That’s why the subsidy program is considered a primary target as Congress looks for places to make budget cuts. It also means cuts in subsidies won’t be directly transferred to Pell Grants and other similar programs.

“These are two separate decisions to be made,” said Alex Marrero, who tracks federal legislation for the Education Finance Council in Washington. “The money isn’t being shifted from one place to another.”

That leaves open the possibility that subsidy cuts could be greater than $750 million, and some smaller lenders would simply quit making loans, Marrero said.

Reduced competition could also drive up the cost of loans.

Brooks said he isn’t sure how larger cuts would affect North Carolina, although he believes drastic cuts could reshape the student loan market here.
A Summer Assignment

College kids need a physical, too, and now's a good time

By Sarah Baldassar

ote to parents of college students home for the summer: Sometime during these jam-packed weeks of job demands and friends, you may want to schedule a nice long visit with the doctor.

When the kids aren't sleeping, they may seem too brimming with health to bother. But many young adults—having outgrown the pediatrician without graduating to a new doctor—are getting no preventive care, and experts say they badly need it. Consider: Nearly half of full-time college students binge drink, use prescription drugs recreationally, or abuse illegal drugs each month, according to the National Center on Addiction and Substance Abuse at Columbia University. One in 7 young adults reports having experienced a serious mental illness such as depression in the past year, finds a data review by Jane Park, a researcher in the division of adolescent medicine at the University of California–San Francisco school of medicine.

Fourteen percent of students surveyed by the American College Health Association admitted using withdrawal as their method of birth control last year; 12 percent of women said they sought emergency contraception in the previous school year.

Yes, students will find the campus health center or their local ER when they sprain an ankle or suffer from alcohol poisoning. But there’s a risk in going years without comprehensive healthcare at this age, says Claire Brindis, director for health policy at UCSF. Brindis would prescribe a comprehensive annual exam (and suggests getting an appointment early in the summer, in case any follow-up care is needed). Unnoticed—and untreated—problems like anxiety, eating disorder, or substance abuse can kill, or at the very least wreak havoc with school performance. Of the top 10 reasons students in the ACHA survey gave for their grades dropping, more than half were related to their physical or mental health.

Why suffer? “I don’t want to feel that bad for that long ever again,” says Seth Kester-Irwin, a rising sophomore at Davidson College in North Carolina, who went almost all the first semester with a sinus infection that pushed him to the brink of misery. Finally, at home in Berkeley, Calif., over winter break, he saw a doctor and got a prescription. Kester-Irwin realizes now that he should have known better than to wait: His dad is a physician.

The physical your grown child needs will be quite different from what either a younger child or an older adult would expect to have—and considerably more detailed than the cursory exam, plus vaccinations, required before heading to college. So it’s a good idea to ask a few questions before choosing a doctor. Experts recommend looking for a style of practice that openly addresses sexually transmitted diseases, mental health, substance abuse, tobacco use, and daredevil behavior. “They’re not at risk for heart attack or cancer in large numbers like older adults, but they’re at risk for consequences of psycho-social behavior,” says David Bell, medical director of the Young Men’s Clinic at New York Presbyterian Hospital-Mailman School of Public Health, Columbia University.

Teasing out how a student balances his work-study job with that crush of English papers, for example, may reveal that he’s been pulling all-nighters with the help of his roommate’s Ritalin. A probing discussion of how a young woman manages her feelings of loneliness can uncover signs of an eating disorder, suicide risk, or substance abuse. Finally, the conversation should cover how often your child chooses a side of vegetables over fries, and whether the caloric intake is large enough to allow time for exercise.

In addition, a range of lab tests may be called for—though families may well have to request that the doctor offer them. “A lot of parents don’t want to believe their child may be having sex,” says Cynthia Burwell, chair of Healthy Campus 2010, the American College Health Association’s initiative to get college administrations to promote healthful choices by students. But STDs are a real risk, and a full work-up is not standard practice. The rate of infection with gonorrhea or chlamydia, each of which can result in lasting pain and infertility if untreated, is higher between the ages of 15 and 24 than in any other age group.

Screening for both can now be performed using a urinalysis, good news for young men whose only option used to be an uncomfortable swab inside the urethra. (Some doctors still use the old technique, so a call ahead may be in order.) Norholts and HIV testing is typically done with a blood test, but saliva tests for HIV are available. By the time a patient is 18, privacy laws prevent doctors from sharing his or her health records without permission, so there’s no need to fear that a disapproving parent will be clued in.

Cancer check. A genital exam is also key. Young men should be checked by a doctor for testicular masses; the cancer is rare, but early treatment yields a very high cure rate. According to the National Cancer Institute, young women should have their first Pap smear about three years after first having sex but no later than age 21. The test looks for abnormal cells or HPV, the virus that can lead to cervical cancer. Because the cancer is very rare in women under age 25, waiting up to three years between tests may be acceptable. Earlier is better with Gardasil, the HPV vaccine, but it can be administered for girls and young women up to age 26.

Anyone battling the "freshman 15" might want to add a blood-glucose screen. Research published last week in the Lancet suggests that type 2 diabetes is a serious and growing problem in teens and that they’re not getting screened appropriately. Stanley Mirsky, associate clinical professor of metabolic diseases at Mount Sinai School of Medicine in New York and a member of the board of overseers of the Joslin Diabetes Center in Boston, would advise a test for someone with any of the following: a family history of diabetes, an extra 5 to 10 pounds, or a couch-potato lifestyle.

Parents have an educational role to play, before and after the appointment. Daughters need to know that when a doctor asks if she could be pregnant, it’s not out of nosiness and it’s not a value judgment, explains Lesley Scher, director of the student health center at Florida State University. For the future, they might benefit from a discussion of how to get out of a situation in which they’re being pressured to have sex. Sons need to know about STDs and about how to read a woman’s signals that no means no. Everybody needs to hear about the dangers of binge drinking.

The talk may be uncomfortable, but "these are life-course issues," says Brindis. "It’s either pay now or pay later."