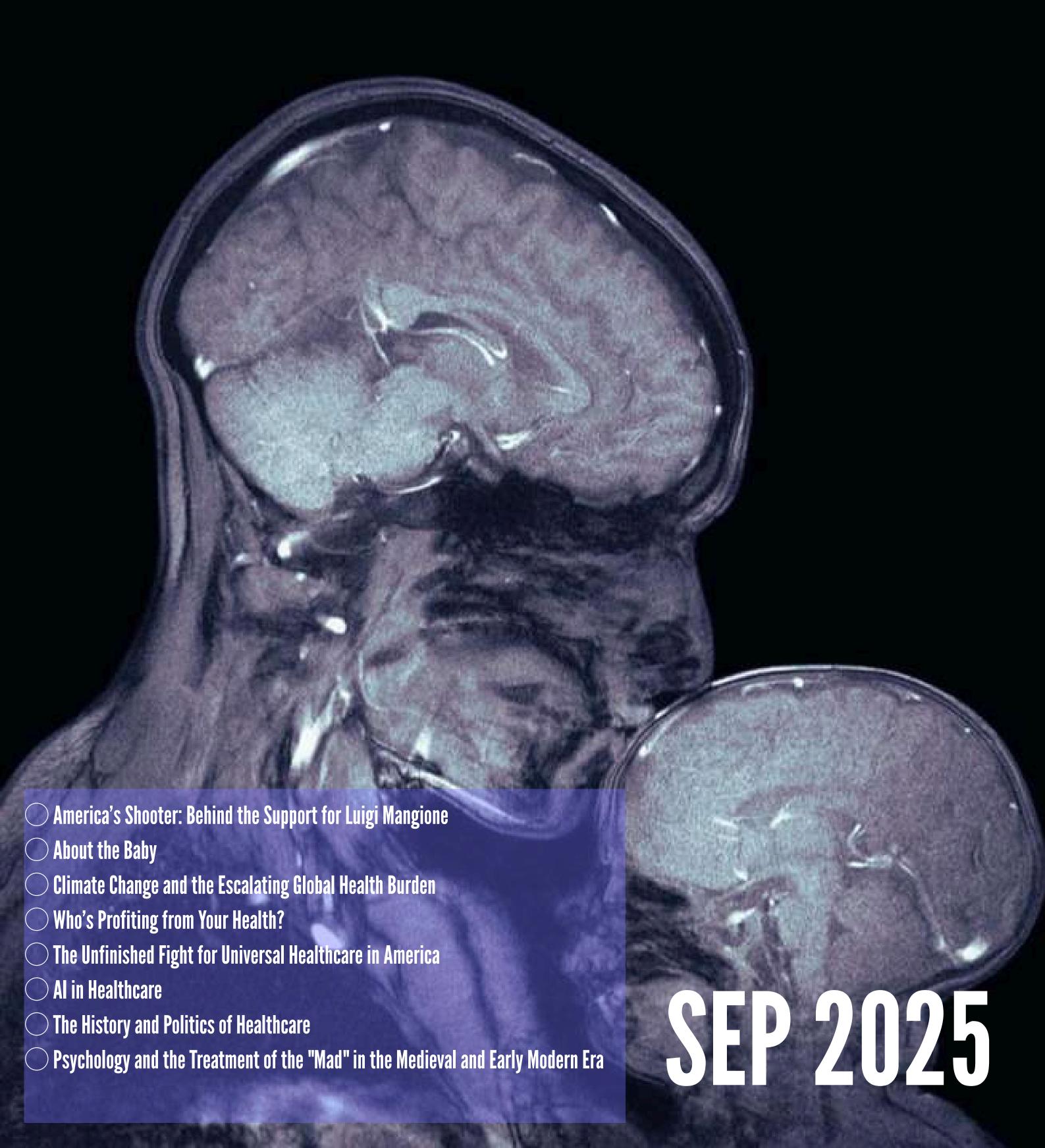
HEALTHCARE

Human Rights or Free-market Freakshow?





America's Shooter: Behind the support for Luigi Mangione

Caitlin Liao



When someone dies, you mourn. When Brian Thompson was shot, they celebrated.

On December 4th, at 6:17 in the morning, Luigi Mangione was seen inside a Starbucks not far from Hilton's Midtown Hotel. At 6:46, he allegedly shot Brian Thompson, the CEO of UnitedHealthcare, outside the hotel.

Thompson was pronounced dead half an hour after the shooting. Meanwhile, Mangione supposedly fled on an e-bike, hitched a taxi, and boarded a bus to the George Washington bridge, leading the police on a five day manhunt. He was ultimately arrested in a McDonald's in Pennsylvania. Then, he became a hero.

Shockingly to everyone involved in the case, the media erupted with public support for Mangione. The internet was flooded with memes, tweets, and posts supporting his actions and hoping he was never found. People found old pictures of him in his youth, romanticizing him as a handsome vigilante. A modern-day Robin Hood figure. Some even painted him a saint.

Many leaders in healthcare posted public responses to the shooting, expressing sympathy and sorrow. The public said it was hard to feel sympathy for a man making ten million dollars a year while the average person couldn't afford healthcare insurance. Found at the scene of the shooting were three ammunition cartridges with the words "delay," "deny," and "dispose." They echoed the phrase, "Delay, Deny, Defend," a term popularly used to describe the inaction and refusal of insurance companies to pay claims.

When Mangione was arrested, police found a handwritten document allegedly written by Mangione explaining his motives and mindset. Many label it as "The Feds Letter," as it was addressed to the federal government. Others describe it as a manifesto.

I do apologize for any strife or traumas but it had to be done. Frankly, these parasites simply had it coming. A reminder: the US has the #1 most expensive healthcare system in the world, yet we rank roughly #42 in life expectancy. United is the [indecipherable] largest company in the US by market cap, behind only Apple, Google, Walmart...It is not an issue of awareness at this point, but clearly power games at play. Evidently I am the first to face it with such brutal honesty.

On December 23rd, Mangione pleaded not guilty to murder and terror charges, facing the maximum sentence of life in prison. He has yet to be convicted.



Who is Luigi Mangione?

Mangione was born to a prominent Maryland family of Italian descent. Throughout his school years he participated in numerous sports and explored an interest in coding and video game development. He graduated high school as valedictorian, the top of his class. He went on to attend the Ivy League University of Pennsylvania, furthering his education in computer science and engineering.

He moved to Hawaii after graduating from college, where he reportedly underwent a spinal surgery that was not insured by UnitedHealthcare. He wrote online about a condition that had been causing him intense back pain since his childhood, and that he even considered dropping out of college because of it. He also deleted multiple posts where he expressed criticism towards the healthcare industry.



—— Luigi Mangione , valedictorian of the Gilman School in Baltimore

Mangione, 26, allegedly arrived in New York ten days before the shooting, staying in a hostel on the Upper West Side. He supposedly stalked Thompson during this time and "performed reconnaissance in the area around the victim's hotel and the conference venue where the victim was scheduled to speak," according to a press release from the U.S. Department of Justice.

Mangione's family said that they were, "shocked and devastated by Luigi's arrest." Many of his former classmates and friends came forward to share fond memories about Mangione, praising his intelligence and kindness. "I would never have anything bad to say about him," said Freddie Leatherbury, a friend from Mangione's high school. Leatherbury described Mangione as "the nicest kid you've ever met" with "everything going for him."

Mangione grew isolated in the time leading up to the shooting; many speculate this was a result of back surgery and unresolved health problems. A few relatives and friends mentioned that they reached out to Mangione after his surgery but received no response.



The Rise of Luigism

Brian Thompson's death was met with mixed feelings. UnitedHealthcare was a big health insurance company, and the shooting inspired people to speak out about their negative experiences with the American healthcare system. Online momentum carried, creating a massive wave of frustration and rage as people shared that they were refused healthcare coverage after paying thousands of dollars towards insurance.

The momentum shifted as the name and pictures of the primary suspect, Mangione, were released. The public began to see him as a hero— the man that fought back against the exploitative healthcare industry. They praised him, romanticized him, and edited him. This wave of vigilante support was given a colloquial name: "Luigism."

Social media posts in support of Mangione had a range of genres. Some joked about his alibis for December 4th.

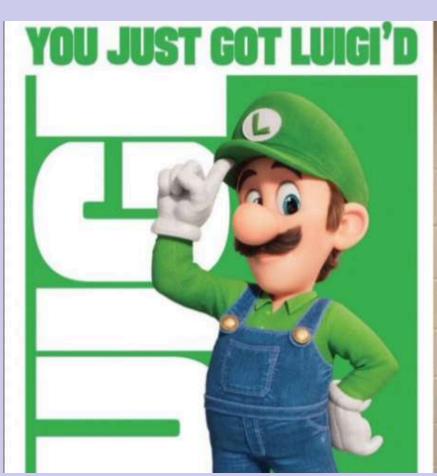








Others made memes using the character Luigi from Mario World.







Some romanticized Mangione to greater extents, posting about their attraction to him. He was even portrayed as a Catholic saint.



The hashtag #Free Luigi went viral on X, but the words were also echoed across the world. People graffitied "Free Luigi" onto walls. Mangione's fellow inmates shouted it in the prison he stayed at in Pennsylvania. Groups of people gathered outside his hearings, chanting "Free Luigi" from outside the building.

As he was escorted into court in Pennsylvania, Mangione shouted to the press, "This is extremely unjust. It's an insult to the intelligence of the American people and their lived experience."

Not Another Mangione

On July 28th, another midtown shooting sparked comparisons to Mangione. The killer, 27-year-old Shane Devon Tamura, shot and killed four people inside a building only ten blocks away from the Hilton Hotel. Investigators revealed that his intention was to kill executives from the National Football League, which had an office in the building, motivated by injuries and diseases he had suffered playing football. Law enforcement found Tamura dead from a bullet to the chest and a suicide note in his pocket that stated his grievances with the NFL and requested that his brain be studied.

The July shooting echoed Mangione's in many ways, from location to anger towards a large corporation. Online, individuals darkly humored that the people who died had gotten "LUIGI'D." Many are disturbed by the pattern of violence they are seeing on city streets, but support for Mangione has yet to wane.



Ibid.

https://www.businessinsider.com/luigi-mangiones-deleted-social-media-posts-clues-politics-2024-12
Jack Newsham, "Luigi Mangione's Deleted Social-Media Posts Show Support for Robert F. Kennedy Jr. and Skepticism of Doctors," Business Insider, accessed August 4, 2025, https://www.businessinsider.com/luigi-mangiones-deleted-social-media-posts-clues-politics-

<u>2024-12</u>.

Meredith Deliso et al., "Family, Friends React to Luigi Mangione's Alleged Role in UnitedHealthcare CEO Killing: 'Shocked," ABC News, December 11, 2024, https://abcnews.go.com/US/family-friends-react-luigi-mangione-suspect-unitedhealthcare-ceo-shooting/story?id=116639871.

Tom Murphy and Devi Shastri, "UnitedHealthcare CEO Shooting Opens Floodgates of Americans Venting Insurance Frustrations," PBS, December 7, 2024, https://www.pbs.org/newshour/nation/unitedhealthcare-ceo-shooting-opens-floodgates-of-americans-insurance-frustrations.

CNN, "Luigi Mangione Yells to Media as He's Escorted into Court," YouTube, December 10, 2024, https://www.youtube.com/watch?v=C_BogWHUmSM. Danya Gainor et al., "4 People Killed in Mass

Danya Gainor et al., "4 People Killed in Mass Shooting at Midtown Manhattan Office Tower," CNN, August 1, 2025, https://www.cnn.com/us/live-news/new-york-city-midtown-manhattan-shooting-07-28-25.



In Conclusion?

The fight for the betterment of the healthcare system is far from over. Since the shooting, no major actions, other than increased security, have been made in any of America's largest healthcare agencies. Sparse news has led to the "Luigism" online presence slowly declining, though support will likely revamp once his sentence is decided.

Mangione may have killed Thompson, but he also raised much-needed public outrage towards the American healthcare system. Moreover, the fact that healthcare leaders are making no moves to improve the system responsible for the wellbeing of millions of people is an exact manifestation of what Mangione is criticizing. How many more people have to die, CEO or civilian alike, for something to be done?

About the Baby

Consuelo Burnett

In her final day of life, she asked about the baby.

While her body armed innocents to attack itself, mistaking laymen for the enemy, medicine pumped in to frack disease from her blood—she asked about the baby.

No longer did golden chains hang from her frail neck; no makeup caked her paper skin; no polish coated her fingernails; any other day she would have been all dolled up. She hated when we saw her bare-faced, saw the valleys in her cheeks, saw the timid pink of her lips, saw her sickly—today, she didn't bother with disclaimers. Today, she asked about the baby.

Hospital's song hummed; orchestra of exit music, sounds slowing over a fade to solid black. She always saw real life in film. The baby sat at her bedside, long since aged out of infancy—in pained whispers, with its hand in hers, she asked about the baby.



Climate Change and the Escalating

Global Health Burden

Eddie Zhang

As climate change and pollution only continue to affect our planet's biodiversity and ecosystems, it has also created several consequences for humans (Healthcare Without Harm, n.d.). Whether it'd be from warming temperatures, rising sea levels, or more common natural disasters, humans across the world are beginning to feel the impacts of climate change (Healthcare Without Harm, n.d.). However, the victims of climate change are not just losing their property; their health is simultaneously deteriorating (EPA, 2025d).

Primarily, many have faced threats to their safety from extreme weather events and natural disasters as they have become more frequent and intense (EPA, 2025d). Floods caused by heavy rainstorms or hurricanes may not only cause damage to property and buildings but also put several people at risk of injury, especially if warnings do not come early enough (Ahmed, 2025). Additionally, these natural disasters can disrupt the ability of patients to receive effective healthcare and hospital systems (EPA, 2025d). Rising temperatures can lead to heat exhaustion and heat stroke, and heat is already the leading cause of weather-related deaths in the United States, which may also exacerbate preexisting conditions (World Health Organization, 2024).

Moreover, increased pollution has also significantly impacted water, food, and air quality around the world (EPA, 2025d). Rising temperatures have led to increased contamination of water supplies through creating environments fit for the growth of cyanobacteria and harmful algal blooms,

leading to increasing occurrences of gastrointestinal diseases (EPA, 2025a). Warmer climates have also led to a reduction in the availability of water supplies and the ability of farmers to grow certain crops in different climates (EPA, 2025c). They have also allowed pests to thrive, reducing the health and nutritional value of certain plants (EPA, 2025c). Finally, wildfires and winds may increase air pollution across the world, affecting those with respiratory conditions such as asthma and chronic obstructive pulmonary disease (EPA, 2025e).

Finally, climate change has also resulted in an increase in vector-borne diseases across the United States, such as Lyme disease (CDC, 2024). Pathogens have been able to survive in warmer and more humid areas where immunity to these diseases had not been previously developed,



allowing the prevalence of these diseases to rise in recent decades (Healthcare Without Harm, n.d.). The rise in the number of pathogens has only stressed healthcare systems across the world as a result of increased demand for care, forcing them to spend additional resources to meet this rising demand. In summary, climate change is estimated to cost the global healthcare system over 1 trillion dollars worth in additional cost, driving an estimated 44 million people into extreme poverty (World Economics Forum, 2024; World Bank Group, 2024).

More importantly, these consequences often disproportionately affect socially vulnerable and minority populations (EPA, 2025b). With rising temperatures, many low-income households, especially in urban areas, may not have the essential equipment (e.g. air conditioning) necessary to stay cool during heat waves. Additionally, researcher Vivek Sandra has explored how cities have been segregated and built such that wealthier areas receive lower temperatures due to investments in tree canopies and green spaces (Robert Wood Johnson Foundation, 2021). This means heatrelated deaths among these populations are expected to only increase as the climate crisis worsens, as urban workers are less and less likely able to cope with increased temperatures. Similarly, sanitization and desalinization are also becoming a concern in larger cities around the world, as freshwater sources in glaciers continue to lessen (EPA, 2025b). Unhoused populations only face tougher conditions, as they have no escape from the heat of rising temperatures, with many even succumbing to scorching temperatures. Moreover, during severe rainstorms, water levels can increase significantly, putting those close to creeks at risk of flash floods with little to no warning. With no place to live, many of the unhoused remain at the mercy of nature and climate change.

Overall, not only does climate change impact physical health, but it also may affect mental health as families are displaced and hurt by the consequences of the climate crisis (EPA, 2025b).



Ahmed, A. (2025, July 11). How climate change is worsening flooding and heavy rainfall | Great Lakes Now. Great Lakes Now. https://www.greatlakesnow.org/2025/07/how-climate-change-is-worsening-flooding-and-heavy-rainfall/

Robert Wood Johnson Foundation. (2021). StoryCorps: People share how climate change is harming health. RWJF.

https://www.rwjf.org/en/grants/grantee-stories/storycorps--people-share-how-climate-change-is-harming-health.html#4

U.S. Centers for Disease Control and Prevention. (2024, February 29). Effects of climate change on health. Climate and Health.

https://www.cdc.gov/climate-health/php/effects/index.html

United States Environmental Protection Agency. (2025a). Climate change and freshwater harmful algal blooms. Www.epa.gov. https://www.epa.gov/habs/climate-change-and-freshwater-harmful-algal-blooms

United States Environmental Protection Agency. (2025b). Climate change and the health of socially vulnerable people. EPA; United States Environmental Protection Agency.

https://www.epa.gov/climateimpacts/climate-change-and-health-socially-vulnerable-people

United States Environmental Protection Agency. (2025c). Climate change impacts on agriculture and food supply. EPA. https://www.epa.gov/climateimpacts/climate-change-impacts-

United States Environmental Protection Agency. (2025d). Climate change impacts on health. EPA.

agriculture-and-food-supply

https://www.epa.gov/climateimpacts/climate-change-impacts-health United States Environmental Protection Agency. (2025e). Why wildfire smoke is a health concern. EPA.

https://www.epa.gov/wildfire-smoke-course/why-wildfire-smoke-health-concern

WHO. (2024, May 28). *Heat and health*. World Health Organization; World Health Organization. https://www.who.int/news-room/fact-sheets/detail/climate-change-heat-and-health

World Bank. (2024, November 16). *Health and climate change*. World Bank. https://www.worldbank.org/en/topic/health/brief/health-and-climate-change

World Economic Forum. (2024, January 16). Quantifying the impact of climate change on human health. World Economic Forum. https://www.weforum.org/publications/quantifying-the-impact-of-climate-change-on-human-health/

Who's Profiting from Your Health?

Private Companies Expand Grip on Global Healthcare Systems, Raising Questions About Equity and Access

Eric Zhou

Throughout the recent years, advancements in technology have allowed healthcare systems around the world to improve, essential to saving lives. However, one trend has become surprisingly clear: the growing influence of private corporations within healthcare. Private companies are playing an increasingly larger role in shaping the global healthcare system, influencing how much people pay for care, how they receive care, and most importantly who gets left behind.

In many countries around the world, privatization is common, even becoming a core component of healthcare systems. Supporters of the change argue that privatization brings innovation and efficiency, while also reducing economic strain on national governments (Collier, 2023). However, critics argue that growing privatization is driving up costs, deepening inequality, and destroying the idea of healthcare as a human right (Shah, 2024).

Billions in Profits, Millions Without Care

The United States provides maybe the most obvious example. The US spends nearly 18% of its GDP on healthcare, yet it continues to suffer from widespread inequality in the healthcare sector (Centers for Medicare & Medicaid Services [CMS], 2024). According to a 2024 report from the Kaiser Family Foundation, nearly one in ten Americans remain uninsured, more than 25 million people (Kaiser Family Foundation [KFF], 2024).



However, the country's top five health insurers made combined profits of over \$55 billion in 2023 (Vanity Fair, 2024; New York Post, 2024). Pharmaceutical companies also reported record earnings.

"These companies aren't just providing services, they're shaping policy and controlling access," said Dr. Lena Alvarez, a health economist at Columbia University. "When shareholders are the priority, patients often lose" (Alvarez, 2024).

The Global Spread of Privatization

This trend isn't only happening in the US. In the UK, many sectors of the National Health Service (NHS) have been taken over by private companies, including diagnostic services and mental health treatment.



According to a British Medical Association report, about 7.3% of the Department of Health and Social Care budget (£8.8 billion) was spent on private independent-sector provision in 2017–18, and the proportion has continued to grow (British Medical Association [BMA], 2023).

In lower income countries, such as India and parts of Latin America, public health insurance schemes increasingly depend on private hospitals and clinics for delivery, raising concerns about affordability (World Health Organization [WHO], 2024).

Arguments For and Against

Supporters of privatization believe that market competition promotes innovation and encourages corporations to improve their efficiency. "Private providers often bring agility and expertise that bureaucratic systems can't match," said Mark Collier, spokesperson for the European Federation of Healthcare Companies (Collier, 2023). "Patients benefit from greater choice, and taxpayers get better value for money."

It cannot be denied that pharmaceutical firms have driven many recent breakthroughs in treatments for key diseases such as cancer and diabetes (Organisation for Economic Cooperation and Development [OECD], 2023).

But critics counter that profit driven healthcare often sacrifices public welfare. A 2023 review published in The Lancet found that increased privatization often corresponded with worse health outcomes (The Week, 2024).

Healthcare isn't like any other market," said Professor Ayesha Shah, a public health specialist at the University of Cape Town.

"When your life depends on a service, you're not shopping around, you're at the mercy of whatever system exists" (Shah, 2024).

Calls for Reform

Across the world, calls for reform are growing. In the US, lawmakers have introduced legislation to cap drug prices, ensuring medicine is affordable (U.S. Congress, 2024). In the UK, healthcare unions are also pushing for limits on NHS outsourcing, potentially limiting the growth of private corporations in the healthcare sector (BMA, 2023). And in Canada, court battles continue over the legality of private alternatives to publicly funded care (Globe and Mail, 2024).

Global organizations are also calling for tighter regulation. The World Health Organization recently warned that "unchecked commercialization" of healthcare could undermine efforts toward universal coverage and health equity (WHO, 2024).

What's at Stake

The stakes are high. As private companies take on an increasingly large role in healthcare, the question of who controls, and who profits from, essential health services has never been more urgent.

At the heart of this debate is a simple question," said Dr. Alvarez. "Is healthcare a business, or a basic human right? The way we answer that will determine the future of global health" (Alvarez, 2024).

Citations

Alvarez, L. (2024). Healthcare policy and inequality: Corporate influence in the U.S. system. Columbia University Press.

British Medical Association. (2023, June 28). Privatisation of the NHS. Retrieved from https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/commissioning/privatisation-of-the-nhs

Centers for Medicare & Medicaid Services. (2024). National health expenditure data. U.S. Department of Health and Human Services. Retrieved from https://www.cms.gov

Collier, M. (2023). Remarks at the European Federation of Healthcare Companies annual conference. EFHC.

Globe and Mail. (2024). Canada's courts debate private healthcare alternatives. Retrieved from https://www.theglobeandmail.com

Kaiser Family Foundation. (2024). Key facts about the uninsured population. Retrieved from https://www.kff.org/uninsured/issue-brief/key-facts-about-the-uninsured-population/

New York Post. (2024, December 10). Dem rep gets dragged online after inflating health insurance profit by \$1.32T. Retrieved from https://nypost.com/2024/12/10/us-news/dem-rep-gets-dragged-online-after-inflating-health-insurance-profit-by-1-32t/

Organisation for Economic Co-operation and Development. (2023). Pharmaceutical innovation and access to medicines. OECD Publishing. Retrieved from https://www.oecd.org

Shah, A. (2024). Public health and inequality in the era of privatization. University of Cape Town Press.

The Week. (2024, January 15). Pros and cons of privatising the NHS. Retrieved from https://theweek.com/news/science-
health/956032/pros-and-cons-of-privatising-the-nhs

U.S. Congress. (2024). Affordable Drug Pricing Act. Retrieved from https://www.congress.gov

Vanity Fair. (2024, December 13). AI-driven health care is turning us into numbers on a spreadsheet. Retrieved from https://www.vanityfair.com/news/story/ai-driven-health-care-turning-us-into-numbers

World Health Organization. (2024). Universal health coverage and the risks of commercialization. Retrieved from https://www.who.int



A Double-Edged Sword: the Future of Al in Healthcare

Fiona Wang

Abstract

AI in Healthcare has developed massively from ten years ago, and it is still growing to this day. Due to AI's growing popularity, it has started to be used in all forms of healthcare, from administrative jobs to surgeries. In fact, many hospitals have been incorporating different types of AI, including chatbots. However, there are still many issues that reside within AI healthcare, including ethicality concerns. These concerns stem from the inherent biases that exist within AI and the hospital. In order to properly address these issues, actions by hospitals must take place.





Al: A Doctor's Dream or Nightmare?

There's no denying that society is shifting towards an idealistic future where Artificial Intelligence (AI) will be the norm. Whether in healthcare, finance, or with chatbots, Artificial Intelligence is everywhere. AI is a technology that is intended to simplify and assist professionals in their line of work. It is commonly used to make computations and analyze data. However, it is not limited to these areas. For example, AI has enormous applications in healthcare. In fact, nowhere is it more significant than in healthcare decision making. For one, it can help with treatment and prescribing medicines, a time consuming and important job when working as a healthcare professional.

AI is already commonly used to predict illness and prevent patients from getting worse through medicinal practices. In fact, the methods it uses are usually based around population surveys where data is taken from a specific geographical area. Then the data is used by doctors who are able to predict the number of patients in need of care and the appropriate treatments. Since AI is such an important part of healthcare, it influences decisions significantly. However, the extent of risk factors involving minorities compared to the general population and the existence of bias have been unclear. There are also several issues that arise with the ethics of AI and its implications and how it is administered in hospitals and clinics. This paper will focus on the specifics of AI and how it can be applied to healthcare to try and better understand future implications.

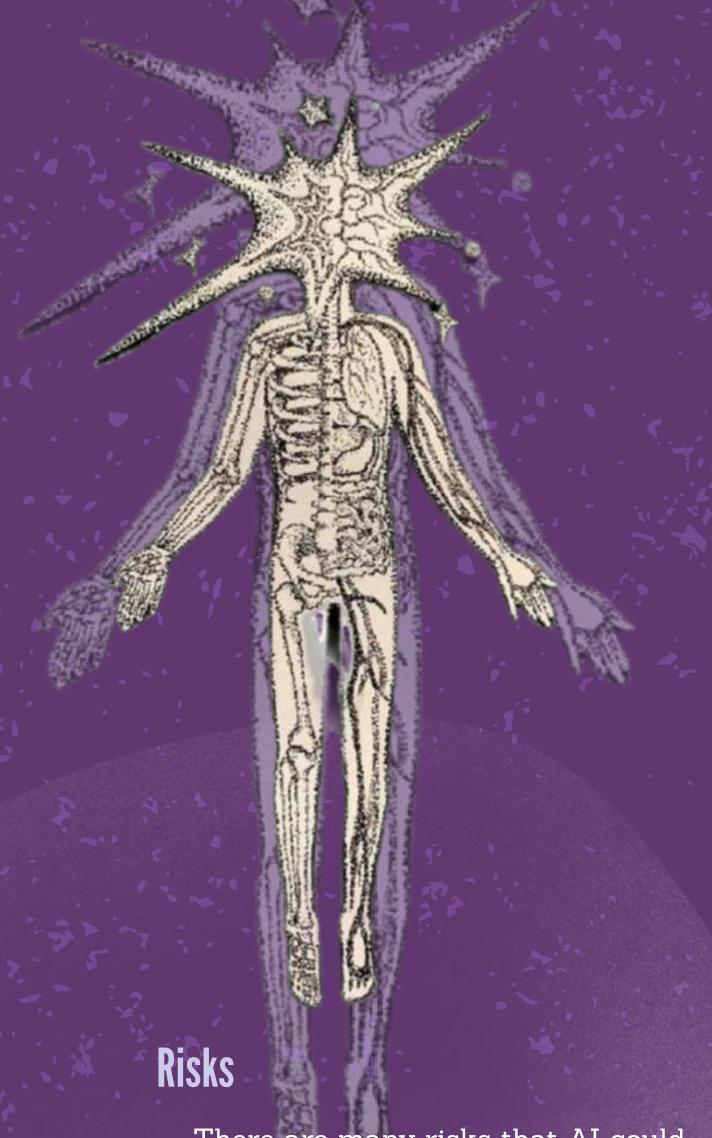
The Use of Al in Hospitals

AI is used for a multitude of reasons in healthcare. As noted previously, AI can be used for diagnoses, prediction and prevention, but it is also used for more specific purposes. This can range from more mundane purposes such as note taking and finance, to more important issues such as surgeries or developing pharmaceuticals. As a matter of fact, AI can be used for administrative purposes as well, such as billing. This is perhaps where it is the most reliable as the majority of usage is based around computational measures and typically doesn't harm patients it might encounter. It can also be used in appointment checkups, especially with physicians. Physicians commonly use AI to "take their notes, analyze their discussions with patients, and enter required information directly into EHR." However, the most controversial place for AI might be in surgical areas. This is because surgeries require years of technique development for even the most skilled surgeon. By putting a robot into the process, it encourages the possibility of high risk as many surgeries are life or death situations. Robots, with whatever experience they might have, still do not have as much technological and real life application compared to humans and may cause harmful circumstances for patients. Despite this, it's not definitive to say that robots must not be used for future surgeries, it just depends on how AI grows and develops.



Types of AI that Hospitals Use

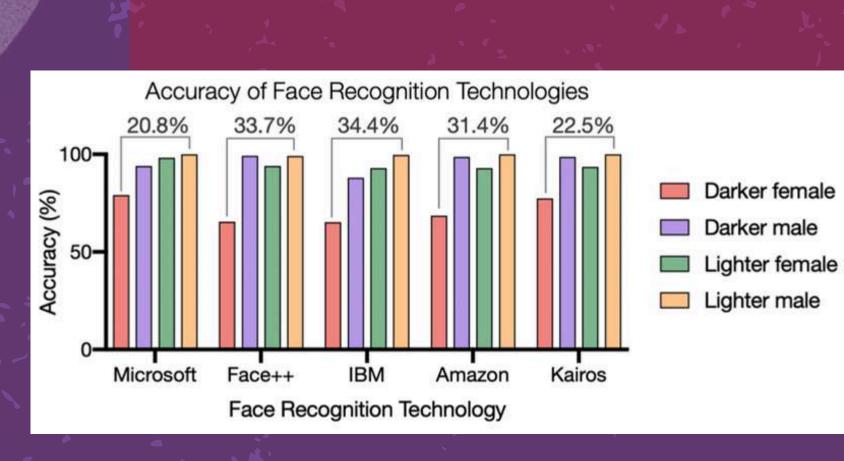
AI is employed in hospitals in many forms. For example, Al4S is a popular AI developed to help with predictions, integrating data sources, and social behavior patterns. AI was developed to help with prediction, the integration of different data sources including genomic sequences, environmental factors, and social behavior patterns. Another example of a type of AI used is one that is referred to as a "chatbot," which is essentially a robot that talks to the patient about the types of problems that they are dealing with and later diagnoses them based on the findings. This type of robot is similar to ChatGPT with the user interacting and inputting information while the AI outputs advice. In fact, many notable companies, such as Johnson & Johnson, use AI in their studies. In specific hospitals, a program called Nuance's Dragon Ambient Experience is used in order to keep track of doctor-patient interactions, and it can also write clinical summaries to make doctors' lives easier and reduce confusion between doctors and patients.



There are many risks that AI could present in the line of healthcare, such as bias. In order to consider AI bias, we must first understand what bias is. Bias refers to being naturally inclined towards one thing, whether intentional or not. This is clearly not an intended feature of AI, but it does exist. This is due to human bias because AI gets its data from humans. In fact, this bias occurs in many areas of AI usage. Whether through less medically oriented practices such as facial recognition or through population surveys done to assess and predict sickness, both have inherent prejudices. In a study done by Joy Adowaa Buolamwini, there were clear inaccuracies regarding the ability of AI(Buolamwini, 2024). For example, according to the chart above, accuracy differences occurred between females and males where the discrepancy was 9% to 20% and darker skin vs lighter skin that was similarly 10% to 21%.

Al Improvement and Increased Demand in Healthcare

The market for AI in healthcare has grown exponentially from when it was first introduced in the 1970s. In reference to dollars spent, AI in healthcare was worth approximately 0.8 billion dollars in 2022, but it is expected to grow to 17.2 billion dollars in about the next eight years (Pangarker, 2025). This demonstrates that AI is growing as a concept and has been slowly gaining traction. Although it might not seem as significant in modern times, the expected value of healthcare artificial intelligence in ten years is about 200% the value from two years ago, a promising outcome for the future of AI. According to TechFinitive, a company that specializes in AI, every one-in-six hospitals employs AI, which is certainly a substantial number. Similarly to this finding, Becker's Hospital Review found that 40% of women in administration use generative and analytic data in their work. This has improved 11% from five months prior, a large increase from the studies done previously (2024). In new statistics released in 2023, over 90% of hospitals use AI medical imaging systems to aid in diagnosis and treatment planning (Varnosfaderani, 2024). This demonstrates that hospitals do use AI on a large scale as it can simplify unexpected issues and improve quality of life.





It might be hard to believe that this is a large issue, especially as AI improves, but the problem lies in the difficulties it could cause in current times. It affects millions of lives across the world and is why hospitals and clinics need to make sure that everyone is being treated fairly, receiving the right amount of care depending on what they need.

Nonetheless, AI bias can also exhibit itself in other ways. In one instance, AI is commonly used in population surveys done to predict the number of patients that will get a certain illness. However, this can result in skewed results based on that population. In one study, a cardiovascular event was 20% less common in white people than black people. The event created a result that did not have the correct risk factor, which is a scary truth that must be accounted for regarding the future of AI in healthcare. Bias is hard to detect in AI because it's not intentional. This means that doctors and others are prone to using misleading information since society is so reliant on AI. The truth is, people are susceptible to false news because it has become the norm to trust "unbiased sources." In actuality, AI is just as biased as the person who puts the data into the machine.

How Al Bias in Healthcare can be Mitigated

The good news is AI bias can mostly be mitigated to ensure safety and accuracy in the future. Bias can be treated in many different ways. One of the most popular options being created is a diverse team to oversee AI allowing people that are ethnically different to work on a team together. AI cannot be trusted to be reliable, so including different races and religions would help guide AI in the right direction when trying to mitigate bias. This will guarantee that one person is not putting in unintentionally biased information as there will be fact-checkers. If one person were to gain full control, it would lead to extreme bias of the machine. In fact, once AI has improved through self-learning and developing, it will be able to combat the apparent human biases or mistreatment that might occur. While AI might be biased in modern days, it can still remove bias to a certain degree if detected.

Conclusion

The advantages and disadvantages of using AI in healthcare has long been discussed. However, it's clear to see that AI has impacted decision making in hospitals to a significant degree. Due to this, many risks arise and can cause unchecked biases. To combat this bias, action must be taken to make certain that no harm will come to patients because of AI in the future. AI is not necessarily a negative tool. It can be used in many beneficial ways, and its impact simply depends on how it is being used.



A Call to Action on Assessing and Mitigating Bias in Artificial Intelligence Applications for Mental Health. https://doi.org/10.1177/17456916221134490. Accessed 8 Aug. 2024.

Ahmad, Sayed Fayaz, et al. "Impact of Artificial Intelligence on Human Loss in Decision Making, Laziness and Safety in Education." Humanities and Social Sciences Communications, vol. 10, no. 1, June 2023, pp. 1–14. www.nature.com, https://doi.org/10.1057/s41599-023-01787-8.

Buolamwini, Joy. "Gender Shades." MIT Media Lab, https://www.media.mit.edu/publications/full-gendershades-thesis-17/. Accessed 16 Aug. 2024. Guni, Ahmad, et al. "Artificial Intelligence in Surgery: The Future Is Now." European Surgical Research, Jan. 2024. DOI.org (Crossref), https://doi.org/10.1159/000536393. Mhlambi, Sábëlo, and Simona Tiribelli. "Decolonizing AI Ethics: Relational Autonomy as a Means to Counter AI Harms." Topoi, vol. 42, no. 3, July 2023, pp. 867-80. Springer Link, https://doi.org/10.1007/s11245-022-09874-

Mihan, Ariana, et al. "Mitigating the Risk of Artificial Intelligence Bias in Cardiovascular Care." The Lancet Digital Health, vol. 0, no. 0, Aug. 2024. www.thelancet.com, https://doi.org/10.1016/S2589-7500(24)00155-9. Pohl, Jason. "What Can Psychology Teach Us about AI's Bias and Misinformation Problem?" Berkeley News, 22 June 2023, https://news.berkeley.edu/2023/06/22/whatcan-psychology-teach-us-about-ais-bias-andmisinformation-problem/. Sandford, Adam, et al. Approved by the CPA Board of Directors - January 2024. Suleiman, Adejumo Ridwan. "How Artificial Intelligence Has Made Man Lazy." Geek Culture, 12 Dec. 2022,

https://medium.com/geekculture/how-artificialintelligence-has-made-man-lazy-77aeefd09b19. The Unfinished Fight for Universal

Healthcare in America

Sophia Zhang

Despite decades of debate and mounting evidence supporting healthcare as a fundamental human need, the United States remains the only industrialized nation without full universal healthcare coverage. This persistent absence shows not merely technical challenges in the nation, but political, economic, and social dynamics deeply rooted in past failures. The healthcare system in the US is dominated by private interests and excessively competitive market logic, raising critical concerns about whether such competition genuinely enhances care quality or primarily fuels inequality and profit-driven priorities, which often take the place of patient welfare. Understanding why universal healthcare remains unrealized in the US will unveil a world of intertwining relations and changes between politics, governance complexities, and broader consequences for social cohesion.

In the mid-20th century, as much of the industrialized world in Europe moved towards universal health systems, the United States remained entrenched in political resistance that would lead to a different tone for decades after. In 1945, President Harry Truman posited a national health insurance program that would provide comprehensive coverage for all Americans, directly financed through payroll taxes. In his proposal, he outlined five main goals, including addressing the lack of trained professionals in healthcare, as well as lowering the cost of individual medical care (Harry S. Truman Presidential Library & Museum, n.d.).



The plan however, was immediately met with fierce resistance from the American Medical Association (AMA) and the private insurance industry. Both organizations framed it as a dangerous step towards "socialized medicine", and called it "an incitement to revolution" (Palmer, 2009). According to historian Beatrix Hoffman in her novel Health Care for Some, the AMA launched one of the most expensive lobbying campaigns of its time, spending over \$1 million to distribute pamphlets, radio spots, and even hiring a P.R. firm to spread the dangers of Truman's proposal (Eldred, 2019). It warned that the changes would strip physicians of autonomy and open the door to government control over patient care, which eventually convinced the public, leading to one of Truman's biggest failures during his term of presidency. This struggle only resonated further during the early Cold War years, when fears of communism spread across the United States. During the post-war era, the AMA and other allied private insurers recast Truman's plan as an alien, "foreign" ideology (Moore, 2025).



Throughout US history, powerful economic and political interests have strongly affected healthcare policy as well, constructing a major barrier to universal health coverage. The complexity of the US government, with its many veto points, including bicameral legislature, federalism, and a strong judiciary, creates obstacles. Well-funded interest groups are able to block or dilute reforms (Greer & Mendez, 2015). The power of veto points give private insurance companies, hospitals, and pharmaceutical firms exceptional leverage to oppose policies threatening their profits. Moreover, the United States' fragmented political institutions require large coalitions to pass health forms, making it harder for such programs to be approved.

By the 1960s, the United States had settled into a field of separate health programs; in 1965, President Lyndon B. Johnson signed the Medicare and Medicaid Act (National Archives, 2022). Medicare would primarily benefit the elderly, Medicaid would help low-income individuals, and the rest of the working-age population would rely on employer-based coverage. These programs were born out of political compromise, each tailored to fit a specific "constituency" rather than form part of a centralized system. Over time, their existence began to harden the political and logistical barriers, driving the US further away from unification. As one analysis puts it, implementing universal healthcare in the United States requires integration across multiple systems, or Americans may face delays in receiving care from existing providers or receive timely care at all (Florida Healthcare, 2024). Any attempt to move towards universal coverage would now require the dismantling or complete restructuring of these pillars that continued to dig deeper; from this, a certain fear began to arise among beneficiaries, about losing the coverage they had.

Beyond the realm of policy, the US faces a uniquely American barrier: political culture. For much of the 20th and 21st century, the idea of government-run healthcare has collided with deeply rooted suspicion of centralization.

Even when polls and even politicians advocate majority support for expanding coverage, that very support also collapses when proposals are framed as government takeovers, or socialized medicine. Many Americans believe single-payer healthcare systems will increase the likelihood that "budget restraints would reduce individual choice in healthcare decisions" (MBA Healthcare Management, 2024).



As the Heritage Foundation puts it, government-controlled healthcare "imposes a high cost on patients and puts medical coverage decisions in the hands of the government bureaucrats" (Fishpaw & Paulton, n.d.). In this framing, the issue is not simply about who pays for care, but about who controls it, and in the American mindset, whether that control is compatible with the nation's individualistic ideals. Unlike in many European nations, the American political imagination remains anchored in the primacy of personal responsibility. As a result, centralization is often perceived not as a safeguard, but a constraint, and something that limits autonomy.

This long history of political resistance, structural fragmentation, and cultural distrust towards centralized healthcare has left the USA with a system in which private markets play an outsized role in determining who receives care, how it is delivered, and at what cost. Rather than functioning as a supplemental option alongside a more universal framework, private healthcare has become the backbone of coverage for much of the population—shaping not only patient experience, but the broader values of the industry itself. This raises an important question: in a country where access is so closely linked to market dynamics, does competition in the private sector of health care truly drive quality and innovation as it has promised to do, or does it only deepen inequality?

While competition in private healthcare systems may foster limited innovation and operational efficiency, there exists overwhelming evidence that shows how it often leans towards unequal access, fragmented care, and a prioritization of profits over patient care. Private care, which is often provided in the USA by "for profit" hospitals and self-employed practitioners (Basu et al., 2012), has been known to generate certain consumer-facing benefits.



In a marketplace model, where providers compete for patients, natural pressure exists on all to streamline services, reduce wait times, and adopt technologies as quickly and efficiently as possible. Private hospitals have also been shown to be more likely to offer better physical facilities, equipment, and overall environment; patients and recipients of private health service have stated that the quality of services provided was better than that of public hospitals (Alijanzadeh et al., 2016). However, these gains are often surfacelevel, and mostly, not evenly distributed. The ability to access private healthcare systems remains closely tied to income, geographic area, and insurance status (Agency for Healthcare Research and Quality, 2021), causing American society to be split into a spectrum when healthcare's goal is to provide "equal" service for all those in need.

Rather than leveling the playing field, competition often disproportionately disadvantages lower-income individuals, rural residents, and racial minorities. Hispanic populations face worse access than non-Hispanic Whites on over 79% of measures, while American Indian, Alaskan Native, Asian, and Black groups experience up to 53% poorer access (Agency for Healthcare Research and Quality, 2021).

Income is a major factor: households below the poverty line have 71-79% worse access, and among adults aged 18–64 with incomes under 100% of the federal poverty level, 26.9% are completely uninsured. Geography compounds these gaps, with residents of small or noncore areas—and even some large central metro areas—reporting 71% poorer access than those in large fringe metro areas. Insurance disparities persist as well: Hispanic and non-Hispanic Black people are less likely to have private coverage than non-Hispanic Whites, and coverage declines with age, from children (0-17) to middle-aged adults (45-64) in the same income brackets. In practice, highincome non-Hispanic White adults aged 18-44 in large fringe metro areas are the most likely to have private insurance—yet they represent only about 13% of Americans, leaving the remaining 87% at a systemic disadvantage in the private healthcare market.

In competitive private healthcare systems, the intense focus on market share and profitability often leads to an overall fragmented care experience for patients. In the USA, there is a lack of investment in primary care, which has resulted in a nationwide shortage of clinicians, particularly those playing vital roles in reducing need for some costly and sometimes unnecessary care services (Blumenthal et al., 2024). It has been said that the fragmented nature of the US's healthcare system makes it difficult for even many well-insured patients to access effective care. Additionally, thousands of health insurance products and a complex system of management policies has forced patients to navigate webs of disconnected providers. Aside from resulting in poor communication and coordination, this increases the risk of duplicated tests, conflicting treatments, and overall gaps in care that might be the determining factor in recovery.

The structural flaws in these systems were revealed most during the COVID-19 pandemic. While both the US and the United Kingdom experienced overwhelmed hospitals and resource nations throughout the nation, the US ranked last in a 2021 Commonwealth Fund analysis of 11 developed healthcare systems (Jacob, 2023). The UK's National Health Service, a single-payer system, ranked 4th overall; its centralized infrastructure helped greatly reduce preventable mortality compared to the US. 90% of Britons continued to support its core principles of free, tax-funded, accessible healthcare through the pandemic, while the US has remained deeply divided on system reform up to this day. MIT economist Jonathan Gruber noted "the importance of universal, non-discriminatory health insurance coverage in the United States." This was the gap that left millions more vulnerable during the 2020 job loss surge. Ultimately, while no system proved perfectly prepared for the pandemic, fragmentation was shown to exacerbate disparities in the US and undercut public health when it was needed the most.

In a system driven by profit, many private healthcare providers have become incentivized to prioritize high-profit services over long-term preventative care. However, when revenue becomes the central object, the lives of patients "lose". Studies have found that for-profit hospitals were associated with higher patient mortality rates (up to 2% higher risk) compared to their counterparts (Moszynski, 2006). Evidence from other studies have shown that private hospitals are more likely to "cherry-pick" high-income, well-insured patients, leaving those with chronic conditions or public insurance undeserved (Glynn, 2022). The same study also highlighted a process called "cream skimming", a practice where healthier or more profitable patients are selectively admitted. A meta-analysis revealed that the pursuit of profit may come at the cost of staffing levels, care quality, and patient safety. These systemic patterns of behavior demonstrate how vulnerable populations often face the steepest consequences when care becomes a commodity, and not because treatment is unavailable, but because it is unprofitable. The root of the medical field has been compromised by the greed of providers for money.

When profit becomes the compass of a healthcare system, it undermines the very foundation of public health. According to the National Institute of Health,

"The basic right of access to healthcare of appropriate quality is a fundamental humanitarian principle that should be enjoyed by all citizens of all countries, and the international community should recognize the obligation to promote these ideals by any means available" (Nunes et al., 2016).



Apparent failure of this is nowhere more visible in the US than in the concept of medical bankruptcy. From 2013-2016, a national survey of bankruptcy filers revealed that 66.5% cited medical expenses or illness-related income loss as contributors to their bankruptcy, which is around 530,000 medical bankruptcies annually (Himmelstein et al., 2019). Despite the Affordable Care Act's implementation to expand coverage, the proportion of bankruptcies due to medical causes remained virtually unchanged from earlier years. In one case, a Nobel laureate was forced to sell his medal to pay medical bills, and over 250,000 annual medical fundraisers signal the widespread economic burden on GoFundMe. Even insured Americans face mounting deductibles, copays, and insufficient disability protections, which leaves them with few assets to protect, and, in the end, virtually no financial cushion in the event of serious illness. In contrast to nations where universal coverage helps insulate economic situations, the US system leaves millions vulnerable. The population is susceptible not only to illness, but to the loss of their homes and jobs as well. Treating healthcare as a business as private systems do only perpetuates inequality, exposing a deep moral failing of society.

The failure to implement universal healthcare in the United States cannot be distinguished from the country's unique political landscape. The system, characterized by entrenched, corrupt interests, multiple veto and power points, and a cultural commitment to market competition, has been shown to exacerbate equitable care. It simultaneously fragments access and further pushes disparities, particularly along racial and gender lines, challenging the ideals of healthcare as a right, rather than a commodity. Ultimately, any meaningful progress towards universal coverage must acknowledge that healthcare reform is as much a struggle over values and political power as it is about economics, and at its root, medicine.

Citations

Agency for Healthcare Research and Quality. (2021). Access to healthcare and disparities in access. In www.ncbi.nlm.nih.gov. Agency for Healthcare Research and Quality (US).

https://www.ncbi.nlm.nih.gov/books/NBK578537/

Alijanzadeh, M., Moosaniaye Zare, S. A., Rajaee, R., Mousavi Fard, S. M. A., Asefzadeh, S., Alijanzadeh, M., & Gholami, S. (2016). Comparison quality of health services between public and private providers: The Iranian people's perspective. *Electronic Physician*, 8(9), 2935–2941. https://doi.org/10.19082/2935

Azizi, M., & Elyasi, F. (2017). Biopsychosocial view to pseudocyesis: A narrative review. *International Journal of Reproductive BioMedicine*, 15(9), 535–542. https://doi.org/10.29252/ijrm.15.9.535

Basu, S., Andrews, J., Kishore, S., Panjabi, R., & Stuckler, D. (2012). Comparative performance of private and public healthcare systems in low- and middle-income countries: A systematic review. *PLoS Medicine*, 9(6). https://doi.org/10.1371/journal.pmed.1001244
Blumenthal, D., Gumas, E. D., Shah, A., Gunja, M. Z., & Williams II, R. D. (2024). Mirror, mirror 2024: A portrait of the failing U.S. health system. *The Commonwealth Fund*. https://doi.org/10.26099/ta0g-zp66
Eldred, S. M. (2019, November 12). *When Harry Truman pushed for universal health care*. History. https://www.history.com/articles/harry-truman-universal-health-care

Fishpaw, M., & Paulton, M. (n.d.). Government-controlled health care: Rhetoric versus reality. The Heritage Foundation.

https://www.heritage.org/article/government-controlled-health-care-rhetoric-versus-reality

Florida Healthcare Plus. (2024). The debate over universal healthcare in the USA: Perspectives and projections. Florida Healthcare Plus. https://floridahealthcareplus.com/the-debate-over-universal-healthcare-in-the-usa-perspectives-and-projections.html

Glynn, E. H. (2022). Corruption in the health sector: a problem in need of a systems-thinking approach. *Frontiers in Public Health*, *10*(1). https://doi.org/10.3389/fpubh.2022.910073

Greer, S. L., & Méndez, C. A. (2015). Universal health coverage: A political struggle and governance challenge. *American Journal of Public Health*, 105(S5), S637–S639.

https://doi.org/10.2105/ajph.2015.302733

Harry S. Truman Library & Museum. (n.d.). The challenge of national healthcare | Harry S. Truman. Harry S. Truman Library & Museum. https://www.trumanlibrary.gov/education/presidential-

inquiries/challenge-national-healthcare

Himmelstein, M. S., Puhl, R. M., & Quinn, D. M. (2019). Overlooked and understudied: Health consequences of weight stigma in men. *Obesity*, 27(10). https://doi.org/10.1002/oby.22599

Jacob, Z. (2023, May 26). A comparative analysis of the US and UK health care systems. Michigan Journal of Economics.

https://sites.lsa.umich.edu/mje/2023/05/26/a-comparative-analysis-of-the-us-and-uk-health-care-systems/

Markel, H. (2015). Give 'em health, Harry. *Milbank Quarterly*, 93(1), 1–7. https://doi.org/10.1111/1468-0009.12096

MBA Healthcare Management. (2024). 5 arguments against single-payer healthcare. MBA Healthcare Management. https://www.mba-healthcare-management.com/lists/5-arguments-against-single-payer-healthcare/

Moore, C. D. (2025). "The voluntary way is the American way": The AMA's campaign for private health insurance, 1945–1950. *Journal of Policy History*, 37(3), 199–222.

https://doi.org/10.1017/s0898030625000041

Moszynski, P. (2006). Corruption in health care "kills en masse." *BMJ*: British Medical Journal, 332(7536), 257.

https://pmc.ncbi.nlm.nih.gov/articles/PMC1360388/

National Archives. (2022, February 8). *Medicare and Medicaid Act* (1965). National Archives. https://www.archives.gov/milestone-documents/medicare-and-medicaid-act

Nunes, R., Nunes, S. B., & Rego, G. (2016). Health care as a universal right. *Journal of Public Health*, 25(1), 1–9.

https://doi.org/10.1007/s10389-016-0762-3

Palmer, K. (2009). A brief history: Universal healthcare efforts in the US. PNHP; Physicians for a National Health Program.

https://pnhp.org/a-brief-history-universal-health-care-efforts-in-the-us/

The history and politics of healthcare

Fiona Wang

The History

Healthcare is one of the leading industries to date, with millions of people across the world receiving aid at one point in their lives. But healthcare hasn't always been as advanced as it is today. In fact, the healthcare industry has developed immensely over the past decade. This begs the question, how?

For one, major laws regarding healthcare have been enacted in order to ensure progress. About a decade and a half ago, on November 7, 2009 (later amended in 2010), one of the most important acts to date was signed into rule- the Affordable Care Act (ACA). This act, as demonstrated by its name, was made with the intent to aid those who could not afford to pay for healthcare. Along with this, it set a precedent. Kids were allowed to be on their family's plan until 26, and ACA plans would provide subsidies (government financial aid) to those who needed it. With this law came others. One of the most important was the 21st Century Cures Act, passed in 2016. This act gave funding to evolve healthcare technologies, including medical research, drugs, and more. Without these laws, the healthcare industry would not be as prominent as it is today.

As laws regarding healthcare began to be enacted, there was another factor supporting its growth: technologies. Many ways of tracking health became normalized, including watches. These portable devices made it easy to track different forms of fitness, including steps, heartbeat, and even data about sleep. Other forms of health tracking also became available, referred to as "mHealth." mHealth, which stands for mobile health technologies, includes phones and tablets that make it easy for patients and doctors to communicate remotely. The premise of mHealth was popularized during COVID when social distancing was mandated in 2020, and shows how technologies developed from a dire situation to ultimately benefit the healthcare industry.

Finally, the introduction of AI has recently become popularized in the healthcare industry. Of course, the use is heavily monitored and not fully implemented yet, but it is still prominent in many hospitals. At the moment, it is being used for the sorting of patient information and helping in diagnosis. The introduction of AI has sped up how healthcare is implemented, and the industry is only continuing to grow. Hopefully, the implementation can be used in moderation since AI is still being questioned, both in accuracy and morality.

he healthcare industry is one of the most important industries, with it being worth around 9.25 trillion in America alone. Due to the many implementations and improvements, that number is only expected to rise. These last few decades have been instrumental to healthcare, and it's going to continue to grow. What developments will come next?





The Politics

Politics are worming its way into healthcare, an industry with the purpose of aiding those in need. While this is not necessarily a good thing, it's also inaccurate to say it's a bad thing, as many advancements have been made due to politics. In this article, the discussion of politics in healthcare will be brought to light and expanded upon.

One of the most controversial examples of politics lending itself to healthcare is the "Big Beautiful Bill," officially a law in 2025. While this law is not specifically focused on medical aid, it still affects millions of Americans. Trump's law means that Medicaid funding is being cut, which is estimated to affect 7-11 million Americans losing coverage. Not only that, Affordable Care Act (ACA) support is being repealed and women's and LGBTQ+ healthcare is being restricted. While some may see this as necessary in order due to the tax cuts to the middle class, this law will strip many of the healthcare they need. For this reason, it was heavily contested and debated within both the media and politics.

Next is another majorly debated topic in healthcare, which is where different states have laws limiting or banning abortions. This did cause widespread arguments, with the main slogan for pro-choice (the choice for abortions) supporters being "Our body, our choice," and the pro-choice (against abortions) argument was that fetuses were humans and therefore deserved to have life. The decision of the states rallied protestors from all around the country and caused controversy. Ultimately, it was a blow to many people's trust in the government, negatively affecting the perception of politics in healthcare.

However, politics have not been all bad in healthcare. Many positive laws have been implemented, including the ACA and different responses to different crises. For example, take the bill, SUPPORT for Patients and Communities Act. This bill was created to promote recovery from opioid use and was one of the positive ways politics have been used in healthcare. Another positive way politics have been implemented into healthcare is during the COVID-19 lockdown. There was emergency funding provided as well as much research on how to prevent and mitigate the disease.

In America's history, there have been many positive and negative examples of politics in healthcare, and there will continue to be in the foreseeable future. The truth is, healthcare is closely linked to politics and the laws that have been created, which is why many laws are heavily scrutinized by the public.



Psychology and the Treatment of the "Mad" in the Medieval and Early Modern Era

Jerry Han



The human mind is a concept that has fascinated people across cultures and eras. However, scientifically rigorous investigations into psychology, as well as the standardization of treatment for mental health, is a fairly recent development. Both popular and academic perceptions of the Medieval Era in Europe as a backwards, superstitious society have often led to a lack of interest in the development of psychology and psychotherapy of the era and their impact on the ideas of later periods.

Nevertheless, European attitudes towards mental health and their methods of treatment were more complex and diverse than commonly believed.

Classical and Medieval philosophers were keen investigators of the dynamic between mind and body. Aristotle associated rationality, cognition, and the senses with the concept of the soul, while Galen had stated that they were physically present in the brain; the Neo-Platonists, on the other hand, divided the soul into two components-the rational aspect was inhabited the head, and the emotional one was found in the body. These theories naturally raised the question of to what extent the processes of the mind were determined by physical, bodily factors or immaterial, abstract forces like the soul. Ultimately, medieval philosophers in both Europe and the Middle East came to see mental processes as involving both. Galen's theory of the four humors, or fluids-blood, phlegm, yellow bile, and black bile- was used to explain both physical ailments and mental illness. Each of the four humors was regarded as corresponding to a personality type, and while every person was regarded as having varying amounts of the four, thus creating unique personalities, too much imbalance would result in extreme emotions. Most famously, too much black bile was thought to make one melancholy and depressed-scholars were often thought of as having such a trait. To balance the humors, doctors could drain the blood of patients, or simply recommend a healthy diet that included plenty of vegetables. As the Middle Ages progressed, illness was seen less as a punishment for sin and more as the result of physiological factors or demonic possession. Sources show that religion and scientific views were largely intertwined, and sufferers looked to both God and medical views on melancholy and mania to reassure themselves. The theologian Thomas Aquinas regarded spirit possession as only one possible cause of madness.

Court records from the period demonstrate that legally and politically, there was a general lack of interest in attributing supernatural causes to mental health issues. The term "lunatic" was used as an umbrella term for a wide variety of behavior deemed abnormal, excluding intellectual disability. In England, one of the Crown's duties was to sustain and maintain the property of people diagnosed with lunacy. The royal administration could not use a lunatic's wealth and income for any purpose other than sustaining him and his family. Such affairs were handled by the Court of Chancery, a division of the High Court of Justice, on an informal, ad hoc basis. Although the Chancery was primarily intent on protecting property and was therefore more intent on serving landowners and nobles, a significant number of lunacy cases involved the lower classes.

A jury would be summoned by local officials to determine whether a person was mentally disabled or insane. There was never a standard, consistent means of investigating mental illness. However, more importantly, reports documenting the examinations were mundane and matter-of-fact in their treatment of the nature and causes of mental illness. Supernatural explanations, including interference from God or demons, were indeed quite rare. Instead, naturalistic causes like physical illness, injury, or trauma were ascribed to patient, and mental health was regarded simply as an impairment of the mind resulting from these causes. For example, a jury in 1366 proclaimed that a man's incredibly violent tendencies were incited by "fear of his father," while another case stated that a man suffered madness because he suffered from "a burning fever by means whereof and of his old age...he sometimes is deprived of his memory and for the time becomes distracted."

Attitudes toward mental illness in the Medieval era were multifaceted and varied. Religion and science, and mind and body, were integrated, and informed complex understandings of psychology under various social circumstances.

Citations

Kroll, J., & Bachrach, B. (1984). Sin and mental illness in the Middle Ages. *Psychological Medicine*, 14(03), 507. https://doi.org/10.1017/s0033291700015105

Neugebauer, R. (1979). Medieval and early modern theories of mental illness. *Archives of General Psychiatry*, 36(4), 477. https://doi.org/10.1001/archpsyc.1979.01780040119013

Saunders, C., & Fernyhough, C. (2016, October 10). *The medieval mind*. The British Psychological Society. https://www.bps.org.uk/psychologist/medieval-mind

Schindler, M. (2025). *Mental illness in the Middle Ages: A new perspective*. Medieval History. https://historymedieval.com/mental-illness-in-the-middle-ages-a-new-perspective/

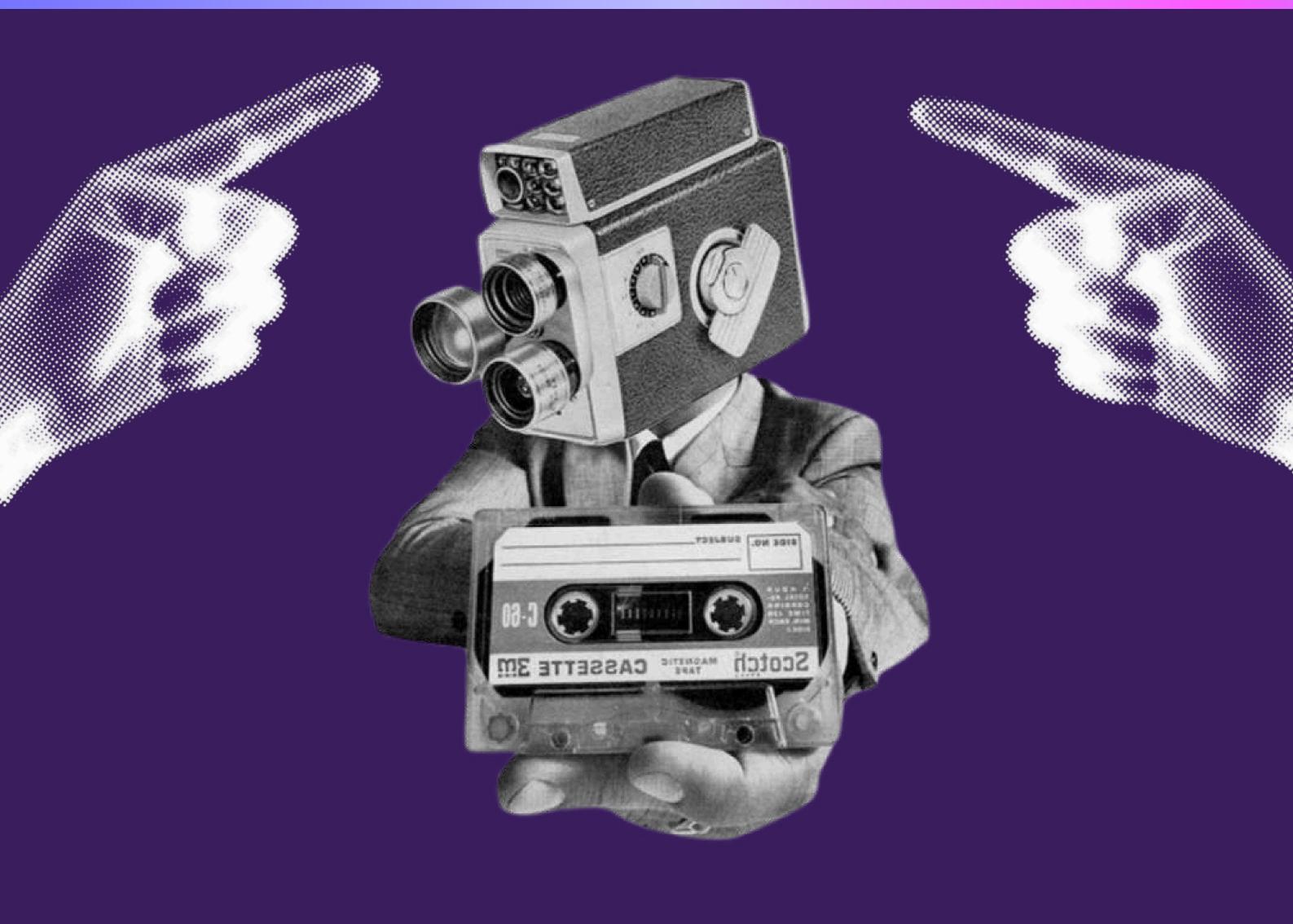








GLASSIFIEDS



Organization: Thrive

Information: Thrive, a nonprofit organization focused on helping youth build confidence through public speaking. The goal is to empower youth to become strong communicators and self-advocates, especially those who struggle with mental illness, physical limitations, or social anxiety.

Deadline: None

Contact info: Email Cynthia Ma at cynthia.ma.@ingeniusprep.com.

Organization: Music Education Project

Information: Music Education Project is looking for Unity/C# developers to further the project. The music education project is focused on developing educational technology to teach basic music theory to children through engaging, game-based learning built with Unity and C#. Students proficient in English, a basic ability to read musical notation, and with a background in Unity and C# programming and game logic experience are encouraged to get involved.

Deadline: None

Contact info: Contact Yinuo Nora Wang at YinuoWang2008@outlook.com.

Organization: Everfeed

Information: EverFeed is an organization that provides solutions to helping animals in need. EverFeed's website aims to provide information on different animals housed at under-resourced shelters, encouraging the public to virtually donate food through the platform. The team is currently seeking student collaborators to scale the organization.

Deadline: None

Contact info: Contact Raeka at raeka_ren@outlook.com.

Organization: International Youth Forum

Information: International Youth Forum (IYF), in partnership with the BC Children & Youth Connection Society, will be held from August 26th to 28th via Zoom. Students on the initiative's leadership team will colead the global conference, reaching out to other youth-led organizations worldwide and/or using organizational and communication skills to manage spreadsheets, email correspondence, and social media accounts. IYF will bring together insightful, passionate, and compassionate youth from various cultural and demographic backgrounds to share their diverse perspectives, connect and build global opportunities, and take action on the current mental health crisis.

Deadline: None

Contact info: http://bc-youth.com/youth-forum

Organization: Exempli Gratia (Student-led organization)

Information: Exempli Gratia is a nonprofit based in Vancouver dedicated to making legal education more accessible to students. Through expert panels, interviews, and networking events, members can connect with real lawyers and law students to gain insight into their future careers. Mock trial practice opportunities are also available. Exempli Gratia's magazine provides a platform for students to publish legal articles and engage with expert opinions alongside weekly posts, research pieces, and discussion forums. No prior knowledge or experience is required.

Deadline: None Contact info:

https://docs.google.com/forms/d/e/1FAIpQLSeIyrilPjsxmUbEHTSfDRhB0kqDQOH6HbW30q8gga9B_7IAXA/viewform

Organization: Letters of Solace

Information: Letters of Solace, a student-led mental health organization, that distributes handwritten and digital letters to youth facing loneliness, isolation, or mental health struggles. So far, over 50 volunteers have written more than 400 letters across two countries. They are currently seeking more student volunteers to write letters.

Deadline: None

Contact info: https://docs.google.com/forms/d/e/1FAIpQLSfP4e-d6Q1p2scvPaIJJwcD-

OGXyiBLn_1YViuw9rmlLKHKug/viewform

Organization: HarmoniEats Initiative (Student-led organization)

Information: HarmoniEats Initiative is a nonprofit organization dedicated to educating and empowering individuals with food allergies and autoimmune diseases, such as Celiac Disease, by providing accessible, allergy-friendly resources and fostering a supportive community.

Deadline: None

Contact info: Reply to harmonieatsinitiative@gmail.com with your resume

Organization: Half the Sky (Student-led organization)

Information: Half the Sky is a NPO whose mission is to drive the sustainable fashion movement as well as support the human rights of garment workers. By championing ethical practices and fair treatment, we aim to transform the industry and create a more just and responsible world for all.

Deadline: None

Contact info: Reply to Olivia Wei at <u>marketinghalfthesky@gmail.com</u> with your resume

Organization: Quest for Clarity (Student-led organization)

Information: Quest for Clarity is an international nonprofit organization aiming to provide free, high-quality, science-based mental health resources and to fight the stigma against mental health support. Materials include articles, reels and videos, visual posts, podcasts, events, and a resource hub.

Deadline: None

Contact info: Reply to askq4c@gmail.com with your resume

Organization: Narratives of New Canadian Youth (Student-led organization)

Information: Created in 2024, Narratives of New Canadian Youth is a Toronto-based photojournalism project aimed at highlighting social, political, and economic issues faced by student immigrants to dismantle negative stereotypes among Canadian youth. Each anecdote provides unique insight into the daily lives of newcomer students from around Canada.

Deadline: None

Contact info: Share your story at <u>narrativesofnewcanadianyouth@gmail.com</u>

Organization: Melodic (Student-led organization)

Information: Melodic is a registered student-led NPO supporting foundations that provide musical education

for under-resourced schools.

Deadline: None

Contact info: Reply to ggu26@ucc.on.ca with your resume

Organization: Follis (Student-led organization)

Information: Follis is an online education initiative that strives to bring philosophical ideas and arguments into our daily lives through bimonthly seminars on urgent societal topics like AI and climate change. Currently, they're looking for several co-organizers to put together online workshops across the world.

Deadline: None

Contact info: https://forms.gle/BqN3m824bfsWqb6Q7 or reply to maeeee26@outlook.com with your resume

Organization: The Body Project

Information: Sponsored by Stanford, The Body Project is an evidence-based, youth-led initiative designed to help young women challenge unrealistic beauty ideals and build body acceptance through writing, discussion, and interactive activities. Implemented by the National Eating Disorders Association as well as hundreds of colleges, The Body Project has been adopted by about 20 high schools thus far. For students interested in public health, psychology, and/or social justice, there are leadership opportunities available.

Deadline: None

Contact info: Contact Selina by email selinaxi007@gmail.com or DM @selinaaxi on Instagram.

Organization: Illustrations of Children's Health (Student-led organization)

Information: Illustrations of Children's Health writes and illustrates children's books about common illnesses. Young children often have difficulty understanding diseases, and the organization helps them develop a positive attitude toward different health situations.

Deadline: None

Contact info: Reply to ammmyzhu515@gmail.com with your resume

Organization: Muggle Muggle (Student-led organization)

Information: Muggle Muggle is a club that combines Harry Potter, business, and art to develop community through appreciation for the magical world. From designing and creating products to advertising and selling them, Muggle Muggle members share their fun items with others and donate proceeds to selected charities.

Deadline: None

Contact info: Reply to MuggleMuggle_24@outlook.com with your resume

Organization: Health Access for All (Student-led organization)

Information: Do you want a community where everyone can find and afford healthcare? If so, join this

emerging student organization.

Deadline: None

Contact info: Reply to healthaccessforallnpo@gmail.com with your resume

Organization: Mosaic Minds (Student-led organization)

Information: Mosaic Minds is helping neurodivergent youth within Toronto by addressing the significant gap in services and resources available to them and their families. They are looking for Toronto students with website design, networking, public speaking, filming, or editing skills.

Deadline: None

Contact info: Reply to nancyxiao2027@gmail.com with your resume

Organization: Behavioral Blueprint Podcast (Student-led organization)

Information: Are you curious about behavioral science, consumer psychology, or the future of AI? Want to unpack how biases, culture, and AI shape—and manipulate—what we click, choose, and buy? The Behavioral Blueprint podcast is growing and looking for motivated collaborators to bring episodes to life! Open positions include audio editor, social media manager, and project manager. You don't need to be an expert—just curious, reliable, and excited about what they're building!

Deadline: None

Contact info: Reply to atw65@georgetown.edu with your resume

Organization: Kaleidoscope Magazine (Student-led organization)

Information: Student-led virtual publication Kaleidoscope publishes creative writing, art, and much more. The team is looking to expand the organization with potential for fundraisers and writing competitions to be planned in the future. Currently, Kaleidoscope is looking for website developers and contributing writers/artists. The magazine is open to multiple languages with no specific deadlines for submissions.

Deadline: None

Contact info: https://airtable.com/appLuKgRlJLhKiOtH/shrLPVkArQAyhQOU3?prefill_Opportunity%20of%20Interest=Kaleidoscope

Organization: PassNPlay Project (Student-led organization)

Information: The PassNPlay Project is a nonprofit organization founded by high school students in Toronto with an aim to provide sports opportunities for underprivileged youth around the world. The organization donates sports equipment, offers coaching sessions, and raises funds for sports programs. Currently, PassNPlay has nine chapters in the Toronto area, but they are looking to scale internationally. Students interested in establishing their own chapters in their local communities or schools are encouraged to join.

Deadline: None

Contact info: Email <u>passnplayproject@gmail.com</u> with your resume.

Organization: 30-Day Me (Student-led organization)

Information: 30-Day Me is an app designed to help users build habits and achieve personal growth through structured 30-day challenges. The platform offers daily progress tracking and AI-powered challenge recommendations to support users in forming routines. 30-Day Me is looking for partnerships with organizations or clubs that can benefit from customized challenge ideas tailored to members' goals. Deadline: None

Contact info: Visit www.30day.me or contact Franklin Zhang at franklinzhang06@gmail.com and Sonya Zhang at sonyayzhang@gmail.com.

Organization: Beyond the Buy (Student-led organization)

Information: Beyond the Buy is an initiative that uncovers the hidden environmental cost of daily consumption habits using infographics and visuals. They are currently building a website featuring an interactive map to highlight origin countries and showcase real stories behind consumption. Beyond the Buy is currently looking for a student experienced with WordPress and/or web development to help elevate this vision. The person involved would work closely with a passionate and driven team to craft a digital experience that's both engaging and educational.

Deadline: None

Contact info: Check out beyondthebuy.dreamhosters.com and reach out via direct message on Instagram (@beyondthebuy).

Organization: FluentFront (Student-led organization)

Information: FluentFront is a public speaking practice tool designed to help you speak clearly, confidently, and with purpose — no matter the setting. Choose from categories like interviews, debate, Model UN, casual conversation, or even chaotic "brainrot" prompts, then decide how you want to practice.

Deadline: N/A

Contact info: Website

Ooritaact IIIIO. <u>VVCDBItC</u>

Organization: Miracle Steps Foundation

Information: The Foundation is dedicated to providing urgent care and support to NICU babies and their

families. Future doctors, nurses, financial analysts, med geeks—join the team!

Deadline: None

Contact info: Send your resume to miraclestepsfoundation@gmail.com

Organization: inCHESSive

Information: inCHESSive was created to bring chess players together, promote the in-person culture of the game, and strengthen local communities through shared interest. It connects people through in-person chess, with partnerships with local schools and libraries to stimulate community engagement.

Deadline: None

Contact info: Email the founder at tianle.liang16@gmail.com

Organization: Financial Squirrel

Information: Are you a finance nerd, or just someone who appreciates a bit of financial know-how? Check out Financial Squirrel, an emerging student group that is looking to fill leadership positions with students who have skills in marketing, outreach, and planning.

Deadline: None

Contact info: Contact celinaxue720@gmail.com if you're interested in joining the team!

Organization: Econbyte

Information: Understanding inflation, GDP, and unemployment can feel abstract for teens. Econbyte bridges this gap by translating macroeconomic trends into simple, interactive dashboards and blog posts, helping students grasp real-world economic shifts.

Deadline: None

Contact info: Email federicklin2019@gmail.com to inquire about joining the team.

Organization: The Super Youth & Teens Club

Information: The Club's vision is to help families and their children become aware of how young people develop and ensure they transition successfully into adulthood.

Deadline: None

Contact info: Email sunnychen775@gmail.com with your bio or resume

Organization: Saving Abyss

Information: Saving Abyss is a creative initiative blending art, sustainability, and environmental conservation. Our team designs unique, marine biology-inspired artwork, and prints them on eco-friendly tote bags. Each purchase supports the mission of the New England Aquarium, a nonprofit dedicated to ocean conservation, education, and research.

Deadline: None

Contact info: Email zoubaiyu8@gmail.com with your bio or resume

Organization: Vibrant Waves

Information: Vibrant Waves is a non-profit organization with a focus on youth mental health. If you are passionate about youth wellbeing and mental health, please apply to join the team! Looking for online content creators and in-person NJ high school students.

Deadline: None

Contact info: Email vibrantwaves23@gmail.com with your resume

Organization: InventoBloom

Information: InventoBloom is a youth-led organization that aims to design and manufacture low-cost engineering toy kits with standardized 3D-printable parts to make STEM education accessible to children worldwide, especially in refugee communities.

Deadline: None

Contact info: DM @inventobloom on IG to ask about joining the team

Organization: The Sunflower Podcast

Information: The Sunflower Podcast is an initiative of The Sunflower Project, a student-led nonprofit organization dedicated to preventing and spreading awareness on human trafficking, sexual exploitation, and gender-based violence. Currently seeking to grow their podcast.

Deadline: None

Contact info: Please reach out to Ruhi Yue at ruhiyue09@gmail.com.

Organization: Us and Tomorrow

Information: Us and Tomorrow is a science fiction podcast exploring how emerging technologies impact the human experience. The podcast dives into topics such as AI, society, ethics, and philosophy, to examine what happens when science fiction becomes reality. "Us and Tomorrow" is recruiting student collaborators, all of whom will receive full credit on podcast platforms and social media accounts.

Deadline: None

Contact info: <u>Apply here</u>.

Organization: Seedfems

Information: Seedfems is a youth-led nonprofit on a mission to bring feminism back to its roots-in fairness, empathy, and justice for all-starting with the youngest minds. The organization leads interactive workshops on gender equality in primary schools, a book project involving stories and illustrations about gender equality, and a petition campaign to normalize women keeping their surnames after marriage.

Deadline: None

Contact info: Apply here.

Organization: GUD Medicine

Information: GUD Medicine is a youth initiative tackling complex healthcare issues and fighting for health literacy and justice. GUD Medicine aims to make healthcare more transparent and equitable by breaking down confusing medical insurance systems, comparing drug chemistries (e.g., street, generic, prescription), and investigating global healthcare policies. The organization also interviews real patients and professionals as well as leads campaigns for healthcare justice in the UK and US.

Deadline: None

Contact info: Apply here.

Organization: SquashBuddy

Information: SquashBuddy needs students for three roles. The marketing position involves growing our user base through digital outreach, social media, and strategic content. The tech role is focused on maintaining and updating the website—basic troubleshooting, light dev work, and platform support. SquashBuddy is also actively looking for squash players interested in helping us launch SquashBuddy Centers. These are local hubs built around a concentrated player base, designed to make the app truly useful for finding matches and practice partners in a specific area. In addition to encouraging active app use, center leads help organize events, beginner clinics, and minitournaments.

Deadline: None

Contact info: Email albertzhang8148@gmail.com with your bio or resume.

Organization: Framework Design Studio

Information: FDS films events in the form of videos and photos for organizations to post on their social media. They also create mini movies for nonprofit events from the footage taken from the day of the event. FDS is looking for new members interested in design and new student organization clients.

Deadline: None

Contact info: Email robert.guo27@ucc.on.ca with your bio or resume.

Organization: STEAMLabs

Information: STEAMLabs is a student-led 501(c)(3) nonprofit that brings hands-on science nights to under-resourced elementary schools. With nearly 100 high school mentors and 500+ students impacted across 11 U.S. cities, the program is now expanding nationwide. STEAMLabs is currently recruiting chapter leaders, national board members, and web designers. All leadership roles are eligible for monthly stipends of up to \$200, and 100% of funds you raise go back to you—STEAMLabs will match any donations or ad revenue you bring in.

Deadline: None

Contact info: Email Daniel at danielzhang427@gmail.com.

Organization: Modern Anthologies

Information: Modern Anthologies is looking for motivated people to start a chapter in their own school/region. So far, we have chapters in Seoul Korea, Boston, Virginia, LA, and more. Our organization is Boston-based, youth-led & strives to make writing and publication more accessible to youth from every quarter. If you are interested in creative writing, lit, design, multi-media, communications, or anything really, this is the perfect leadership opportunity to boost your resume! Deadline: None

Contact info: Check out https://www.modernanthologies.com and fill out this form.

Organization: YoungArts

Information: YoungArts is one of the only organizations in the U.S. that supports artists across 10 disciplines at all stages of development, beginning with the critical moment when they decide to pursue a life in the arts, and continuing throughout their careers. Artists ages 15–18, or grades 10–12, in the U.S. are encouraged to apply in the discipline of their choice. Award winners are offered a lifetime of artistic support and ongoing connection with an extraordinarily robust network of peers and mentors.

Deadline: 8 October 2025

Contact info: https://youngarts.org/apply/

Organization: Hutton Junior Fisheries Biology Program Summer 2026

Information: The Hutton Junior Fisheries Biology Program is an eight-week paid summer internship and mentoring program for high school students sponsored by the American Fisheries Society (AFS). Their vision is to stimulate interest in fisheries and aquatic science among underrepresented groups in the profession today. Participating students receive a \$3,000 stipend and hands-on experience with fisheries professionals. Through their network of mentors, they can place students in all 50 states, Canada, Mexico, and Puerto Rico within a 45-minute commute of the student's home.

Deadline: unannounced, likely January 2026

Contact info: https://hutton.fisheries.org

Organization: 2026 Davidson Institute Fellows Scholarship

Information: They award \$100,000, \$50,000 and \$25,000 scholarships to gifted and high-achieving

students, 18 years old or under, who have completed a significant piece of work.

Deadline: unannounced, likely February 2026

Contact info: https://www.davidsongifted.org/gifted-programs/fellows-scholarship/

Organization: Susquehanna University's Apprentice Writer

Information: Published by creative writing students at Susquehanna University, Apprentice Writer

features high school students' creative writing pieces.

Deadline: None

Contact info: https://www.apprenticewriter.com/su-writers-institute-events/

Organization: ECI Americas Spring Fellowship 2026

Information: The ECI fellowship is a free education and action-based course for youth ages 12-18 in North, South or Central America. In weekly sessions on zoom, fellows will learn about intersectional environmentalism and leadership, using this education to develop their own independent initiative.

Deadline: None

Contact info: https://www.ecocircleinternational.org/fellowship

Organization: Modeling the Future Challenge

Information: The Modeling The Future Challenge (MTFC) is an academic challenge hosted by The Actuarial Foundation with design and operations support from the Institute of Competition Sciences. The premise is simple: each year a technology topic area is selected and students are challenged to develop and present their own mathematical models describing how they envision the new technology or industry will change the future. High school students in the United States who are taking junior or senior level mathematics classes such as statistics, probability, pre-calc, calculus or other similar high-level math classes are eligible.

Deadline: 9 November 2025

Contact info: https://www.mtfchallenge.org/register/

Organization: Regeneron Science Talent Search

Information: Regeneron STS is the nation's oldest and most prestigious science competition for high school seniors. Alumni have made extraordinary contributions to science and have earned many of the world's most distinguished science and math honors, including thirteen Nobel Prizes. The competition recognizes 300 student scholars and their schools each year and invites 40 student finalists to Washington, D.C. to participate in final judging, display their work to the public, and meet with notable scientists and government leaders. Each year, Regeneron STS scholars and finalists compete for \$3.1 million in awards.

Deadline: 5 November 2025

Contact info: https://www.societyforscience.org/regeneron-sts/

Organization: The Rube Goldberg Machine Contest

Information: The Rube Goldberg Machine Contest (RGMC) is a challenge of creativity, ingenuity, and teamwork all rolled into one! A STEAM competition for the 21st century that pits student teams against each other to create a fantastical Rube Goldberg Machine built from everyday objects that solves a common, simple task.

Deadline: 14 March 2026

Contact info: https://www.rubegoldberg.org/rube-goldberg-contests/the-rube-goldberg-machine-contest/

Organization: The American Rocketry Challenge

Information: The American Rocketry Challenge, the world's largest student rocket competition, has engaged over 100,000 middle and high school students in model rocketry. The challenge provides a yearlong opportunity to gain hands-on engineering experience by designing, building, testing, and launching model rockets to meet rigorous requirements. The program fosters leadership, teamwork, and problem-solving skills as students deepen their interest and passion for aerospace and STEM.

Deadline: 6 December 2025

Contact info: https://rocketrychallenge.org

Organization: The Patricia Grodd Poetry Prize for Young Writers

Information: The Patricia Grodd Poetry Prize for Young Writers, created in 2007 to recognize outstanding young poets, is an annual contest for poets who are sophomores and juniors in high school. The contest is named in honor of Patricia Grodd in recognition of her generous support of The Kenyon Review and its programs, as well as her passionate commitment to education and deep love for poetry. The poems by the winner and runners-up will be published in The Kenyon Review, and the winner receives a full scholarship to a Kenyon Review Young Writers workshop.

Deadline: 1 November 2025

Contact info: https://kenyonreview.org/submit/patricia-grodd/

Organization: The NCWIT Aspirations in Computing (AiC) High School Award Information: The NCWIT Aspirations in Computing (AiC) High School Award honors 9th - 12th grade students for their computing-related achievements and interests, and encourages them to pursue their passions. Award recipients are selected based on their aptitude and aspirations in technology and computing, as demonstrated by their computing experience, computing-related activities, leadership experience, persistence, and future plans.

Deadline: 28 October 2025

Contact info: https://www.aspirations.org/award-programs/aic-high-school-award

Organization: Wharton Global High School Investment Competition

Information: The Wharton Global Youth Program is hosting its popular financial investment competition again this upcoming academic year. High school students passionate about finance are encouraged to participate in teams of four to six with a teacher advisor.

Deadline: 12 September 2025

Contact info: https://globalyouth.wharton.upenn.edu/competitions/investment-competition/