

WRITING A SUCCESSFUL ARGUMENT

On the Common Core ELA Regents

IMPORTANT

Since this is our very first argument that we are writing, it is very important to call in on our conference call this Monday, May 18th between 4:00 – 4:20 PM at 917-932-8638.

Also, before you start writing, please be sure to read carefully the general instructions for writing an Argument on the Common Core ELA, that has been copied from an actual Regents, and attached at the very end of the booklet.

Looking forward to speaking to all of you on our conference call.

TOPIC

QUARANTINE, ISOLATION AND SOCIAL DISTANCING: A MAJOR LIFE SAVING INCONVENIENCE OR A MAJOR LIFE SAVING SPIRITUAL AWAKENING

INTRTODUCTION

For the past few months, Klal Yisroel has found itself engulfed in a raging storm, a veritable tsunami of ongoing sorrow, grief and tragedy due to the Coronavirus.

For most of Klal Yisroel, and for Bnei Yeshiva in particular, these very necessary life saving measures of quarantine and isolation, have created many special and unique challenges.

And while the daily routine of all of Klal Yisroel has been dramatically affected and altered, Bnei Yeshiva in particular have been impacted in a most profound way.

Temporarily gone from their lives is the “geshmak” of davening with a Yeshiva minyan, the “Shteiging” that comes from learning together in the classroom or Bais HaMedash together with their Rebbeim, and being able to do Chazarah or Mishmar with an abundance of Pilpul Chaverim, all under the guidance of their Rebbeim.

Also, not to be minimized, is the fact that gone is the plain “geshmak” of having a breakfast, lunch and supper “schmooze” with one’s chaverim in the Yeshiva dining room, or that brief basketball game before B’kuis, English or Night Seder, both of which are so necessary for a Bochur’s Menuchas HaNefesh and Simchas HaChaim.

The question now arises for Bnei Yeshiva: While it is understood that these MAJOR LIFE SAVING MEASURES OF QUARANTINE AND ISOLATION are indeed very necessary to stop the spread of a very dangerous and deadly virus, how are we to view it? By what perspective should we view these life saving measures? Should we just view all this as a very necessary disruption and inconvenience, or can we possibly see in all this a deeper, more meaningful dimension?

DOCUMENTS

GROUP #1

Rav Avigdor Miller z"l On Quarantine and Isolation

GROUP #2

The 1918-1919 Flu Pandemic in America – Important lessons for today to be learnt from the past.

GROUP #3

The Science of Corona Virus COVID-19

GROUP #4

Editorials and Editorial Cartoons on Quarantine and Isolation

CHOOSE ANY 3 GROUPS OF DOCUMENTS TO USE IN WRITING YOUR ARGUMENT.

PLEASE RETAIN ALL DOCUMENTS, AS SOME MAY BE NEEDED FOR WRITING FUTURE ARGUMENTS.

Document 1A-

Toras Avigdor Parshas Tazria Metzora

The Quarantined Man

We begin with the *taharas haMetzora*, the purification process for the one who had been committed by the *kohen* to the state of leprosy. It had been an sad and unfortunate period in his life. **מְחֻזָּץ לַמִּתְחָה מוֹשְׁבוֹ** - He had to remain outside of his city (13:46).

It was a heartbreaking scene to watch as this man made his way past the city walls out to the desolate fields. And it is there that he would stay, alone and secluded for weeks and maybe even months.

And then suddenly, after some time has passed, the unexpected happens. The whiteness on his skin begins to recede; the *tzaraas* becomes smaller and dimmer. "Could it be?" he hopes. "Is it really going away?" And so he sends a message to the *kohen* asking him to come out and take a look at the *tzaraas*.

"My friend," the *kohen* declares to him, "I have good news for you. I'm happy to tell you that the *tzaraas* has healed and you are ready now to return to society."

This *metzora* was in a 'trap' from which he thought he might never escape. *Tzaraas*, especially in those days, was often a fatal malady. And so, he was living outside the city in sorrow, not knowing if he would ever be healed.

And the truth is that's how everyone should think. Although this procedure is specifically commanded for the *metzora*, we shouldn't overlook the intrinsic lesson that applies to us too - how great should be our gratitude when we are healed from our illnesses. Anyone who was sick and then recovered should say the same thing: **וְאָנֹכִי כְּעוֹרֵב מִלֶּטֶן** - I'm like a bird that escaped from a trap. You remember how you had a virus and you were lying in bed for days; you felt like you might never get better; and then finally you escaped. It's a tremendous happiness! *Va'anachnu nimlatnu!* Anytime you escape, you should remember that forever.

Real Happiness

Now, if he would tell that to someone who never had that experience of escaping disaster, they would laugh at him. "Ha ha! You're so silly! That's fun?! That's happiness?!" Happiness means traveling someplace, spending money. To go to a bowling alley or a restaurant, *that's* happiness!

But you can't fool this man anymore with your *leitzanus*.

And that was the great benefit of being a *metzora*; he had gone through the school of hard knocks and now he was an educated man. How happy a person should be who doesn't know anything wrong about his body! That's what he learned. Health, that's wealth! I remember I once went to a Russian shoe repair man. He said to me like this: "Az m'iz gezunt iz men reich." I learned a piece of Torah from this shoe repair man. "If you're healthy then you're wealthy."

But it wasn't only health that the *metzora* learned to appreciate. He received an education about appreciating normal living. The healed *metzora* has now learned that life in its most simple form, merely living among others *b'shalom*, being able to interact normally with others is the biggest *taanug*!

But the lessons he learned are forever. The *metzora* gained a tremendous benefit from his experience that he couldn't get otherwise because when he was well he didn't appreciate what a blessing it was. He never thought about how much fun it was to be able to live normally. It was worth the experience – all the trouble was a small price to pay for the very great achievement of gaining an attitude of gratitude to Hakodosh Boruch Hu for normal living!

Everything is normal again! Normal is so much fun! It's so good to be back again accepted by society, together with his family. He has company, he has friends, he's back at his work. "How good it is to walk the streets of the city *b'shalom* without people running away from me," he thinks. "How good it is to be able to live normally among people, to be able to go to work." He's learned now to be grateful just for that alone!

He's not wearing a covering over his mouth and nobody runs away when he comes close. He belongs with everybody else – he's accepted back into society again! "I can go to *shul* again!" It's fun to be able to walk into *shul*! It's fun to daven with a *minyan*! And now, all of his life he sings in happiness just because he recalls those dark days of despair. He is full of joy that he is the bird that escaped!

Document 1B

Rabbi Avigdor Miller's Sefer – A Kingdom of Cohanim

13:46 HE SHALL DWELL ALONE. “The most precious is Solitude... The prophets Eliyahu and Elisha chose especially the mountains because of solitude. And the early Sages and saintly men of blessed memory walked in their footsteps, for they found this to be the most suitable means to gain the perfection of Prishus” (Mesillas Yesharim 15). “The lack of fear of Hashem in a man’s mind when he is together with men and speaks with them” (Chovas Halvovos, Cheshbon Hanefesh, 17th Cheshbon) is a constant ordeal; and therefore “isolation from men is the most effective cause of good qualities” (ibid.) Thus the leper is enabled to derive great benefit, for he gains from his calamity the great opportunity to learn to think of Hashem. Just as the Cohen Gadol went into isolation seven days before Yom Kippur (Yoma 2A) “so that the fear (of Hashem) should come upon him by his separation from men” (RSHI, ibid.), so also does the isolation from men enable the leper to become more aware of his Creator (see 16:17 below). In the future, whether in this life or in the Afterlife, he will look back and recognize the immense benefit of his misfortune “And on that day you will say, ‘I give thanks to You Hashem that You were angry with me’” (Yeshayah 12:1).

“Take heed in the plague of leprosy, that you observe diligently” (Dvarim 24:8) is a prohibition against cutting off from the person any of the symptoms of the plague of leprosy (Makos 22A). The symptoms are not mere indications of illness, for leprosy in ancient Israel was a message from Hashem; just as Miriam was stricken with leprosy because of her words (Bamidbar 12:14), and as Gehazi was smitten with leprosy for seeking payment for the healing of Naaman (II Kings 5:27), and as the king Azariah became a

Philadelphia's deadly parade

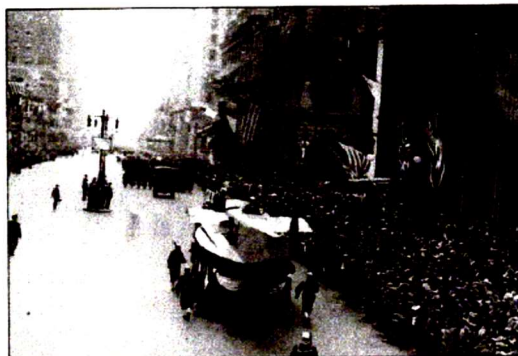
How the refusal to ban large public gatherings during the 1918 Spanish flu pandemic led to disaster

Why hold a parade?

America was in the waning months of World War I, and officials across the country were under enormous pressure to sell war bonds, or Liberty Loans. Big parades were staged in major cities to rally the public behind the war bond effort. On Sept. 28, 1918, Philadelphia city officials refused to cancel their parade amid the Spanish flu pandemic, with devastating health consequences. That decision has been held up by the Centers for Disease Control as an example of what *not* to do during a pandemic, and has evoked obvious parallels with some modern-day officials' refusal to implement disruptive shelter-in-place orders and cancel events. New York City Mayor Bill de Blasio and New York Gov. Andrew Cuomo, for example, initially refused to heed calls from health experts to shutter the city's sprawling public school system and take other steps to minimize public gatherings. "It seemed to me to be a perfect parallel to the story of what happened in Philadelphia in 1918, where the health authorities were clearly aware that this was a growing problem," said historian Kenneth C. Davis.

Why didn't Philadelphia cancel the parade?

The decision fell to Health Commissioner Wilmer Krusen, a political appointee with no prior public health experience. Doctors pleaded with him to cancel the parade, with one branding it "a ready-made inflammable mass for conflagration." The Spanish flu was a new strain of the influenza virus to which no one had any immunity, and like today's coronavirus, it often led to pneumonia and an overreaction by an overwhelmed immune system—a "cytokine storm"—that destroyed people's lungs. It gained a foothold among soldiers in the trenches of Europe, and would eventually infect a third of the world's population and kill an estimated 675,000 Americans and 50 million people globally. At the time Krusen was making his decision, Boston was already suffering the consequences of holding its own "Win-the-War-for-Freedom" Parade on Sept. 3. By Sept. 23, *The Boston Globe* reported that the city's hospitals were "taxed to their limits." At the time the Philadelphia parade was held, 600 sailors and 47 civilians had been diagnosed with the flu at the Philadelphia Naval Yard, and some had already perished. In St. Louis, City Health Commissioner Dr. Max C. Starkloff faced the same decision as Krusen—and canceled his city's Liberty Loans parade.



Seeds of death: After the parade, 45,000 were infected.

long wound its way up Broad Street. Warplanes flew overhead as an enormous, tightly packed crowd of 200,000 cheered. Within three days, every bed in Philadelphia's 31 hospitals was occupied. Within a week, 45,000 citizens were infected and the entire city had shut down.

Did the shutdown help?

It was too late. By the second week in November, 12,000 Philadelphians were dead, and the phrase "bodies stacked like cordwood" had become commonplace among the survivors. "It was an apocalyptic scene," said Davis. "In some cases, public-health nurses would be walking into tenements and finding whole families dead." Bodies piled up on sidewalks after the city morgue, capable of holding only 36 people, was overwhelmed. Within six months, 16,000 were dead, and 500,000 Philadelphians had fallen ill with the flu. Meanwhile, unsubstantiated rumors circulated among the

frightened populace that the Germans had unleashed the flu on U.S. soil via spies who'd arrived on U-boats.

How did other cities fare?

Researchers have found that cities that quarantined the sick and shut schools, churches, and theaters saw 50 percent lower death rates than those that did not. In Milwaukee, which had the lowest death rate (0.6 percent) of any large city in America during the pandemic, the city's health commissioner, Dr. George Ruhland, had aggressively shut schools, saloons, and public places the moment the virus arrived there, and plastered the city with an ad campaign warning people to stay home. Even after the restrictions were lifted, dance-hall revelers on New Year's Eve still wore six-layer gauze masks as a precaution, with the *Milwaukee Sentinel* describing them as looking like "a band of holdup men from the neck up." In St. Louis, where Starkloff canceled the parade, the peak death rate was only one-eighth that of Philadelphia.

The economic impact of shutdowns

A study published this year argued that cities that acted early and aggressively to impose social distancing to limit the spread of the Spanish flu actually performed *better* economically after the pandemic was over than those that did not. Fewer workers had died, and the local population more quickly resumed normal economic behavior, three economists found. "It casts doubt on the idea there is a trade-off between addressing the impact of the virus, on the one hand, and economic activity, on the other hand, because the pandemic itself is so destructive for the economy," said lead researcher Emil Verner of the Massachusetts Institute of Technology. A very similar controversy is playing out today, as some Republican governors refuse to issue stay-at-home orders and shutter businesses, arguing that the economic damage of social distancing would be worse than the disease itself. "The people themselves are primarily responsible for their safety," said South Dakota Gov. Kristi Noem, one of seven governors who have refused to issue statewide stay-at-home orders. (Her state has more than 800 cases of Covid-19.) Some have justified their inaction by citing President Trump's insistence that this should be a state decision. "I leave it up to the governors," Trump said, adding they "know what they're doing."

THE WEEK April 24, 2020

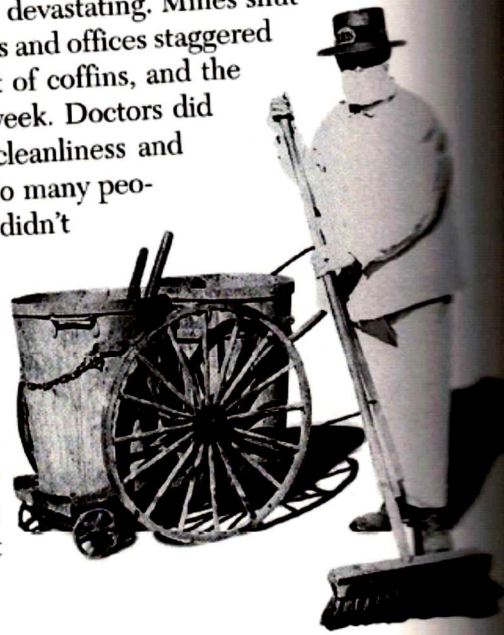
THE FLU EPIDEMIC In the fall of 1918, the United States suffered a home-front crisis that affected both men and women, white and black alike. An international flu epidemic gripped the nation. It apparently came from France, where it had been brought by Chinese war workers. About one-quarter of the U.S. population fell ill with high fever, headaches, and aching muscles, often followed by pneumonia.

The effect of the epidemic on the economy was devastating. Mines shut down, telephone service was cut in half, and factories and offices staggered working hours to avoid congestion. Cities ran short of coffins, and the corpses of poor people lay unburied as long as a week. Doctors did not know what to do, other than to recommend cleanliness and quarantine. One epidemic survivor recalled that "So many people died from the flu they just rang the bells; they didn't dare take [corpses] into the church."

In all, about 500,000 Americans perished before the epidemic disappeared in 1919. Worldwide, historians believe the influenza virus killed as many as 40 million people.

Like the flu epidemic, the war ended, and Americans across the country hoped that this "war to end all wars" would do just that. Their hopes rested on the peace settlement, and President Wilson traveled to Europe to ensure it.

New York City street cleaners wore masks as an effort to avoid catching influenza.



Anatomy of an infection

Once the coronavirus infects a human body, what happens?

What exactly is the coronavirus?

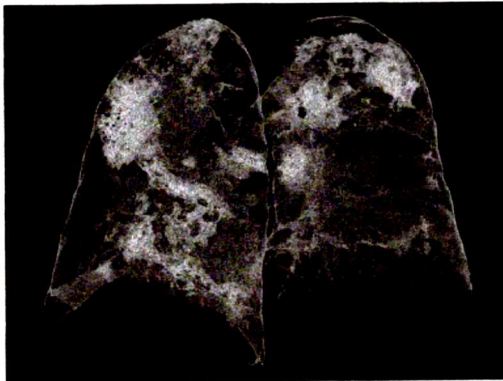
A virus is a parasitic microbe, so tiny that hundreds of millions could fit on the head of a pin. It's a coiled strand of genetic material embedded in a protective coat of protein that invades healthy human cells and essentially hijacks them, using the cell's genetic machinery to duplicate itself. The one currently wreaking global havoc, technically called SARS-CoV-2, is a type of coronavirus, a family of viruses covered with knobby spikes that are used to latch onto cell membranes (their appearance suggests a crown, or "corona," thus the name). Many coronaviruses are fairly harmless, like the ones that cause common colds, while others are deadly: The one that causes Middle East Respiratory Syndrome, or MERS, kills about a third of the people it infects. SARS-CoV-2 is a novel virus in that it has never before infected humans; it is thought to have jumped from bats to humans via an intermediate animal, perhaps a pangolin, in Wuhan, China. That's why no one had immunity when it began spreading across the globe.

How does the virus infect people?

Those infected with the coronavirus soon carry trillions of microbes; their saliva teems with them. When they cough, sneeze, talk, or even just breathe heavily they emit droplets laden with germs—a sneeze can launch 40,000 droplets. If the drops land on someone, the virus can infiltrate the eyes, mouth, or most often nose, launching a potential infection. An infected person can also leave a trail of virus on doorknobs, touch screens, and other surfaces; if others touch them and then touch their faces they can become infected—that's why we're told to frequently wash our hands. Scientists believe the virus can linger on plastic or metal for up to three days and on cardboard for 24 hours, though their vigor wanes over time. Once the viral particles gain access, they travel to the back of the throat and nasal passages and latch onto cells. This is the beginning of the disease called Covid-19.

What happens then?

Once the virus attaches itself to a healthy cell, it sets about its work, fusing its membrane with the cell membrane, releasing its core RNA strand and cranking out copies. In effect, said William Schaffner, an infectious disease expert at Vanderbilt University, the intruders order the inflamed cell, "Don't do your usual job. Your job is now to help me multiply." Cells do this and eventually die. The initial effects, which take on average five or six days



A CT scan of the lungs of a Covid-19 patient with pneumonia

to appear (though they can take two days or up to two weeks), are typically fever, a dry cough, and fatigue. About 80 percent of cases are relatively mild, and the infection stays largely in the upper respiratory tract; as the immune system makes antibodies and activates T-cells that neutralize and clear the virus, the victim recovers in a couple of weeks. In other cases, the invader pushes on to the lower respiratory tract, where serious problems can set in. "The lungs are the major target," said Martin Hirsch, part of the infectious disease unit at Massachusetts General Hospital.

What happens in the lungs?

At this point, the virus begins to attack cells lining the lungs, inflaming the tiny sacs that send oxygen to the blood and remove carbon dioxide. Breaths become shorter and more difficult. As cells die, the lungs become clogged with fluid and debris and can develop secondary infections; this is pneumonia. In the most severe cases, the patient needs the help of a mechanical ventilator to continue to breathe. Some nonetheless die. How the immune system reacts apparently is the key factor determining how bad a patient's condition gets. In the most critical cases, for reasons doctors don't entirely understand, the immune response goes haywire, setting off what's called a cytokine storm.

What is a cytokine storm?

Cytokines are chemicals released as an alarm signal when the body detects dead cell fragments indicating that an attack is underway. These chemicals rally the immune system and set off a battle to expel the invader. In a cytokine storm, the immune response spins out of control and starts attacking healthy cells as well as damaged ones. "Instead of shooting at a target with a gun, you're using a missile launcher," said Angela Rasmussen, a virologist at Columbia University. Inflammation spikes, and fluid and dying cells fill the lung sacs, essentially drowning the patient; meanwhile, the condition can extend into the circulatory system and spiral into multiple-organ failure. This is what happens in many fatal cases, estimated to be 1 to 3 percent of infections. Understanding better why this happens to certain patients and how it can be treated or prevented is a key focus for scientists battling the pandemic. "I think it's going to take a really, really long time to understand the mechanistic, biological basis of why some people get sicker than others," says Rasmussen.

The role of age and gender

Why does the coronavirus cause only mild symptoms in some while overwhelming others? Some factors are clear—others, scientists are working to understand. The most obvious factor is age, with elderly patients accounting for the majority of fatalities and the roughly 5 percent of cases that become critical. The reason is that the immune system becomes considerably less effective as people grow older. But that doesn't mean younger people are safe: Data on early U.S. cases show that 38 percent of patients needing hospitalization were under 55. Underlying conditions play a clear role, with fatality rates higher for patients of any age with hypertension, diabetes, heart disease, and other ailments. Smoking is thought to be a factor because it weakens the lungs, and gender may play a role as well. In a Chinese study of 45,000 confirmed cases, men had a fatality rate of 2.8 percent, compared with 1.7 percent for women, though external factors like higher smoking rates among men may account for this. Other possible factors may be related to the environment, such as air quality, or to genetics, such as subtle immune deficiencies.

Document 3B

Covid-19 can be a full-body assault

The coronavirus doesn't just ravage the lungs—it can also cause long-term damage to the liver, heart, kidneys, and other organs, reports *The Washington Post*. Physicians are seeing growing evidence of the disease's total body assault both in patients being treated in ICUs and those who have recovered from severe cases of Covid-19. A small study from China found that many biological measures—liver function in particular—failed to return to normal in patients even after they were free of the virus and cleared for discharge. And early data from New York and the Chinese city of Wuhan show that up

to 30 percent of intensive-care patients lose kidney function and require dialysis. "That's a huge number of people who have this problem," said Alan Kliger, a nephrologist at the Yale School of Medicine. "I think it's very possible that the virus attaches to the kidney cells and attacks them." Studies also indicate that the virus can impair heart function—even in patients who display no signs of respiratory distress, a condition that can lower blood oxygen levels and stress the heart. Another mounting fear is that the coronavirus may lie dormant in people who have recovered, and then spring back years



Examining CT scans of a patient in Wuhan

later in a different form. It wouldn't be the first virus to behave that way: The herpes virus that causes chicken pox can hide for decades before re-emerging as shingles.

Document 3C

Infected with Covid-19, but showing no symptoms

Up to 25 percent of people infected with the coronavirus may not show any symptoms, the Centers for Disease Control and Prevention has concluded—a much higher proportion than previously thought. This could significantly complicate efforts to contain the pandemic, reports *The New York Times*, because people without a telltale cough or fever might unwittingly spread the disease as they go about their daily lives. Like influenza, the virus is spread via large droplets ejected into the air when a patient sneezes or coughs, and also in much smaller "aerosol" droplets, pumped out when a person breathes or talks.

Some scientists speculate that people exposed to higher levels of the virus—when a patient sneezes in their face, for example—are more likely to get sick and to die, while lesser exposures can lead to mild or asymptomatic infections. The CDC's new estimate of asymptomatic cases is based on both anecdotal reporting and early studies. Among the passengers on the *Diamond Princess* cruise ship who tested positive for Covid-19, for example, 18 percent never developed symptoms. Researchers in Hong Kong have concluded that 20 to 40 percent of transmissions in China took place before symptoms became apparent. With a high

proportion of asymptomatic cases, scientists believe social distancing is the best strategy to stop the disease spreading. Says Carl Bergstrom, an infectious-diseases expert at the University of Washington, "We can't assume that any of us are not potential vectors at any time."



Spread by airborne droplets

Document 4A

Editor's letter

When the doors of my commuter train whooshed open at Grand Central Terminal on my last day in the office, about 20 stragglers emerged one by one from the long line of cars, rather than the usual hundreds. The terminal's Main Concourse was a vast, nearly empty cave. As people passed each other there and on the eerily quiet streets, we glanced at each other with a paradoxical mixture of fear and kinship. In this plague year, we are all potential disease vectors—threats to each other's well-being. And yet we are all in this together. To minimize the number of deaths and the damage Covid-19 will inflict, we will need to cooperate, sacrifice for the greater good, and take care of those who lose their jobs or become sick. We are each other's keepers. Deeper truths often are delivered in the envelope of crisis.

"No man is an island," John Donne wrote in 1624, as he lay ill with a persistent fever, fearing death. "Every man is a piece of

the continent, a part of the main." In the solitude and delirium imposed by his illness, his connection to all others became manifest. Americans have always viewed the communitarian ethos with some ambivalence; our founding ideals are rooted in a rebellion against authority and duty, and reverence for individual liberty. Epidemics, Anne Applebaum recently pointed out in *The Atlantic*, "have a way of revealing underlying truths about the societies they impact." This one has caught us in a moment of profound weakness. Faith in science, government, media, and all our institutions has badly eroded, and we are deeply divided politically and culturally, viewing each other as enemy tribes, not countrymen. The coronavirus cares nothing for these distinctions; it is a reminder that our separateness is an illusion. We Americans, and all of humanity, are at war with a common foe. We can only defeat it together.

William Falk
Editor-in-chief

Document 4B

Editor's letter

I live in a two-bedroom Brooklyn apartment that many realtors would generously describe as "oversize." But after nearly two weeks of pandemic lockdown—during which my 950-square-foot home has become a workplace for me and my wife and a school for our 4- and 7-year-old—it's starting to feel distinctly undersize. My wife and I have tried to turn our bedroom into a makeshift office and have designated the dining room as the kids' workspace, but our zoning regulations are poorly enforced and constantly flouted. Our son (an aspiring construction worker) repeatedly zooms into the bedroom on his ride-on excavator shouting that he's bored and/or hungry; our daughter (an aspiring gymnast and coder) will cartwheel in and beg to *pretty please* borrow one of the laptops that we're working on. While I'm grateful that we're all healthy and that my wife and I are still employed, I dream of the day when I can again squeeze into a packed, sweaty subway car and make the 45-minute commute to the office.

The coronavirus has made the jobs of millions of working parents in the U.S. even harder. But it has also shaken the lives of children across the country—and the consequences of that might not become apparent for years. Our local schools quickly set up remote learning programs and offer daily conference calls with teachers, but none of this can replace the crucial in-person socialization that takes place in the classroom and the schoolyard. Right now, my daughter and son are each other's only playmates, and it's heartbreaking to tell them they can't invite their friends over or meet them in the playground. During a visit to the beach last weekend, we sat some 30 feet from another family with a girl about the same age as my daughter. In normal times these two first-graders would have built sandcastles together and become friends. But in our new age of social distancing, all they could do was look at each other forlornly from afar.

Theunis Bates
Managing editor

Document 4C

Editor's letter

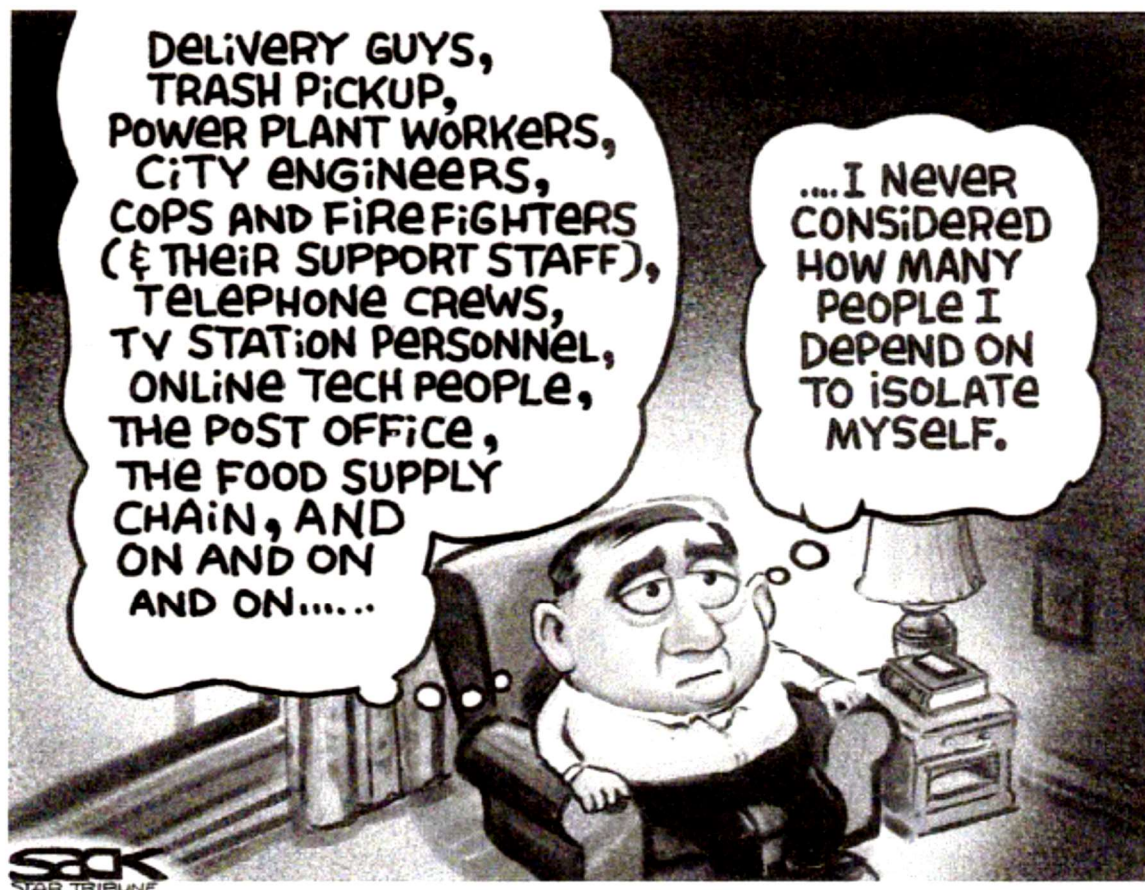
Reminding yourself of your mortality isn't a morbid exercise; it serves as a spiritual face slap, meant to heighten your appreciation of the current moment, to put small worries and irritations in perspective, to wake you to the reality that our time here is limited. The coronavirus pandemic is not a drill; it has brought great suffering and death to humanity. But if we are to extract any value or meaning from this scourge, it must be in the clarity it can provide about what really matters.

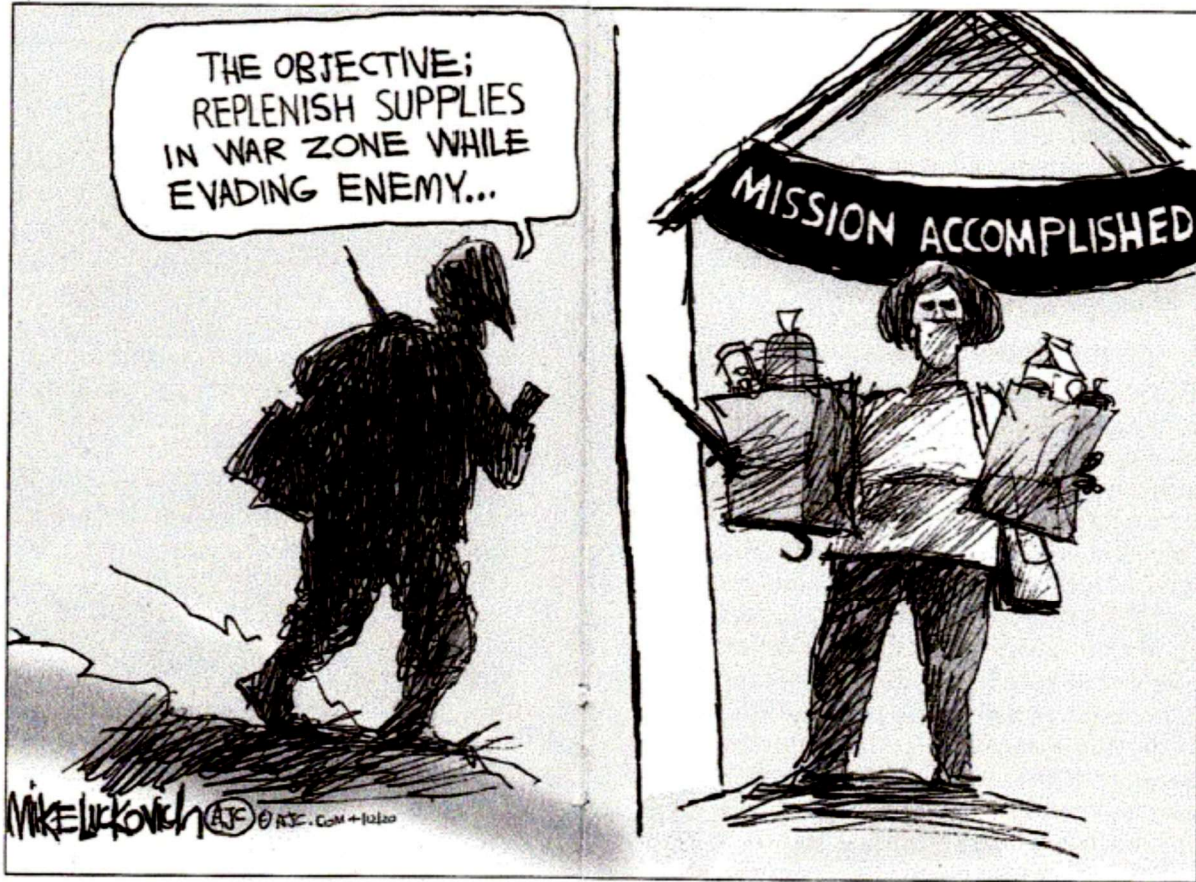
Hiding out from the virus at home is terribly frustrating. Still, I've noticed a greater sweetness in everything not denied me. My love and appreciation for my cellmates, my wife, Karla, and my dog, Teddy, have been enhanced despite the 24/7 togetherness. Our grown daughters' texts and phone calls are even more precious than before, bringing little heartbursts of relief and affec-

tion. Fondness floods me when I see friends' and co-workers' faces on Zoom. Food—even the third-day leftovers—is more delicious now that I acquire it at some risk, without any certainty it will be there tomorrow. The buds, blossoms, and birdsong of spring are more thrilling this year, their promise of renewal more desperately needed. The other day, as I was bicycling to get some air and light (and slow my inevitable decay), I found that every runner and cyclist I passed gave a cheery wave rich in fellow feeling. One woman jogger smiled at me, a stranger, with such genuine warmth I was startled. "Hi!" she called out as I rolled by, in recognition of our shared predicament: escaped prisoners trying to wring some joy from a spring day. How can we feel gratitude at this dark time, amid a planetwide crisis unlike any in our lifetimes? How can we not? Nothing, we've been reminded, is guaranteed. Nothing should be taken for granted.

William Falk
Editor-in-chief

Document 4D





Argument

Directions: Closely read each of the *four* texts provided on pages 11 through 17 and write a source-based argument on the topic below. You may use the margins to take notes as you read and scrap paper to plan your response. Write your argument beginning on page 1 of your essay booklet.

Topic: Should shark netting be used on coastal beaches?

Your Task: Carefully read each of the *four* texts provided. Then, using evidence from at least *three* of the texts, write a well-developed argument regarding whether or not shark netting should be used on coastal beaches. Clearly establish your claim, distinguish your claim from alternate or opposing claims, and use specific, relevant, and sufficient evidence from at least *three* of the texts to develop your argument. Do *not* simply summarize each text.

Guidelines:

Be sure to:

- Establish your claim regarding whether or not shark netting should be used on coastal beaches
- Distinguish your claim from alternate or opposing claims
- Use specific, relevant, and sufficient evidence from at least *three* of the texts to develop your argument
- Identify each source that you reference by text number and line number(s) or graphic (for example: Text 1, line 4 or Text 2, graphic)
- Organize your ideas in a cohesive and coherent manner
- Maintain a formal style of writing
- Follow the conventions of standard written English

Texts: