



CENTRO DE AVALIAÇÃO E SUFICIÊNCIA EM LÍNGUA ESTRANGEIRA - CASLE

PROVA DE SUFICIÊNCIA EM LÍNGUA INGLESA ONLINE – 06 DE OUTUBRO DE 2020

2ª chamada das 14h às 16h

FOLHA DE TEXTO

Indigenous women are preyed on at horrifying rates. I was one of them

Twenty-seven years ago I almost ended up a grim statistic, like so many Indigenous women and girls. It's still happening.

Brandi Morin - Mon 7 Sep 2020 11.24 BST

I was a missing Indigenous girl who beat the odds. Now I'm a journalist and I won't shut up about a genocidal crisis happening in Canada.

I spent my childhood in and out of foster homes. It was a cold and lonely system. At age 12 I ran away from a group home with two other girls. It was freedom, or so I thought. I don't even remember exactly how many days I was missing for. Each day blurred into the next. At one point two men in their late 20s held me hostage at a downtown apartment in Edmonton, Alberta, where they raped me several times.

After fighting for my life for several days, I escaped and fled to the safety of my Kohkum's (grandmother in the Cree language) home. I didn't tell her of the horrors I experienced. I was in shock. I just wanted to appreciate being with her, feeling loved and safe until I had to return to the woes of the system.

I felt so guilty. I thought what happened to me was my fault because I ran away. I did tell a group home worker I was raped, but nothing was ever done. That was 27 years ago. I could've ended up a grim statistic.

In Canada, Indigenous women and girls are targeted for violence more than any other group. They are 12 times more likely to go missing or be killed. Every time I read a headline about Missing or Murdered Indigenous Women and Girls (MMIWG) I'm reminded of what could've been. I could've been them, and they could've been me.

As a survivor I feel obligated to help alleviate some of the agony experienced by the families of MMIWG, other survivors and potential victims of this genocide.

This crisis has been going on for decades, according to government and police records. If we're honest, however, it's been happening since 1492.

White male colonizers raped Native women at epidemic rates and justified their actions because Indigenous peoples were labelled savages and less than human.

The UN high commissioner for human rights has recognized that the basic inequalities that exist between Indigenous peoples and the rest of Canada are a glaring reminder of the Canadian state's failure to overcome systemic racism, the intergenerational trauma of colonialism and the inadequate provision of specialized services and programs for each community.

A national inquiry into MMIWG first named this crisis a genocide in 2019. In June 2019, Justin Trudeau stood solemnly in front of a few hundred survivors and families at the release of the final report of the inquiry. The prime minister promised to do whatever it took to dismantle the violence ravaging our women and girls.

An action plan was due in June 2020. The government has postponed it, citing Covid-19. We're still waiting.

Outsiders often have a utopian view of Canada as a strong and free nation that upholds human rights. In reality, the federal government has continually stalled investment in resources to address the genocide of MMIWG and other oppression experienced by Indigenous Peoples. Yet Trudeau easily found billions of dollars to secure a pipeline expansion project.

Ironically, industry projects like pipelines are part of the problem. They bring camps of outside workers, mainly non-Indigenous men, to Indigenous areas. These man camps contribute to the crisis of violence against Indigenous women and girls.

Our women continue to disappear and die. There have been approximately 4,000 or more Indigenous murdered or missing women and girls in the last 30 years. That works out to about 333 a year, or three a week.

If white women were being stolen at this rate there would be worldwide outrage.

I'm a strong, proud Indigenous woman and I was more than a runaway or a lost cause. A generation of women like me are still fighting for our lives. We are resilient, worthy and intelligent; and we deserve to live, to dream and to thrive.

Against countless odds my dreams of becoming a successful journalist came to pass. What about all the dreams that have died with our stolen sisters? Who would they have become?

Fonte: Adaptado de <https://www.theguardian.com/commentisfree/2020/sep/07/canada-indigenous-women-and-girls-missing> em 07/09/2020.

CENTRO DE AVALIAÇÃO E SUFICIÊNCIA EM LÍNGUA ESTRANGEIRA - CASLE

PROVA DE SUFICIÊNCIA EM LÍNGUA INGLESA ONLINE – 07 DE OUTUBRO DE 2020

3ª chamada das 9h às 11h

FOLHA DE TEXTO

Tsunami of fake news hurts Latin America's effort to fight coronavirus

By Tom Phillips *in São Paulo*, **David Agren** *in Mexico City*, **Dan Collyns** *in Lima*
and **Uki Goñi** *in Buenos Aires*

For months Gustavo Andrade has been battling to convince his parishioners to take Covid-19 seriously. “This town is full of infected people. Two or three die every day,” said the priest, from the town of Venustiano Carranza in southern Mexico. Yet for all Andrade’s efforts, many locals remain unconvinced. “Their understanding is that these deaths are from the poison the mayor is spraying as part of the anti-dengue fumigation,” he said. The culprit for the confusion is fake news.

As Latin America battles the advance of Covid-19, which has now claimed more than 160,000 lives in the region, it is also fending off a tsunami of online disinformation designed to bamboozle and deceive. From the Mexican state of Chiapas to Ceará in Brazil, social networks are awash with quack cures and fantastical conspiracies that can carry an all-too-real human cost. The misinformation streaming through millions of Latin American mobile phones and computers ranges from the bizarre to the ridiculous.

In recent weeks, there have been claims that Brazilian coffins were being filled with rocks to inflate the country’s Covid-19 death toll; that drones were being used to deliberately contaminate indigenous communities in Mexico; that the CIA was helping spread the coronavirus in Argentina; that seafood in northern Peru was not safe to eat because the corpses of Covid-19 victims were being dumped in the Pacific Ocean; and even that the World Health Organization chief, Tedros Adhanom Ghebreyesus, had been spotted boogying and boozing at a bar on the São Paulo coast.

Many of the false claims include miracle Covid-19 cures including Peruvian sea water, Venezuelan lemongrass and elderberry tea and supernatural seeds being hawked by one Brazilian televangelist.

In Bolivia, politicians have been promoting the use of a toxic bleaching agent as a potential cure – with panicked residents in the hard-hit city of Cochabamba reportedly lining up to buy the poisonous product. “Some clearly represent political or commercial agendas, others are just absurd,” said Jorge Bruce, a Peruvian newspaper columnist and psychoanalyst who studies the phenomenon. “The problem is these are spread around by well-intentioned people in family WhatsApp chats probably because they can create a sense of control over a situation which is out of control.”

Yasodora Córdova, a Brazilian expert in online misinformation, said the tight-knit social groups that define Latin American society were one reason the region was such a “fertile ground” for fake news. Disseminators of online disinformation had taken advantage of such pre-existing communities – such as church groups – and used them as a powerful mechanism through which to spread their lies. Some sought financial gain from their fabrications.

Córdova, who has spent a decade studying online conspiracy theories, recalled how during the Zika epidemic viral YouTube videos falsely claimed the illness could be cured with honey or garlic, as has happened again this year with the coronavirus. “Videos that promote this kind of ‘cure’ get thousands of views and the people who make them earn a lot of money,” said Córdova who said such producers could easily earn up to 7,000 reais (£1,050) per month. “It doesn’t matter if it’s true or not – what matters is the number of views.”

Others used falsehoods for political purposes. Córdova said that some far-right politicians in Brazil were engaged in a permanent “race to remain relevant” using bombastic and bizarre “news” to stay in the public consciousness. “You need these fantastical-bordering-ridiculous [videos] for people to keep tuning in – either out of curiosity or because they genuinely believe in them.”

Whatever the motivation, the spread of fake news in a time of coronavirus has real-life consequences. The misguided belief that 5G telecom towers spread the coronavirus via radio waves prompted villagers in Huancavelica in the Peruvian Andes to detain eight telecoms engineers for more than a day. Ginger consumption in Peru has rocketed and exports nearly tripled because of the belief it can treat or cure Covid-19. At least 10 cases of chlorine dioxide poisoning have been reported in Bolivia in recent days.

In Chiapas – where WhatsApp rumours have spread claiming government health workers were deliberately spraying indigenous communities with the coronavirus – there has been violence. An angry mob reportedly ransacked the community hospital in the municipality of Los Rosas in early June before torching an ambulance, the town hall and the mayor’s home. In May, another group rampaged through Venustiano Carranza, looting an electronics store and torching the town hall along with the homes of the mayor and state governor’s mother. “The call came through social networks, trying to confuse people with the false argument that Covid-19 doesn’t exist and was created to affect poor people,” the Chiapas state government said at the time.

But Córdova said authorities and internet giants were not doing enough to deter the deceivers. “The justice system needs to find a way to hold people responsible for the content they share – so they feel less comfortable distributing and sharing this kind of news,” she said. “This will only stop when there is a counter-attack, when the justice system understands they must hold these people to account” by forcing those who alleged, for example, that Covid-19 was a Chinese experiment to prove such claims in court. “As long as this doesn’t happen, people will keep believing the internet is a no-man’s land.”

Fonte: Adaptado de <https://www.theguardian.com/world/2020/jul/26/latin-america-coronavirus-tsunami-fake-news> em 07/09/2020.

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4ª chamada das 14h às 16h

FOLHA DE TEXTO

Vaccine Product Approval Process

Source: <https://www.fda.gov/vaccines-blood-biologics/development-approval-process-cber/vaccine-product-approval-process>

FDA's Center for Biologics Evaluation and Research (CBER) is responsible for regulating vaccines in the United States. Current authority for the regulation of vaccines resides primarily in Section 351 of the Public Health Service Act and specific sections of the Federal Food, Drug and Cosmetic Act.

Vaccine clinical development follows the same general pathway as for drugs and other biologics. A sponsor who wishes to begin clinical trials with a vaccine must submit an Investigational New Drug application (IND) to FDA. The IND describes the vaccine, its method of manufacture, and quality control tests for release. Also included are information about the vaccine's safety and ability to elicit a protective immune response (immunogenicity) in animal testing, as well as the proposed clinical protocol for studies in humans.

Pre-marketing (pre-licensure) vaccine clinical trials are typically done in three phases, as is the case for any drug or biologic. Initial human studies, referred to as Phase 1, are safety and immunogenicity studies performed in a small number of closely monitored subjects. Phase 2 studies are dose-ranging studies and may enroll hundreds of subjects. Finally, Phase 3 trials typically enroll thousands of individuals and provide the critical documentation of effectiveness and important additional safety data required for licensing. At any stage of the clinical or animal studies, if data raise significant concerns about either safety or effectiveness, FDA may request additional information or studies, or may halt ongoing clinical studies.

If successful, the completion of all three phases of clinical development can be followed by the submission of a Biologics License Application (BLA). To be considered, the license application must provide the multidisciplinary FDA reviewer team (medical officers, microbiologists, chemists, biostatisticians, etc.) with the efficacy and safety information necessary to make a risk/benefit assessment and to recommend or oppose the approval of a vaccine. Also during this stage, the proposed manufacturing facility undergoes a pre-approval inspection during which production of the vaccine as it is in progress is examined in detail.

Following FDA's review of a license application for a new indication, the sponsor and the FDA may present their findings to FDA's Vaccines and Related Biological Products Advisory Committee (VRBPAC). This non-FDA expert committee (scientists, physicians, biostatisticians, and a consumer representative) provides advice to the Agency regarding the safety and efficacy of the vaccine for the proposed indication.

Vaccine approval also requires the provision of adequate product labeling to allow health care providers to understand the vaccine's proper use, including its potential benefits and risks, to communicate with patients and parents, and to safely deliver the vaccine to the public.

The FDA continues to oversee the production of vaccines after the vaccine and the manufacturing processes are approved, in order to ensure continuing safety. After licensure, monitoring of the product and of production activities, including periodic facility inspections, must continue as long as the manufacturer holds a license for the product. If requested by the FDA, manufacturers are required to submit to the FDA the results of their own tests for potency, safety, and purity for each vaccine lot. They may be also required to submit samples of each vaccine lot to the FDA for testing. However, if the sponsor describes an alternative procedure which provides continued assurance of safety, purity and potency, CBER may determine that routine submission of lot release protocols (showing results of applicable tests) and samples is not necessary.

Until a vaccine is given to the general population, all potential adverse events cannot be anticipated. Thus, many vaccines undergo Phase 4 studies-formal studies on a vaccine once it is on the market. Also, the government relies on the Vaccine Adverse Event Reporting System (VAERS) to identify problems after marketing begins. The VAERS system and how it works is discussed further on this website.



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FOLHA DE TEXTO

Emotional Eating in Quarantined Kids

Boredom and stress are two big contributors to emotional eating, and children have a lot of both right now.

By Perri Klass, M.D. May 18, 2020

As parents stay home with their children, in a situation of anxiety and uncertainty, the recurring rituals of daily life — eating and sleeping and occupying your time — can be opportunities for comfort and family bonding or fraught expressions of stress, and sometimes both in rapid succession.

Eating together can help a family through, but for many people, both adults and children, the combination of food and stress is already complicated. Bärbel Knäuper, a professor of health psychology at McGill University, pointed to “the interconnectedness of sleep and exercise and structure and mental health,” and the ways that the current situation has affected all those different domains for many families.

“Generally, the two big things that make children emotionally eat are boredom and stress, and we have a lot of that, the children have a lot of that,” right now, she said. Dr. Knäuper said that in the short term, roughly half the population will eat more in response to stress and the other half will eat less — but with longer, sustained stress, a majority tend to eat more.

Emotional eating can mean overeating “in response to negative emotions, anxiety, sadness, anger or boredom,” said Dr. Julie Lumeng, a professor of pediatrics at the University of Michigan who studies children’s eating behavior. Those who study obesity distinguish emotional eating from other motivations that determine how much people eat — such as their reactions to the availability of food, or to satiety.

Dr. Lumeng said that there is much more research on adults than on children when it comes to emotional overeating, though there is increasing interest in how it develops in children. Some studies suggest that there is a genetic contribution to emotional eating, but that it doesn’t really play a major role until adulthood, she said. “Emotional eating in childhood seems to be due to the environment, to parental modeling,” she said.

In addition to the disruption of routines, and the combined stress and boredom that the pandemic has brought to so many children, there may be changes in what foods are available — and for children who are creatures of routine, not having their usual foods may be another stress.

So where does this leave parents, home with their children? “If you think your child is emotionally overeating, you would like to help the child manage their emotions better,” Dr. Lumeng said, “help children understand this pandemic, manage their fear, manage their anger over what they’ve lost.” That means, of course, helping children do what many of us are having trouble doing ourselves — a constant issue in parenthood.

Stephanie Manasse, a clinical researcher who specializes in eating disorders and obesity who is an assistant research professor at Drexel University, said, “Children really look to their parents as a model for how to cope with stress.” Children — and teenagers — are around their parents a great deal right now. And they are likely to notice their parents’ eating and exercise habits.

That doesn’t mean that parents should be pretending that there is no stress. “Another thing to model is that there is not necessarily a perfect way to deal with this,” Dr. Manasse said. Instead of “modeling perfection,” what you can model is emotional communication, she said, acknowledging the stress and anxiety, coping with staying inside: “It’s OK to have anxiety, it’s OK to be stressed out, to have all these different feelings, but they don’t have to determine my behavior.”

Boredom can be an important factor. But as we all know, the remedy for boredom is activity, structure, engagement, and this is a hard demand to place on parents who are already under plenty of stress, working from home, worrying about job loss, supervising online classes, keeping children entertained.

Dr. Knäuper said she was reluctant to add any additional stress to what parents are already going through by saying they need to create additional structure for their children, recognizing how much parents are already being asked to do. “I would be very gentle in pointing this out,” she said. “Just aim for some kind of structure, not to go totally wild in terms of getting up at 2 in the afternoon.”

Parents don’t have to hide these tensions from their children; Dr. Manasse suggested that parents talk with teenagers about how they are managing their own eating, but also encourage them to get creative with social interactions and stay in touch with their peer groups, for the general good of their mental health.

Fonte: Adaptado de <https://www.nytimes.com/2020/05/18/well/family/children-emotional-eating-coronavirus.html> em 07/09/2020