

Healthwatch

by Steven Bailey N.D.

Nicaraguan health

by Cheryl Smalley, N.D.
(Part Two of a two-part series)

When I arrived in Managua on May 4 of this year, the U.S. blockade against Nicaragua was set to take effect in just three days. The sense of emergency that I had expected to find was not apparent in the places I first visited. The hotels and restaurants were still full of international tourists and press people with all the usual concerns of foreigners away from home. In fact, the second night there I went to a performance of Appalachian music and dance co-sponsored by the U.S. embassy and the Nicaraguan Ministry of Culture and Cultural Workers' Union. It was only after a few days of speaking with Nicaraguans that I began to understand the sadness and frustration they felt at the prospect of severed relations with the U.S.

Although the Reagan Administration has encouraged an informal blockade for the past five years, the official blockade will cut off the last vestiges of supplies flowing from the U.S. Over the years Nicaragua has become less and less dependent on the U.S. for medicines, but American companies still do supply some drugs, and are the only source of replacement parts for most U.S.-made medical equipment. Because of a long history of complete dependence on U.S. technology, including medical technology, much of the older equipment is U.S. made.

While visiting the port town of Corinto, Portland's sister city in Nicaragua, I toured the municipal hospital and spoke with its director, Dr. Jose Francisco Bustamante. The hospital is a sprawling, old, one-story, wooden building with unglazed, shuttered windows opening onto the ocean. Four doctors, including one surgeon from Cuba, form the medical staff. They treat patients in two dozen beds using equipment that is often outdated and the limited drugs available to them. Dr. Bustamante spoke about the blockade as a very harmful and unfortunate development, but added, "It is important to turn a negative thing into a positive one, and making better relations with other countries may be a result of the blockade." He feels that other sources can be found for medicines, and even equipment parts, but that will take time. In the meantime, hospitals and clinics will simply do without. He spoke with emotion about

the moral support and strength that people there feel as a result of the people-to-people aid arriving from other countries. Because of the shortages and lack of money, he said, doctors are realizing the need to focus more effort on preventive medicine, realizing that prevention is indeed much cheaper than treatment of disease.

Another approach to the shortages is being pursued by the National Women's Organization of Nicaragua (AMNLAE). Realizing the need to develop a health care system that will increase independence from foreign suppliers, they have begun to look into the fields of natural and preventive health care. AMNLAE, together with the Center for Access to Health Information and Services (CISAS), is working with communities all over the country to gather and distribute information about alternative approaches to health care, including herbal medicine, acupuncture, midwifery and preventive medicine. One Scottish nurse working in the south of Nicaragua told me that he had helped AMNLAE with workshops to train people in the manufacture and uses of herbal medicinal tinctures from local plants.

Maria de Zuniga, director of CISAS, told me that much of the medical establishment is still uncomfortable with the idea of alternative therapies. But the need to develop new ways of meeting the demand for health care is so great, she said, that good alternatives cannot be ignored for long.

Cheryl Smalley is a naturopathic physician practicing in Portland who recently returned from a one-month trip to Nicaragua.



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Lola "Red Up" Woodland, of Gladstone, Oregon, shows how she feels passage of Ballot Measure 1 would affect Oregonians during Oregon Fair Share rally against the state sales tax at the Pine Street Theater last Friday. (Photo: Richard J. Brown)

NAACP meeting

The Portland Branch of the National Association for the Advancement of Colored People (NAACP) is resuming its regular branch meetings (suspended in July and August) held at 4:00 p.m. on the third Sunday of each month. The meeting on Sunday, September 15, will be at the Vancouver Avenue First Baptist Church, 3138 N. Vancouver Avenue. Reverend O. B. Williams is the host pastor.

Reports will be made by the President, Mrs. Ora Nunley, and others on the National NAACP convention held in Dallas this summer. The first-place

winner of the Portland Branch ACTSO (Afro-American Cultural, Scientific-Technical Olympics) Donna Eason, will tell the branch her impressions of the ACTSO contest and of the young people competing. Donna is a Junior at Jefferson High School. All NAACP meetings are open to the public.

Chief Harrington continues ban on sleeper hold

by Jerry Garner

Chief Penny Harrington announced last Friday that she would continue to ban the use of the sleeper hold. Harrington said the hold would be banned for 12 to 18 months because she had not received enough information on this important decision.

The ban of the hold followed the death of Lloyd D. Stevenson, who died after police applied the hold on him at a convenience store on April 19. The hold has been banned by some police departments in the U.S. and is limited in its use by others. Since 1975, 16 people have died in Los Angeles from the use of the carotid hold. A poll taken in May by Bardsley and Haslacher for the Oregonian indicated that 56 percent of the 300 adults interviewed stated the sleeper hold used by the police should be banned in the City of Portland.

In other police related news, an arbitrator ruled against Portland Police Union President, Stan Peters, in his bid to get the City of Portland to pay half of his salary without performing any work for the City. Peters was ordered relieved of all police duties more than three years ago by former Police Chief Ron Still, even though the City continued paying Peters a half-time patrolman's salary.

The order by former Chief Still took effect September 16, 1981. Harrington signed an order June 28, 1985 assigning Peters, 51, to the Bureau's telephone report unit for maximum half-time work. Harrington said budget cuts forced her to use all available resources within the Bureau and it made no sense to pay Peters if he wasn't working.

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