

OPINION

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End Childhood Obesity

An epidemic that's 100 percent preventable

BY JUDGE GREG MATHIS



As a community, it is our goal to develop these young people into well-rounded, healthy adults. We can all play a part in making that happen.

A recent study found that nearly 80 percent of children who were obese between the ages of 10 and 15 were also obese once they reached 25. Overweight children and teens are at risk for developing high blood pressure and diabetes and are more likely to have a heart attack or stroke in adulthood than their thinner counterparts.

Education leaders must ensure that public schools provide healthy meal choices in their cafeterias. Poor students, many of whom are African American, are more likely to eat school lunches. For many, this is their only complete meal of the day; it should be a healthier restaurant and grocery store chains to set up shop in their communities.

Parents have to shoulder some of the responsibility as well.

Childhood obesity is a growing problem, one that must be put in check. This isn't about

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aesthetics. It's about health.

There are a lot of reasons our kids are overweight. Among them is today's focus on activities such as video games and surfing the web that don't require young people to exert much physical effort. Combine that with unhealthy food choices, whether they be quick meals put together by overworked parents or those dished out in school cafeterias, and you've created a growing health epidemic that is 100 percent preventable.

If we really care about our children, we'll work to ensure that they avoid the dangers associated with childhood obesity.

Encourage your children to play outdoors; turn off the televisions and computers. Parks in most cities offer many free to low cost fitness and sports program for children and teens; call your local park district to learn more.

The school year has begun. There is no better time than now to turn our attention to the health of our children.

As a community, it is our goal to develop these young people into well-rounded, healthy adults. We can all play a part in making that happen.

Judge Greg Mathis is vice president of Rainbow Push and a board member of the Southern Christian Leadership Conference.



Millions Need Healthcare Reform

Uproar used to cloud the debate

BY DR. HENRIE M. TREADWELL

The uproar at the raucous town hall meetings, Rep. Joe Wilson's outburst in Congress and the endless debate over whether some opposition to healthcare reform is racially-tinted are a major disservice to the millions of Americans who need healthcare reform.

Rep. Wilson doesn't worry about costs if a member of his family falls ill; he is covered. The majority of the people screaming and waving signs at town hall meetings don't worry either. They are covered. Their family members walk into a doctor's office or hospital emergency room, flash insurance cards and receive the best treatment available.

But who has been speaking on behalf of the 46 million uninsured Americans? When they get sick, there are real consequences. Do they pay the mortgage or the hospital bill? Do they buy food or save to pay for the tests that may prolong a family member's life?

These are issues that deserve attention from our lawmakers and policymakers, not red herrings like "death panels" and purported coverage for illegal immigrants. It's disheartening that public officials elected to serve their constituents have the audacity to play political football with something as crucial as healthcare reform.

Our nation will have a serious discussion on healthcare reform only when the politicians put their constituents ahead of their desire to maneuver for political gains. What's



so disturbing is that many opponents of healthcare reform, and most assuredly many public officials, are aware of the data showing how quickly healthcare costs are rising out of control and damaging our society.

The reality is that our safety-net systems are crumbling under the cost of caring for people

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who are uninsured or underinsured. The working poor simply have no or limited options for providing healthcare for themselves and their families. This predicament devastates communities of color, where more than seven million African Americans are without coverage. This is not a contrived problem; rising healthcare costs are a real crisis.

So why, suddenly, must healthcare reform legislation become a budget-reduction bill?

Instead of focusing on how to obtain the best coverage possible for millions of people without insurance, the debate in Congress has been transformed into a referendum on which plan can save government the most money. This is not how it should be. When Congress was allocating billions of dollars for the war in

Iraq, the focus was on how to win the war, not on how much taxpayer money could be saved.

Right now, the nation needs its leaders, President Obama and the Congress to focus on the best plan for the people, regardless of the cost. There has been much debate over whether there should be a "public option" allowing the government to offer insurance. The public option should be considered not based on its cost, but its merit. It should be in-

health insurance at rates likely to be difficult for them to pay.

The Kaiser Family Foundation recently released data further reinforcing why real healthcare reform must be enacted. Already, healthcare coverage for the average American family costs \$13,375 a year, and health insurance premiums increased 138 percent over the last 10 years. At that rate, many families will suffer financial hardships.

Yet, largely because of the diversionary issues used to cloud the debate, the public doesn't focus on the fact that we all pay a price when healthcare costs skyrocket. The businesses that pay the healthcare coverage for 160 million Americans must either deduct more money from employee wages or raise the price of their products or services, or in some cases, do both.

Healthcare in America is a train racing toward derailment.

When lawmakers consider the cost of a plan, they need to also consider the pain and higher cost caused by their inaction. They need to hear the voices of the 46 million people who are uninsured. They need to hear from the people with soaring medical bills.

And they need to remember that if the town hall meetings had been populated with people without insurance, they would wave signs, saying, "Help Me."

Henrie M. Treadwell is director of Community Voices, a nonprofit organization at Morehouse School of Medicine working to improve health services and health-care access for all Americans.

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America Understood Clunkers

Bodes well for the future of clean cars

BY CARL POPE

Cash for Clunkers ended with a bang Aug. 24, finishing a frantic month for dealers and consumers alike. While some of us may be relieved that those commercials are at an end, the program's popularity should have us thrilled.

Clunkers proved to be an intriguing government program--one that bodes well for the future of clean cars and clean energy in the U.S.

The Cash for Clunkers program did something other than sell cars: It captured the public's attention in a way that few government programs have. It was widely discussed, drew exten-

sive media coverage, and spurred a quick rush of participation.

It successfully labeled once desirable SUVs as low-mileage hogs. The program's unsaid message was out with the old, inefficient thing, in with the new, cleaner one.

The mere inclusion of fuel economy requirements in the program created a discussion at dinner tables and water coolers across the country--was your old vehicle guzzling enough fuel to be a clunker, and how much better did your new vehicle need to be to get a voucher?

American consumers got it. They wanted to save money and reduce our dependence on oil, and when given the opportunity they tended to purchase vehicles that will do that.

Over a frantic month, consumers were in the driver's seat when it came to making the most out of the program.

While the fuel economy requirements allowed consumers to simply replace old guzzlers with marginally more efficient new ones, statistics from the Department of Transportation show that consumers did not do that. Although not all sales data is in and there is much analysis still to be done, consumers purchased a vehicle that was, on average, 9.2 miles per gallon better than their trade in vehicle--a 58 percent improvement.

Under Clunkers, most consumers drove gas-guzzling trucks and SUVs onto lots and drove off with much better vehicles, mostly cars. Some 84 percent of trade-ins were trucks and SUVs, while 59 percent of purchased vehicles were cars.

Carl Pope is executive director of the Sierra Club, a grassroots environmental organization.