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KATHRYN B. BROWN

Publisher

DANIEL WATTENBURGER

Managing Editor

JENNINE PERKINSON

Advertising Director

TIM TRAINOR

Opinion Page Editor

OUR VIEW

Tip of the hat;
kick in the pants

A tip of the hat to the response to the explosion and fire that demolished the old city hall building and claimed a life in Pendleton. That includes private citizens who rushed into the building to try to save lives in the immediate aftermath, as well as the police officers and firefighters who bore down on the blaze and kept it from burning a destructive path down Main Street. It also includes the VFW, Red Cross and the Episcopal Church, who helped care for emergency responders and victims. It also includes people far and wide who have donated their dollars and their time to the recovery effort.



It surely was a tragedy. A man died. But it could have been much worse, both in loss of life and property. Those who helped limit the damage deserve plenty of kudos. The destruction that could not be avoided should recommit the city to protecting and improving its downtown core. We should keep pressure on derelict property owners and be forceful with inspections and work on infill development. If Pendleton was to lose the beautiful, historic bones that hold up the city both culturally and economically, it would likely not recover for decades — if at all. Firefighters are an important part of protecting our core, but so are landlords and tenants, business owners and city planners. Meeting just hours later at the previously scheduled city council meeting, City Manager Robb Corbett addressed the crowd with: “In a situation of tragedy, the city was at its best.”

We concur. Except for those who weren’t at their best... Because we offer a kick in the pants to everyone whose response to the tragedy was to start rumors, and generally just think the worst of their neighbors.

An excellent column from Timothy Egan about our neighbors in Joseph ran in this newspaper on Tuesday and started with this line, riffing off the famous first line of Anna Karenina: “Unhappy small towns are all alike: claustrophobic, gossipy, dying.” Surely Pendleton for a short time was an unhappy small town, our downtown aflame. Some people responded poorly, commenting online and in social media that the cause of the fire was a meth lab.

Irresponsible reporting from Tri-Cities television station KEPR only exacerbated the problem. They wrote the unsubstantiated: “Reports at the scene suggested a possible meth lab explosion” in their stories, including a final report that included Pendleton police chief Stuart Roberts’ written statement “there is no information that would indicate that the fire is/was the result of an active methamphetamine lab as has been speculated and/or reported.”

A note for readers: “Reports at the scene” is media code for “a person on a street corner with no knowledge of the situation told us.” Ergo, don’t believe it. In times of strife, we fall back on the “Don’t be terrible” philosophy. Why be terrible when you can be *not terrible*? Wait for the facts. Try to be of service. Comfort before you condemn. That’s the kind of thing that makes small towns the “laboratory of hope” that Egan thinks they can be.

Unsigned editorials are the opinion of the East Oregonian editorial board of Publisher Kathryn Brown, Managing Editor Daniel Wattenburger, and Opinion Page Editor Tim Trainor. Other columns, letters and cartoons on this page express the opinions of the authors and not necessarily that of the East Oregonian.

OTHER VIEWS

Telemedicine in rural Oregon

The Bend Bulletin

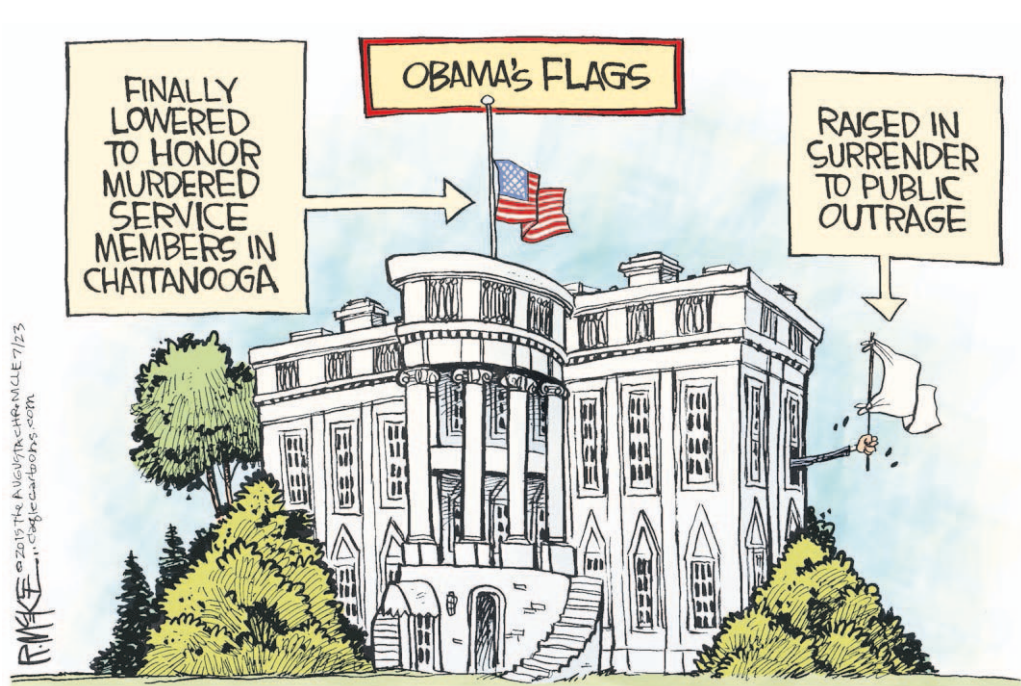
If you live in rural Oregon, you can call a physician on a video-conferencing system if you have medical problems. Now, thanks to a change in the law approved by the 2015 Legislature, people all over the state will be able to do the same thing. Senate Bill 144 changed the law covering telemedicine in Oregon, making it available to Oregonians in urban as well as rural areas and including teachers and other public employees. It also expanded the circumstances in which telemedicine can be used. Equally important, the bill requires insurance providers to cover use of the system. It also removes a provision of the law that barred the use of telemedicine if it duplicated or replaced services that were available in person. That means, if the physician’s office is equipped to do so, you might be able to call and have your pediatrician diagnose a sick child without having to leave home. The bill also should dramatically expand mental health services in communities that don’t have that to offer today. Psychiatrists in Portland will be able to set up weekly appointments with patients in Heppner or Madras if they wish, and the patients will not have to spend hours on the road to keep those appointments. Those kinds of hidden costs — time, gasoline, perhaps even a night in a motel — seldom show up when the rising cost of medicine is under discussion, but they’re very real, nonetheless. Telemedicine offers a quicker and less expensive way to get the same sort of care that’s available to residents of much larger communities. Telemedicine doesn’t now and won’t anytime soon replace all visits to the doctor’s office, to be sure. Even the most souped-up teleconferencing system cannot set a broken bone or provide other hands-on treatment. At the same time, SB 144 will put Oregonians in touch with a service that makes some medical care easier to reach, less expensive and less time consuming than it has been before. That’s nothing to sneeze at.

YOUR VIEWS

Echo neighbor celebrates nations defeated by USA

Our Echo neighbor displays his patriotism in a manner quite unique. He chooses to fly the flag of nations we have defeated on the tailgate of his pickup. So far he has only one flag, that of the Confederacy, but I feel sure he will soon add the Union Jack (Revolutionary War and War of 1812), the Canadian flag

(who lost the War of the Pigs in Puget Sound), the Mexican flag from our war over the border of Texas, the Spanish flag (the Philippines), the Kaiser’s World War I flag and, of course, the Swastika and Rising Sun flags. I salute you, neighbor, on your Americanism display that will, when complete, mark a salute, proudly. D.G. Reese Echo



OTHER VIEWS

Starvation as a product of war

AWIEL, South Sudan — One gauge of the famine looming in South Sudan is that people are simply collapsing from hunger. As I was driving into this city, a woman was lying inert on the road. She was Nyanjok Garang, and she said she hadn’t eaten for three days. She had set out to look for work, maybe washing clothes, in hopes of keeping her two children alive. After a day of fruitless walking she had collapsed. “My children are hungry,” she said. “I’m hungry. There’s not even a cent left to buy bread.” Her husband is a soldier in the government forces fighting in South Sudan’s civil war, but she doesn’t even know if he is still alive. So she left her children with a neighbor and set out in hopes of finding work — “and then I blacked out.”

A horrific famine enveloped what is now South Sudan in 1988, and there are some signs that this year could see a repeat. As in 1988, weather has led to poor harvests on top of civil war that has made it difficult to plant crops and move food around the country. President Barack Obama will be focusing on the South Sudan civil war in his trip this month to Kenya and Ethiopia, both neighbors to South Sudan. The war is not only a military crisis but also a humanitarian catastrophe, which makes it all the more important to step up efforts to bring about peace. You might think that what’s needed to end a famine is food. Actually, what’s essential above all is an international push of intensive diplomacy and targeted sanctions to reach a compromise peace deal and end the civil war. Yes, Obama has plenty on his plate already, but no other country has the leverage the United States does. And in peace, South Sudan can care for itself. But as long as the war continues, South Sudanese will face starvation — especially women and girls. The gender dynamics of hunger are obvious: In Aweil, the hospital ward is full of skeletal women and girls, looking like concentration camp survivors. That’s because (as in many places around the world) when food is insufficient, families allocate it to men and boys, and women and girls disproportionately starve. One 15-year-old girl in the hospital, Rebecca Athian, was so malnourished that her bones pushed through her skin and she had a measure of anemia (a hemoglobin level of 3) that in the West is pretty much unheard-of. Yet the hospital was now forced to discharge her

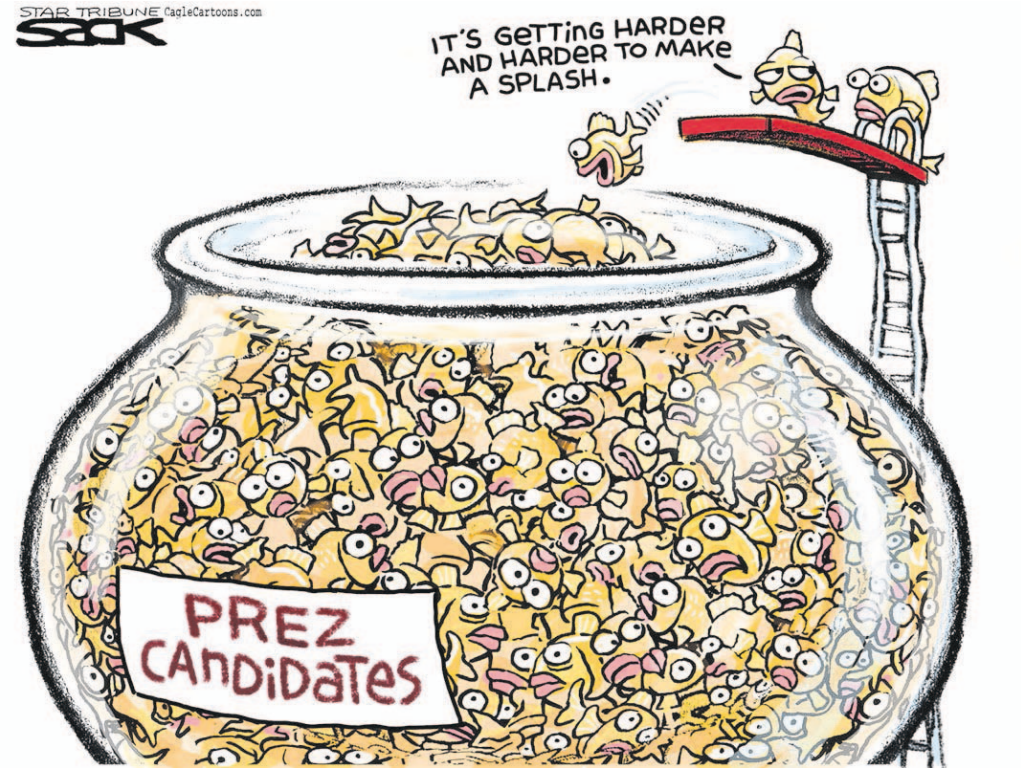
to make way for new patients. Rebecca has already lost two siblings in the last year, and although the causes of death were never fully determined, it’s a good guess that they were malnutrition-related. Her mother would like to marry Rebecca off, because it would then be her husband’s duty to feed her and keep her alive. But she says Rebecca has been raped, so men are unwilling to marry her. The United Nations says 4.6 million people in South Sudan — more than one-third of the population — are “severely food insecure,” and the situation will deteriorate in the coming months because the next major harvest won’t come until October or November. Until then, there is nothing to eat. “It is the first time we’ve seen so many cases like this,” said Dr. Dut Pioth, the acting director of the hospital. “It’s going to be like what we saw in 1988.” Dut was 11 years old during that famine, and he remembers some relatives starving to death. His family fled to Khartoum, where he thrived in school and attended medical school. But he is frustrated because what patients often need now isn’t so much medical care, but rather food and peace. To see starving children is particularly wrenching. They show no emotions: They do not cry or smile or frown, but simply gaze blankly, their bodies unwilling to waste a calorie on emotion when every iota of energy must go to keep major organs functioning. It’s striking that this area of South Sudan is not directly affected by fighting; it’s calm here. But the hunger is still war-related, for the conflict is keeping food and supplies out. The road from the capital, Juba, has been blocked by fighting, and disputes with Sudan have closed the border to the north. So this area is cut off, prices are skyrocketing, jobs are disappearing, and ordinary workers can’t afford to buy food. The only certainty is that it will get worse in the coming months, and the women and girls who die will be war casualties. “Those who are dying of gunshots,” Dut notes, “are fewer than those who are dying of hunger.” ■

Nicholas Kristof grew up on a sheep and cherry farm in Yamhill, Oregon. Kristof, a columnist for The New York Times since 2001, writes op-ed columns that appear twice a week. He won the Pulitzer Prize two times, in 1990 and 2006.



NICHOLAS KRISTOF
Comment

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LETTERS POLICY

The East Oregonian welcomes original letters of 400 words or less on public issues and public policies for publication in the newspaper and on our website. The newspaper reserves the right to withhold letters that address concerns about individual services and products or letters that infringe on the rights of private citizens. Submitted letters must be signed by the author and include the city of residence and a daytime phone number. The phone number will not be published. Unsigned letters will not be published. Send letters to Managing Editor Daniel Wattenburger, 211 S.E. Byers Ave. Pendleton, OR 97801 or email editor@eastoregonian.com.