



J.D. SMITH

FROM THE HEADWATERS OF DRY CREEK

A pair of tales about cigarettes

Here are two cigarette stories. The first I heard in a front yard full of chickens along French Creek, 3 miles above the River of No Return in central Idaho. The second was told in my own front yard by a gray-haired food photographer and motorcyclist.

ONE

“No thanks, don’t want no damned cigarette and I’m gonna tell you just exactly why. See that tower up there? 67 feet tall. Right at the top is what in 1965 was the world’s finest and most sensitive television antenna, 10 feet long with more metal than a brand new Honda car. Has the remote control attachment too. You can spin the thing and zero right in on the signal.

“It took a long time’s worth of egg money to buy that tower, antenna, and the Magnavox console that came with it. Better part of eight years to save 10 quarts of coins. I figure maybe a couple thousand dozen eggs.

“All my life I wanted to watch the Kentucky Derby. What with trying to keep all these birds alive in a part of the world populated with coyotes and cougars, and me and the wife being scared of flying, there was no way in hell that we were ever going to make it to Churchill Downs. So, when we heard that Lewiston and Moscow and Pullman were going to get television stations, we figured that we should get a system that would bring the Derby right into our home. So we put up the tower, plugged everything in, and by God we could get a picture even down here in this hole, mostly skip signals and fuzzy, but better than you would think.

“On Derby day, Momma popped a big old bowl of corn and squeeze fresh lemons into two jars and we plopped ourselves into our BarcaLoungers right up close to the set. We even had TV trays.”

“After all the falderal and carryings-on about who had the nicest bonnets and prettiest dresses and after all the horses were saddled and led around the paddock and after Old Kentucky Home was sung and after the jockeys had saluted the Governor of Kentucky, after all this foreplay I was so excited I couldn’t do anything but squirm.”

“So, just as the horses were loading into the starting gate, I reached out on the TV tray, shook a Pall Mall out of the pack, fumbled around and found a match and fired up the butt. Just as the gate flew open I started coughing, and I hacked and wheezed and blew snot for every step of that race. I know that Willie Shoemaker rode Lucky Debonair for the win, cause Momma told me so, but I never saw a thing but the inside of my handkerchief. That’s the day I quit smoking and I ain’t looking back.”

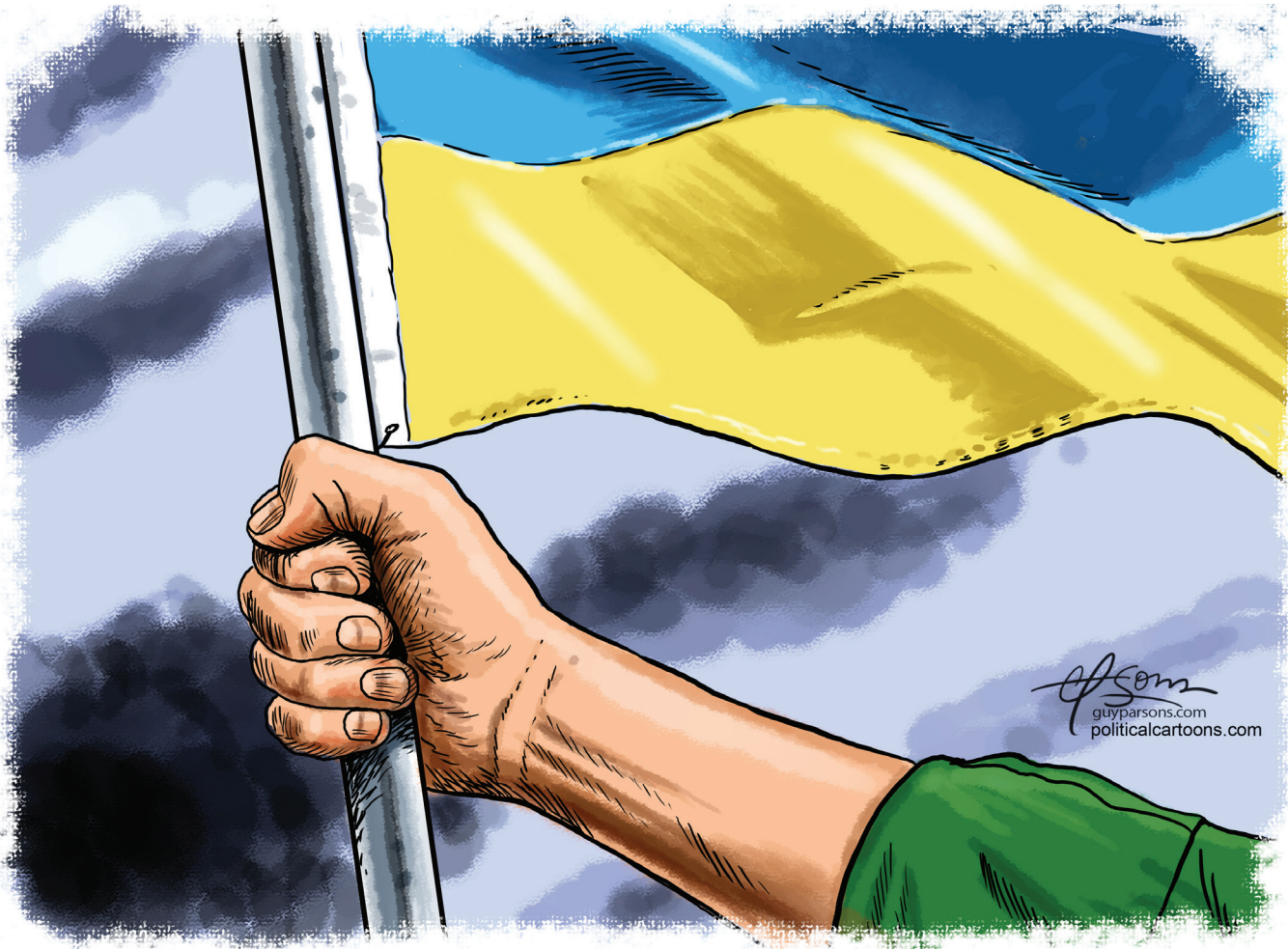
TWO

“I was in Vietnam. Joined. Still not sorry I did. It was after Tet sometime, the rainy spring of 1968. I’d been over there a little more than a year, had been coughing a little, so I had laid off smoking tobacco for maybe 30 days.”

“We were pinned down. There had been a pretty nasty firefight all night. Intelligence said we could be toast by daylight. I was butt-deep in water in a hole, watching the brush moving all around me, when this regular Army picket fence private jumps down there with me, pulls out a smoke, squats down and cups the fire so he won’t be sniped and lights up. He shakes the pack and offers me one. I say, “No. Thanks. I figure those things are not good for you. I quit a month ago.”

I wish I had a picture of the look on his face. It was the most deliberate show of disbelief I have ever seen. Here we were, for Christ sake. We were pinned down in deep doo-doo. We were together in a dank hole in the ground 6,000 miles from home. There were tracer rounds buzzing around us like fireflies. There was a good chance we might not live to see lunch, and I was concerned about the health risks of cigarette smoke. He shook the pack one more time and I became a cigarette smoker again. Haven’t quit yet.”

J.D. Smith is an accomplished writer and jack-of-all-trades. He lives in Athena.



Carrots, sticks, COVID-19 and herd immunity



ANDREW CLARK

SLICE OF LIFE

The “carrot-and-stick” approach was used with donkeys pulling carts in the 1800s. Which works best? Beating the donkey with a stick, or having a carrot dangling on a string held in front of the donkey?

Approximately 9 of 10 people in hospitals and the vast majority of deaths with COVID-19 are unvaccinated people (non-vaxxers). Vaccinated people are 97 times less likely to die than non-vaccinated. These are very important statistics.

How and why?

The COVID-19 virus affects multiple organ systems. The virus damages the interior lining of blood vessels (endothelium) and blood carrying the virus can damage your entire body right down to the level of each single cell that is serviced by your blood, which is all of them. Lungs are significantly harmed as a primary site of infection.

There is damage to the brain (brain fog, headaches), heart, kidneys, liver, spleen, reproductive organs (blood vessels that cause erection are damaged and men can become impotent), women can produce damaged oocytes (eggs) and loss of senses of taste and smell. There also is immune system malfunction, impaired blood clotting capability, potential PTSD and other mental health problems.

Some people with COVID-19 develop abnormal blood clots, including in the smallest blood vessels, and these clots may also form in multiple places in the body, including in the lungs again. This unusual clotting may cause several types of complications, including organ damage, heart attack and stroke. And additionally, it all may end as the “long-COVID-19” syndrome too. This is really serious stuff with lifelong complications.

Back to donkeys and sticks. Trying to beat those who will not be vaccinated into submission to do the right thing — for both themselves and for society in general — has not worked. All the begging and pleading with the vaccine denying contingent still has still left us Americans with an estimated 20%-36% unvaccinated people. That group will be responsible for keeping the pandemic rolling along for

months and/or years with virus mutations and new variants popping up and threatening us even more, and all the things we have been doing to prevent infection, the masking and distancing and isolating and on and on will have gone to waste.

Are the vaccines safe? Yes. More than 9.87 billion of doses have been administered all around the world with negligible side effects, so safety is well proven. Do vaccines have side effects? Yes, of course — tiny ones. In relation to dying of COVID-19, those side effects are less than miniscule. You may have the right to die, but you do not have the right to transmit infection and kill other people as well.

Non-vaxxer (that is a technical term) people are plugging up hospitals and other people in need cannot be served. In a hospital and/or anywhere else, a non-vaccinated person is a threat to everyone around them and they should not be allowed to threaten everyone else in the medical facility.

Nationwide, more than 400,000 health care workers — let me repeat that — 400,000 nurses and respiratory therapists and physicians — have quit. They are burned out. 400,000 of them. What a horrendous number and loss of medical expertise. In addition to the stress, fatigue and potential for themselves being infected and then infecting their families, the emotional impact of working so diligently and then seeing so many people suffer and die needless deaths has left them devastated.

But here’s an idea — a carrot — that is easy to implement and gives the unvaccinated population a reason to reconsider their position. Medical facilities of all sorts admit only people who can show proof of vaccination. At hospitals, if a person is not vaccinated and has COVID-19 they are allowed entrance only once into the emergency room, are treated and sent home to quarantine there.

The option of telemedicine is offered for recuperation at home. This should be a law, but if not could potentially be an enforced policy for protection of hospital patients and staff. The carrot simply is availability — or not — of in-hospital health care. It is yes or no. But telemedicine is always available. I know denying people medical treatment is currently not legal, so this suggestion is spurious but laws are subject to change if need be.

The only exception to vaccination is acute life-threatening medical conditions, with appropriate documentation from the attending physician. To prevent frauds,

before admission that physician will be contacted for confirmation. Religious exception is not allowed.

I am not aware of any basic religious book — the Bible, the Koran, the Torah, others — that says anything about COVID-19 vaccination, but the Bible does say things about your body being a “temple of God” and taking good care of your body. Anything said about religious objection to vaccination is from men who have concocted up spurious opposition that has nothing to do with religion.

Do I sound cynical? Of course I’m cynical. I’ve been state veterinarian of Oregon and that position is responsible for the exact same things for livestock as the public health officials are for humans — surveillance for disease, sample taking and laboratory diagnostics, epidemiology to understand the dynamics of the disease and where/how the disease is spreading, disease control in livestock it is either culling (slaughter) or vaccination and constant emergency preparedness for rapid response to disease outbreaks.

I know the amount of work it takes to make large-scale disease control programs work, and we all should be honoring our public health personnel and cooperating with them.

Vaccination is the most basic of all tools for establishing population-wide “herd immunity” (a veterinary term originated in 1894) and universal protection of the population. Cattle get vaccinated 100% because if the rancher wants to succeed he has to prevent disease and he does it. So, concerning COVID-19, if a person wants to succeed they will be vaccinated. If they will not participate in elimination of the disease and the disease eliminates that person, that’s fair play as far as the virus is concerned — viruses do not have souls that grieve and mourn at the loss of your life.

But it is very sad that spouses and children and friends will grieve and mourn, and in many thousands of needless deaths are doing so, right now as you read this message. The worldwide death toll stands at 6.04 million as of March 9 and 961,000 in the U.S. We in the U.S. have nearly 20% of worldwide death. How can this be?

May I suggest that you get vaccinated, please?

Dr. Andrew Clark is a livestock veterinarian with both domestic and international work experience who lives in Pendleton.

Transforming Pendleton’s Historic Rivoli Theater



ANDREW PICKEN

THE EDUCATION CORNER

The Rivoli Theater will be returning to Pendleton.

Last week State Sen. Bill Hansell called to say the Rivoli Theater Restoration Project will receive a \$1.5 million dollar grant from the state of Oregon.

This is the single largest grant ever to a Pendleton Main Street historic restoration project. With this funding, the Rivoli Coalition will be able to complete basic concrete and steel work, begin second stage architectural planning and leverage additional funding.

We established the Rivoli project in 2011 as a 501c3 nonprofit corporation with this mission: To transform Pendleton’s Historic Rivoli Theater into the Northwest’s premiere showcase for excellence in arts, information and entertainment.

In the intervening 11 years, the coalition completed a project feasibility study,

obtained title to the Rivoli building, removed 50 tons of material from the building and sealed the roof. In addition, we have removed all asbestos, two obsolete oil tanks and a 3,500 pound beam from the building. Portions of the beam will be used in another local historic renovation project, and an instrument maker has repurposed some of the wood as beautiful custom-made guitars.

The Rivoli funding story is one of public, private and nonprofit partnership.

The project enjoys the support of a wide range of organizations, individuals, nonprofits and companies. There are too many to list here; we are deeply grateful to everyone who has contributed.

As of today, the Rivoli project has raised \$2,203,743. Donors include corporations, foundations, government and individuals. Of this total, \$262,306 — 12% of total — was raised in Pendleton. The remaining \$1,941,307 — 88% of total — is from sources outside this community.

This means that for every \$12 invested by the local community, we have brought in an additional \$88 from outside Pendleton. This translates into a matching ratio

— also known as return on investment — of 7.3 to 1. This proves that local support and investments can draw significant funding from outside of Pendleton.

The Pendleton Development Commission has led the way from the beginning, providing critical funding for the Rivoli Theater feasibility study, building purchase and roofing. So far, the total investment of the PDC is \$165,106, which is 7.5% of the total. For every \$7.50 invested by the PDC, we have raised an additional \$92.50. This translates into a matching ratio or return on investment of 12.3 to 1. This is proof of the economic value of Pendleton Development Commission investments.

Thank you to the citizens, foundations, businesses and government of Pendleton, the Confederated Tribes of the Umatilla Indian Reservation, Umatilla County and the state of Oregon. We still have a lot of fundraising and work ahead, but together we will restore and transform Pendleton’s Historic Rivoli Theater into a community treasure.

Andrew Picken, of Pendleton, is the president of the Rivoli Coalition.