

Should grocery stores be allowed to sell liquor?

If you are a newcomer to Oregon and yearn for booze, you learn quickly that you can only buy hard liquor in state liquor stores.

If you are a newcomer to Oregon, you also learn quickly that Oregonians can't pump their own gas in many parts of the state. (It's a wonder the state lets people plug in their own electric cars!)

Surveys from the Oregon Values and Beliefs Center seem to indicate Oregonians are ready for change — where they can buy liquor and in pumping gas. Polls done in January showed more than 50% of Oregonians support both policy changes.

The restrictions on pumping your own gas already have begun eroding. It's OK to pump your own in much of Eastern Oregon. Right now Oregonians can do it because of the heat — until Tuesday evening. We think Oregonians can handle it full time. If you don't want to pump your own gas, we understand. In other states, full-service stations often cater to that desire.

A permanent shift in the rules for booze may soon be coming to a ballot near you. Two possible ballot measures led in part by Lauren Johnson of Newport Market in Bend aim for change. In one, grocers could sell local spirits. In the second, hard liquor just would be for sale at the grocer. It's not clear if the Northwest Grocery Association, which is backing both efforts, will

actually focus on one or the other for the 2022 ballot.

A private system with state oversight works OK for pot sales. Grocery stores manage to sell beer and wine just fine. We are sure they could do the same with hard liquor.

There are many questions, though. What happens to the people who have invested in state-controlled liquor stores? Their business model would be in big trouble. And will small producers of craft liquors be better off in this new system or worse?

The bigger worry for some is what happens if it becomes more convenient to get hard liquor. Would problems with addiction and substance abuse rise? Maybe. But if people want booze now, though, they will manage to get it. And we don't see a tidal wave of people in states with more freedom to buy liquor calling to add more restrictions to where liquor can be sold.

There's going to be interest in figuring out what it might do to prices, as well. But until we know for certain what will be on the ballot, it's hard to know what it might do. It's also hard to know if this just will be another in a series of similar measures that never became law.

Legislature improves water law in HB3103

Among the victories in this legislative session there was one for water, courtesy of House Bill 3103.

Unless you are fluent in Oregon water law, the bill can be a pain to understand. But basically what it does is make it easier to get water where it needs to go. An example makes it easier.

The one we have used is Wickiup Reservoir. When there is not a drought, it can hold up to 200,000 acre feet of water. One acre foot of water is the amount of water to cover an acre in one foot of water or about 325,851 gallons.

Rights to stored water are set in Oregon, such as where it is stored and what it can be used for. Wickiup's water is all designated for North Unit Irrigation District, outside

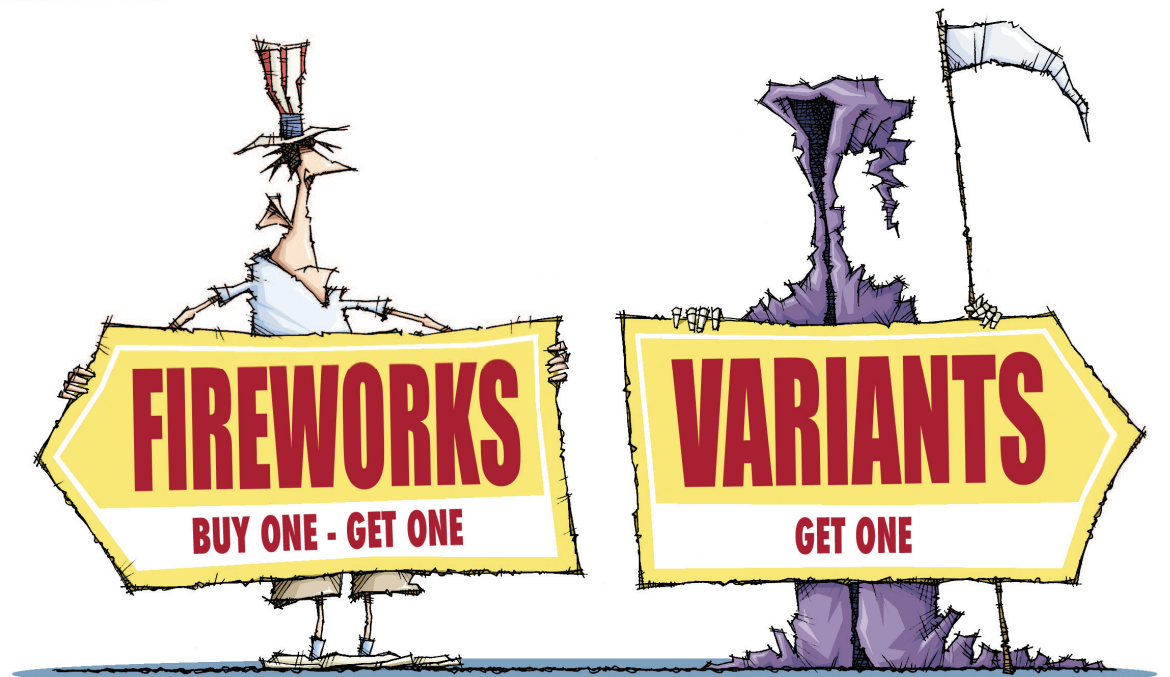
of Madras. But what if there was a better way to shift water around in the basin? Under current law, that's difficult.

HB 3103 makes it clear that the holder of a water rights certificate can change the type of use of the water. It applies across the state, not just to the Deschutes Basin. And it also appropriates nearly \$500,000 to gather stakeholders together to talk about other water issues that also could use changes.

Local legislators, state Sen. Tim Knopp, R-Bend, and state Reps. Jason Kropf, D-Bend, and Rep., Jack Zika, R-Redmond, voted for the bill.

HB 3103 won't bring snowpack, rain or cooler temperatures. It is an incremental improvement that helps make better use of the water we have.

Tim Campbell
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SEASONAL OPPORTUNISTS

GUEST COLUMN

City should reconsider buying Value Inn

BY NUSRET AYDIN

I am writing concerning the city's plan to purchase the Value Inn on NE Division Street so it can be turned into another homeless shelter. Without bothering to confer with business owners and residents, the city has decided to set up a third shelter on Division Street bringing the homeless shelters in the area to three.

Two homeless shelters, The Shepherd's House and Bethlehem Inn, are located in close proximity of one another. If the city is successful in purchasing The Value Inn in the middle of Division, we will have three shelters clustered in one place. Three is too many and will create an environment that can draw transients and other strangers to wander around the neighborhood. Some people come to the area even now to access the amenities (meals and showers) at the Shepherd's House and the Bethlehem Inn.

"No trespassing" signs are ignored, and people park on empty lots in the middle of a residential area, making the tenants uncomfortable. Those tenants are forced to avoid the lots when they can. In addition to the shelters there are camps in the area, which serve many people. These camps generate garbage and bad

odors from using the outdoors as a toilet. With so many shelters in such a small area, the city is inadvertently creating Bend's first ghetto and, possibly, the demise of businesses.

Division Street is the access point to downtown Bend. Because it was only an old part of town, it was neglected and ignored for many years. But with new interest and investments from various businesses, Division was given life and is now something to be proud of. There are two businesses across from, and near, the Value Inn that have recently spent millions of dollars to improve and renovate their buildings. Owners on Division are deeply disturbed and worried about the future. Only one block away from the proposed new shelter is a newer development of beautiful homes where property values will be in question. Already, we know that shelters are a magnet for many homeless and transients who do not qualify for admittance to Shepherd's House (on Division) or Bethlehem Inn (on Third Street close to Division). There are presently several serious camps on nearby empty lots or under bridges on Division allowing people to take advantage of the generosity of the present two facilities.

We believe that another shelter on

Division Street will undermine the efforts of the owners of businesses and residences. No one thought about the real possibility that the huge money grant of more than \$9 million from the state would impact the tranquility and success of Bend's businesses and residents. We expect the city to be responsible to all concerned, not just a small minority of citizens, but for all. Creating a ghetto is not the answer. More deliberation and planning must go into solving Bend's homeless problem.

I know there are people who like the homeless lifestyle and will continue camping out. Training and finding work should be a requirement for receiving any aid. People who are of poor health could be helped another way, perhaps halfway houses.

We urgently request the city to be responsible and just in its decision making. The whole city must share in the homeless problem not just owners in any single area. Homeless shelters should be spread out, north to south, east to west. The city must reconsider its decision to purchase the Value Inn and find an alternative in another area of Bend. There are plenty more motels in Bend that could be under consideration.

■ Nusret Aydin lives in Bend.

Letters policy

We welcome your letters. Letters should be limited to one issue, contain no more than 250 words and include the writer's phone number and address for verification. We edit letters for brevity, grammar, taste and legal reasons. We reject poetry, personal attacks, form letters, letters submitted elsewhere and those appropriate for other sections of The Bulletin. Writers are limited to one letter or guest column every 30 days.

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Your submissions should be between 550 and 650 words and must include the writer's phone number and address for verification. We edit submissions for brevity, grammar, taste and legal reasons. We reject those submitted elsewhere. Locally submitted columns alternate with national columnists and commentaries. Writers are limited to one letter or guest column every 30 days.

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There's no reason to think the coronavirus vaccine could cause infertility

BY LEANA S. WEN

Special to The Washington Post

The White House acknowledged June 22 that the United States will not reach President Joe Biden's goal of getting 70% of adults vaccinated with at least one dose by the Fourth of July. While the vaccination rate among Americans age 30 and up has hit this benchmark, it remains much lower for those 18 to 29. And one major reason for that is misinformation about the coronavirus vaccines.

We can lament how misinformation can affect the health care decisions of millions of people, but that won't solve the problem. What we can do instead is fight bad information with good information.

Consider the baseless claim that the coronavirus vaccines could cause female infertility.

"It's crazy how pervasive and how common this myth is," Eve Feinberg, an OB/GYN and former president of the Society for Reproductive Endocrinology and Infertility, told me. Feinberg noted that the infertility myth is particularly hard to debunk because

it's hard to disprove a negative — just because something scary hasn't yet happened, people reason, doesn't mean that it won't.

That can make it particularly hard to change minds. One way is to explain where myths like that originated. In this case, in December 2020, a British scientist who has made unfounded and controversial comments on the pandemic and the coronavirus vaccines petitioned Europe's medicine regulatory agency claiming that the spike protein of the coronavirus — the part targeted by the vaccine — was disturbingly similar to syncytin-1, a protein that's part of the human placenta. Since the placenta is crucial in pregnancy, it was alleged, vaccination would cause women to produce antibodies that not only fight the virus but also cause miscarriage and infertility.

The contention has no basis in science or reality. Paul Offit, a pediatrician and director of the Vaccine Education Center at the Children's Hospital of Pennsylvania, explained in an op-ed that while the spike protein and syncytin-1 may share some amino acid sequences, they are other-

wise very different. "To say that these two proteins are disturbingly similar would be the equivalent of saying that two people share the same social security number because both contain the number six," Offit wrote.

But anti-vaccine activists have seized upon the false claim, and by January a survey by the Kaiser Family Foundation found that 13% of unvaccinated people believe or are unsure that "COVID-19 vaccines have been shown to cause infertility." By April, 42% of younger adults 18 to 29 had heard this. Reports abound of misinformation campaigns spreading the claim.

The assertion is simply untrue. In fact, "getting covid is what causes harm, including preterm birth, stillbirth, being very sick during pregnancy, and, in some cases, even the mom dying," said D'Angela Pitts, an obstetrician from the Henry Ford Health System. "The vaccine helps to protect against that."

Pitts told me that she explains to her patients that women have become pregnant during the vaccine clinical trials, and that vaccines have been proved safe in pregnancy. The

U.S. Centers for Disease Control and Prevention has tracked more than 35,000 pregnant women who received coronavirus vaccines, and there was no increase in miscarriage or adverse outcomes for these women or their babies.

Pitts, who specializes in maternal and fetal medicine, also advises patients who are trying to become pregnant. She explains to them that she is a millennial woman who doesn't have children yet, but wants them one day. Getting inoculated is important for women planning to conceive, because "you want to do everything you can to be healthy. The vaccine will build up your immune system to protect you and your future baby." As an African American doctor, she tells her patients that she understands the distrust some may have in medical institutions, and she explains why she had no concerns about getting vaccinated herself.

Feinberg uses this personal approach, too. She tells patients and concerned parents at her children's school that her 15-year-old and twin 12-year-olds are vaccinated and that she is "not one bit worried" about the

infertility claim.

This, to me, is the critical point. We need to meet our patients where they are, and be clear about why we can speak so confidently about the vaccines. No, doctors cannot definitively say that there will never be long-term consequences from a coronavirus vaccine, but we can underscore that there is no scientific reason to fear it either, given our decades of experience with myriad other immunizations.

While any long-term risk from vaccination is purely hypothetical, the risk from COVID-19 is very real and present. With the rise of more contagious variants such as delta, those unvaccinated will be increasingly faced with two choices: get vaccinated or contract a disease that has already killed more than 600,000 Americans and caused lasting health consequences for many more.

In the end, the argument is overwhelming. We just have to keep making it.

■ Leana S. Wen is a visiting professor at George Washington University Milken Institute School of Public Health. Previously, she served as Baltimore's health commissioner.