

## OUR VIEW

# Drug Nation

With the presidential nominating race on the Democratic side (hopefully) coming to an end, perhaps the prevailing candidates will finally focus on the issues concerning the American people. Serious, honest debate needs to take place on a myriad of topics, and the subject of healthcare should be at the top of the list.

Until universal healthcare—a system that offers not only full coverage but is affordable—becomes a reality, we must deal with prescription drug prices so high that millions of Americans are unable to purchase the medicines that could fortify health and/or help them live happier, more productive lives.

According to the U.S. Federation of Public Interest Research Groups, a nonprofit interest group, more than 46 million Americans are uninsured and “must either pay full price or go without needed medications.” This is a shame. Politicians shoulder much of the blame for allowing pharmaceutical companies to set the agenda on medical care. “Pharmaceutical companies make the medicines that enable us to live healthier, longer lives,” according to U.S. PIRG. “Their business practices also drive up drug prices and increase the risk of harmful side effects, and their strong-armed lobbying has blocked needed reforms.”

Recent headlines seem to indicate a sea change, at least among some, about prescription drug prices. Last month, Senate chambers in Massachusetts and Florida passed drug reform measures and legislation lowering healthcare costs, respectively. In Illinois, the House passed health insurance reform. Back in 2005, the Nevada Legislature passed a law authorizing the licensure of specific Canadian pharmacies to sell prescription drugs. This was a necessary step. But it's not the only recourse Nevadans have. For several years, The Medicine Cabinet, a patient advocacy program, has been providing affordable, brand name medications at free and reduced costs.

“With the soaring cost of medication, some people have to choose between buying their medication or basic necessities (i.e. food),” the program's website states. “We at The Medicine Cabinet strive to eliminate this disparity. We do not believe good health should be an option. It is your right. Having The Medicine Cabinet on your side means not worrying if you are going to have enough money to pay for the vital medication that can mean the difference between life and death.”

For \$25 a month, members can receive their medications free of charge. This includes more than 4,000 medications, even those used to treat HIV/AIDS. Qualifying for the program isn't stringent. Patients can't have prescription coverage, must meet poverty income level requirements, must take prescribed medications and be unable to afford them. The Medicine Cabinet has saved patients millions of dollars in the last five years. It's time more people gave The Medicine Cabinet a chance.

Sure, in-store pharmacies run by companies like Wal-Mart also offer lower-priced prescription drugs. But Wal-Mart critics contend that those pharmacies don't offer near the breadth of medications needed—some popular drugs are left out—and that the company's approach to healthcare renders the reduced drug costs mute.

“Wal-Mart refuses to address the serious ‘healthcare crisis’ in its own stores, as well as the billions of dollars in cost it passes onto American taxpayers. Over 775,000 hard-working families of Wal-Mart workers have no company healthcare, with nearly half (46 percent) of the children of Wal-Mart workers with no healthcare or on public assistance,” states a 2006 release from WakeupWalmart.com. “And, to add insult to injury, American taxpayers will spend an estimated \$9.1 billion over the next five years subsidizing Wal-Mart's healthcare costs.” Recently, Wal-Mart announced a \$4 drug program. Kroger followed suit. Target also has a program.

When big-box retailers start competing over prescription drug medications, it provides even more reason to give The Medicine Cabinet a chance. It's locally owned and operated and has your best interest, not corporate profits, at heart. To reach The Medicine Cabinet, call (702) 444-6082. The address is 5365 S. Eastern Ave., and the website is [www.themedicinecabinetonline.com](http://www.themedicinecabinetonline.com).



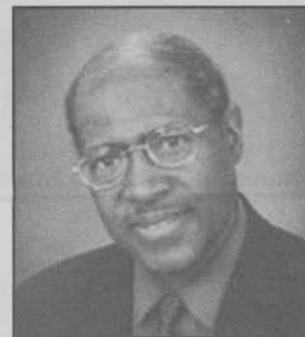
## What's Hillary Clinton want?

By Ron Walters  
Special to Sentinel-Voice

I remember that question, “What does Jesse Want?” asked of Rev. Jesse Jackson Sr. by the media when he had been defeated badly in the New York Primary in his 1984 campaign for the Democratic nomination for president. We had to sit down one day and decide that the nomination was out of hand, but it wasn't about the traditional meaning of winning, we had an opportunity to further empower our community, as I have previously suggested here.

Although Hillary Clinton cannot win given the current statistics that have Barack Obama leading by 700,000 popular votes, over 160 pledged delegates and now tied with superdelegates, which gives him the overall delegate lead. She is playing for time to get the best conditions under which to leave the race; a big question, however, is, under what conditions will she leave?

I think the debt issue is off the table. She does not need to negotiate for Obama to pay her campaign debt, since Bill has way more than enough money to do that. But, Democratic party leaders are hoping that she will get out of the race soon under conditions that favor the party winning in the fall campaign, which means that she does not beat up the presumptive nominee so badly that he limps into the elec-



RON WALTERS

tion. Yet, many people think that the “damaged goods” scenario which causes Obama to loose in the fall is what she wants because it would allow Hillary to campaign again for president in 2012.

But there is a giant wrinkle in this strategy. That is, if she damages the party candidate in an election that by every measure is poised to take the White House and expand its lead in the House and Senate, it will not endear the new party leaders to her 2012 candidacy.

Also, it will most certainly not endear Barack Obama to support her then and he will be a major party leader as a result of his run in 2008. Then, it will not endear many Blacks to support her if she causes their historic hope of gaining the first Black president of the United States to become another dream deferred.

I think her sights are still tied to winning in 2008. A hint of this may be the that she won in West Virginia and is favored to win in Kentucky

on May 20, which may send a message to the hold-out superdelegates that Barack Obama cannot win White working-class votes.

In a recent interview with *USA Today* Clinton said that she had a much broader base and that “Sen. Obama's support among working-class, hard-working Americans, White Americans, is weakening again, and Whites in both (North Carolina and Indiana) are supporting me.” This reference to “hard-working White people,” was created by conservatives in the 1980s as a euphemism for Whites, a term which conveyed that they were not lazy, welfare cheating Blacks. This was another racial jibe used by the candidate, which raised eyebrows because of the attempt to further “blacken” Obama.

Frustrated at losing, all the Clinton campaign has left is the argument she and her surrogates are making that the

Democratic party needs blue-collar Whites, the so-called “Reagan Democrats.” Furthermore, they are touting polls that say if she doesn't win, Whites, especially White females, will stay home.

Well, a recent Gallup poll, found that John Kerry's numbers are the same as Obama's with working-class voters, and he came within 3 percentage points of winning the 2004 election. The study goes on to say that Obama will win the same states as Kerry and that his appeal to red state voters may be the difference in attracting a few more states.

In fact, in this context where working-class voters are the most devastated segment of the electorate, they are unlikely to go as a group to John McCain, but are instead likely to split. Some will indeed go to McCain, some will hold their noses  
(See Walters, Page 9)

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