doing all that we can to reduce the number of children who have adverse reactions. We must work aggressively to understand why some children suffer adverse reactions so that we may develop precautionary measures to reduce adverse reactions. I will continue to pursue this effort with the Centers for Disease Control (CDC) and the National Institutes of Health (NIH).

I was pleased when a Democrat controlled Congress and Republican President Reagan worked together in bipartisan fashion in 1986 to establish the VICP. VICP was established to ensure that our nation continues to have a strong vaccination program while compensating those families when a child suffers a serious adverse reaction to a vaccine. Back in the mid-1980s there was a real concern that due to lawsuits brought against vaccine manufacturers, some manufacturers would stop making their vaccines available leaving the American public without important vaccines.

The Vaccine Injured Children’s Compensation Act of 2001 (VICCA) would make a number of substantive and administrative changes to the VICP, in an attempt to restore the program so that it fulfills the promises that were intended. A broad coalition of Members of Congress from across the political spectrum has joined together to address these concerns.

The bill clarifies that this program is to be a remedial, compensation program, which is consistent with the original intent expressed by Congress in the House Report accompanying the National Childhood Vaccine Injury Act of 1986. Today, the program is too litigious and adversarial. VICCA makes changes regarding burden of proof. Currently, the burden of proof is such that some children may not be receiving compensation that is due them. I believe we should bend over backwards to ensure that every child who was injured receive compensation. The intent of the program was to provide compensation for all claimants whose injuries may very well have been caused by the vaccine. The program needs to fully recognize that strict scientific proof is not always available. Serious side effects of vaccines are rare and as such, it is often difficult to prove causal relationships with the certainty that science and medicine often expect. Indeed there may be multiple factors that lead to an adverse reaction in some children and the program should recognize this. VICCA ensures that this is taken into account and it ensures that when the weight of the evidence is balanced, we err on the side of the injured child.

Our bill will also make it easier to ensure that the costs associated with setting up a trust for the compensation award are a permitted use of the funds. This is important in ensuring that these funds are available to provide a lifetime of care for the injured child. The bill also stops the practice of discounting to ensure that the value of an award for pain and suffering is fully met.

We also recognize the important need for counseling in helping parents and siblings of a profoundly injured child cope with these new challenges of care for the injured child. The bill also ensures the payment of interim fees and costs to claimants attorneys. Under the current program, families and attorneys are often forced to bear these expenses for years while a claim is heard. Attorneys for the claimants are going to be paid for their fees and costs at the end of a claim, regardless of whether or not they prevail. Thus there is no logical reason why they should not be allowed to petition for interim fees and costs. This provision simply ensures a more fair process for the claimants, by ensuring that the injured child can have good representation while pursuing his or her claim. It ensures that they are able to put their best case forward. The current practice hinders the ability of many claimants to put their best case forward. This should not be the case in a program that was established to ensure provisions for children who have been injured.

Finally, the bill makes a number of changes to statutes of limitation. The program should serve the purpose of compensating those who were harmed. Thus, it is important to ensure that there is as inclusive as possible to ensure that injured children are compensated and fully cared for.

THE COMMUNITY SOLUTIONS ACT

HON. J.C. WATTS, JR.
OF OKLAHOMA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 29, 2001

Mr. WATTS of Oklahoma. Mr. Speaker, I am proud to introduce, along with my good friend and colleague, TONY HALL, the Community Solutions Act of 2001, legislation that will strengthen our ability to serve the poor and the homeless, the addicted and the hungry, the unemployed, victims of violence, and all those that we are called on to reach out to, both as public servants and as individual citizens.

The Community Solutions Act is a comprehensive approach that will enhance the power of communities and individuals to solve the difficult problems that grow from poverty and destitution in our wealthy nation.

Our Nation is blessed with tens of thousands of devoted people who work with the poor on a daily basis, in the neighborhoods, on the street corners, in the shelters and in the soup kitchens, shirtsleeves rolled up, literally extending a helping hand to those who have lost hope. These are the people who touch the poor.

They operate thousands of centers throughout the country that provide services to the underprivileged. In many neighborhoods these centers are centers of hope and often the only source of hope in an otherwise desolate landscape.

Through our legislation we invite these courageous and selfless men and women to help us as a society to find those in need and deliver to them needed services. Those services include hunger relief, drug counseling, protection from violence, housing and other assistance to help them become fully invested in their rights as Americans.

For too long we have excluded these individuals from helping us help others. In the effort to wipe out poverty and hopelessness, we need all the soldiers we can muster.

In addition to increasing our outreach to the poor by increasing the number of hands that are reaching out, the Community Solutions Act provides a number of tax incentives to encourage Americans in their generous giving to these causes.

A charitable deduction for taxpayers who do not itemize seems not only good public policy but also a matter of simple fairness for more moderate income Americans who use the standard deduction but contribute to charities and receive no tax relief for doing so. This initiative will give them equal standing with wealthier contributors. We also allow tax-free contributions to charity from IRAs, and we expand the charitable deduction for food products.

Finally, we provide the opportunity for personal empowerment for the poor through the establishment of Individual Development Accounts or IDAs. One of the great challenges in the escape from poverty is how to build assets and capital to start a business, to buy a home or to pay tuition, and how to manage money. The IDAs we set up will provide eligible individuals a government match of up to $500 a year tax-free and will serve as a repository for other tax-free private giving. Recipients will be trained in the skills of money management and will learn how to invest for the future for themselves and for their families.

Last year we passed the Community Renewal and New Markets Initiative to reach out to impoverished communities in this land of plenty. The Community Solutions Act goes one more step, reaches out a little farther, to get government services to every one who needs them. With the help of these thousands of dedicated individuals, we can accomplish that goal.

HONORING REVEREND DR. THURMONT COLEMAN, SR.

HON. ANNE M. NORTHUP
OF KENTUCKY

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 29, 2001

Mrs. NORTHUP of Kentucky. Mr. Speaker, today I would like to recognize someone who has devoted his time and energy to his church and beliefs. Rev. Dr. Thurmond Coleman, Sr., pastored the First Baptist Church in Jeffersontown, Kentucky for 45 years. Upon his retirement he was named Pastor Emeritus. Dr. Coleman has served as the Moderator of the Central District Association for the past six years, and his tenure will end in July 2001. He is a community leader serving on the Louisville Urban League, NAACP, and Kentucky Human Rights Commission. Dr. Coleman is also a civil rights leader bringing about reconciliation between black and white Baptists and among all races and religions.

On Saturday, March 31, 2001, Dr. Coleman will be honored for his hard work and dedication as Moderator of the Central District Baptist Association, which has a membership of 147 churches.

Individuals such as Dr. Coleman play a vital role in reconciling the divisions in our community and in building the hope of a better future for each person. I am proud to bring your attention to Rev. Dr. Thurmond Coleman, and all of his achievements.