

This bipartisan effort directs the Bush administration to spend at least \$75 million on injection and blood safety programs in 12 African countries as part of the President's overall \$15 billion HIV/AIDS initiative. This funding is an important first step in addressing the issue of disease spread through unsafe medical practices in Africa, and I urge my colleagues who will be participating in the conference committee to preserve this important amendment.

Which brings me to the work of BD. In business for over a century, BD, is a global medical technology company that serves healthcare institutions, life science researchers, clinical laboratories, industry and the general public. BD manufactures and sells a broad range of medical supplies, devices, laboratory equipment and diagnostic products and employs over 25,000 people in 18 states and around the world.

BD has a long, distinguished history not only in the development of medical technologies but also in partnering with global and domestic health entities and governments to tackle some of the major public health issues of our time. An example: BD pioneered the development of sterilization technology for medical devices and provided the first mass-produced sterile disposable syringes—at cost—to Dr. Jonas Salk for his nationwide polio vaccination efforts in 1954.

BD is currently working with the WHO, UNICEF, the International Red Cross and other organizations to provide low-cost "auto-disable" needles and syringes that are specifically designed to combat the spread of HIV/AIDS and other infectious diseases by preventing reuse in the developing world.

BD has devoted years of dedicated effort and innovation to this issue, even though BD does not manufacture the vast majority of injection devices utilized in the developing world. Still, the company's commitment to this issue has manifested in many ways, including development of low-cost technologies specifically designed to address this developing world need, collaboration with international agencies in development of appropriate safe injection policies for mass immunization programs, and substantial philanthropic commitments in support of international vaccination efforts utilizing safe injection technology for deadly diseases such as maternal and neonatal tetanus and measles.

These commitments and investments occurred because BD believes their expertise and resources can have a very positive impact on these significant global health issues. In fact, their commitment to the global health arena is part of the company's overall mission: "Helping all people live healthy lives."

As a result of BD's efforts and the leadership of international agencies, U.S. government agencies and the work of some other medical equipment manufacturers of auto-disable syringes that prevent reuse are already in broad use for childhood immunization programs in Africa and some other developing countries.

Efforts were first focused on childhood immunization because these injections are generally administered simultaneously to large groups of children, increasing the potential for disease spread. And to date there has been significant progress. It is estimated that 75 percent of immunizations in Africa are administered safely with auto-disable devices. How-

ever, immunizations represent only approximately 10 percent of all injections given in Africa. The need exists to expand reuse prevention technologies to the larger number of injections given for therapeutic purposes.

To accomplish this, BD and other manufacturers are expanding the application of low-cost reuse prevention technologies to a broad array of injection devices. These devices are designed to physically disable after a single use, preventing spread of disease from reuse. And while effective technology is critical for success, it is not enough.

To get these devices into broad use, government and non-government agencies, international aid organizations, health ministries in developing countries, and manufacturers must collaborate to ensure that these reuse prevention devices are made broadly available in developing countries. Also, healthcare providers will need to be educated about the risks of injection device reuse, and trained on the proper use of reuse prevention technologies. This will require a larger investment compared with the successful effort to ensure safe immunization of children in Africa.

Injections administered in Africa and the developing world are often unsterile and may transmit infectious disease, due to either improper reuse of disposable syringes and needles designed for single use or to ineffective reesterilization of reusable glass syringes. World Health Organization (WHO) and U.S. Centers for Disease Control and Prevention (CDC) estimates indicate that approximately 40% of injections in the developing world are administered with reused, unsterile medical devices. In the year 2000 alone, WHO estimates that 500,000 new HIV/AIDS infections, 2 million new hepatitis C infections, and 21 million new hepatitis B infections resulted from improper reuse of injection devices.

The global HIV/AIDS disease burden is staggering, growing exponentially, and can no longer be ignored. Last year alone, 3.5 million people in Sub-Saharan Africa were infected with the disease. Since 1981, an estimated 20 million people worldwide have died from the disease—and another 42 million around the globe may already be infected.

The passage of the McConnell-Sessions-Leahy amendment and its preservation by the conference committee will give a tremendous boost to global efforts to further prevent the spread of HIV/AIDS in Africa and the rest of the developing world due to this unsafe medical practice. But make no mistake about it; the McConnell-Sessions-Leahy amendment is only a first step in a long journey toward resolving this issue. We need to remain steadfast in our support to improve Privileged and Confidential-DRAFT ReRelease] 113103 medical conditions in Africa, and committed to working with all of the necessary parties to ensure the outcome that we know is possible.

I am proud of BD's involvement and commitment to this issue, and I commend them for their efforts and leadership. To me it is a glowing example of what a good global corporate citizen can and should be.

HONORING THE CONFEDERATED TRIBES OF THE GRAND RONDE ON THE 20TH ANNIVERSARY OF THEIR RESTORATION TO FEDERAL RECOGNITION

**HON. DARLENE HOOLEY**

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

*Friday, November 21, 2003*

Ms. HOOLEY of Oregon. Mr. Speaker, I rise to commemorate the 20th anniversary this November 22 of the restoration to federal recognition of the Confederated Tribes of the Grand Ronde Community of Oregon.

Twenty years ago, on November 22, 1983, President Ronald Reagan signed into law the Grand Ronde Restoration Act, Public Law 98-165, bringing to fruition a long and determined effort by the elders and leaders of the Grand Ronde Tribes to reverse their thirty years of termination.

The vision and perseverance that marked the Grand Ronde's triumph over that very difficult termination period has continued to guide them since restoration.

Since restoration, the Tribe has grown strong and prospered. The sense of Tribal community, severely tested but not broken during termination, has flourished among a membership that, while looking to the future, actively embraces its culture, traditions, and long history. The Tribe's home lands, once reduced to their cemetery, are now thriving with housing for elders and other Tribal members, a Tribal community center, a beautiful and modern health clinic, and new governmental offices. In the near-by hills, the Tribe sustainably manages its 9,800 acre forested reservation, secured with further legislation in 1988.

In the two decades since restoration, the Grand Ronde Tribal government has pursued its full measure of responsibility, representing and providing for the Tribal membership, and directly administering the full range of federal services. A key element is the Tribal government's efforts to provide for the economic security of its members and its own self-reliance. In twenty years, the Tribe has become a primary economic engine in the area, moving from its timber base into a gaming and hotel facility and today into more broadly diversified endeavors that keep an eye toward the future.

And throughout all of this, the Grand Ronde Tribe has sought to work cooperatively with its neighbors. This is a hallmark of the Confederated Tribes of Grand Ronde. Despite the understandable temptations to walk their own path, they have consistently reached out to their neighbors, seeking to foster understanding and cooperation. There is no better example of this in the Spirit Mountain Community Fund. This fund has given over 22 million dollars to community organizations since its creation in 1997.

For the Confederated Tribes of Grand Ronde, it has been a remarkable twenty years of progress and fulfillment. As for all the restored tribes of Oregon, restoration is a defining moment in their long history, and on the November 22, 2003 twentieth anniversary of the restoration of the Confederated Tribes of the Grand Ronde Community of Oregon, I wish to commemorate and salute their achievement.