

The assistant legislative clerk proceeded to call the roll.

Mr. STEVENS. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

TRIBUTES TO RETIRING SENATORS

FRITZ HOLLINGS

Mr. STEVENS. Mr. President, I have served here long enough now that I have witnessed a lot of the comings and goings of many fine public servants whom I have known on the floor of the Senate.

Today, I would like to comment about those who are leaving us, and I want to start, first, with my good friend from South Carolina. FRITZ HOLLINGS and his wife Peatsy are very close friends of ours. They have been friends since we first came to the Senate. FRITZ and I served in World War II. We have traveled to places where he served and I served in World War II, and we are comrades in the deepest sense of that word.

He is a very interesting man. I remember earlier this year, when I was asked to cut a tape to be used at a retirement dinner for Senator HOLLINGS, I told my press secretary I did not think I could do it. As a matter of fact, I ended up appearing in person. As I told my staff, I really cannot conceive of the Senate without FRITZ HOLLINGS. It will be a different Senate. We have not always agreed, but we have always been friends.

There have been good times together. I can remember some of the fish that FRITZ and Peatsy caught in Alaska, and I can remember tales about some that they did not catch, the big ones that got away.

But I do know that having visited with them in their home in South Carolina, and visiting with their friends in Charleston, they have a really great life to go home to. They are wonderful people, and we are going to miss them a great deal.

I will say this, that when I first heard of Senator HOLLINGS, it was in a story about his role as Governor of South Carolina. He had become Governor, and as he entered the grounds of the Governor's house, he found there were places inside the grounds where prisoners were kept. There were literally, at that time, I think, cells that were partially underground. FRITZ did not like that any more than I would have, and he found ways to free those people and to give them another life. As a matter of fact, I remember meeting one of them who was very devoted to Senator HOLLINGS.

Senator HOLLINGS is a man with a great heart and a great mind and a great spirit and a temper almost as bad as mine. We are going to miss him, miss him terribly.

I hope he will come back often and visit us. I think he has the longest ca-

reer of all of those who are retiring, obviously, because he is the oldest. But he was one of the Ten Outstanding Men of the Year in the United States when he was young. I don't like to tell stories about him, but I think he actually attended a Republican Convention at one time.

As a member of the statehouse, as Governor, and as a member of the Hoover Commission, he distinguished himself in many ways, in commissions where he was appointed by both President Eisenhower and President Kennedy.

We are losing a man who has had a great role in public service. I hope we will all wish him well as he departs the Senate.

DON NICKLES

Mr. President, another Senator who is leaving us is Senator DON NICKLES. Senator NICKLES is a man I first met when I was traveling through Oklahoma with my friend, Senator Bellmon. Senator Bellmon had served here as a Senator. He served as Governor of his State.

Senator NICKLES, obviously, is a man of great capability, too. As a matter of fact, he is the first Oklahoma Republican Senator to be elected for four terms. He has had a commitment to his constituents and to his colleagues. He, as I, served as assistant Republican leader. That is the highest leadership position ever held by a Member of the Senate from Oklahoma.

I particularly remember his role as chairman of the Budget Committee and his role in the Finance Committee because no one has been more strenuous in expressing his views concerning the level of spending in the United States and the necessity to have firm budget control over the processes of the Senate, particularly the appropriations process where I have served a great many years.

I do believe his commitment to making Federal Government more responsible and less intrusive, his commitment to the basic Republican principles that government nearest the people is best, has been demonstrated by his service in the Senate. We are going to have a tough time without his guidance. He, I am sure, will be somewhere near us—at least that is indicated.

But having met him even before he ran for the Senate, I felt really a great warmth of friendship for him because I know how hard he worked to become a Member of the Senate, and I know his commitment, having left his business and coming here to make a new life.

Linda and their four children have been known to all of us in one way or the other. I think he has a wonderful family, a wonderful wife, and we wish them well.

Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The Senator from Alaska yields the floor and suggests the absence of a quorum.

The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. HARKIN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. HARKIN. Mr. President, parliamentary inquiry. I am going to give a speech on the floor regarding wellness and obesity. Is there a time constraint we are operating under now?

The PRESIDING OFFICER. There is a 10-minute time limit in effect now, but it has not been strictly enforced. The Senator may ask for more time.

WELLNESS AND OBESITY

Mr. HARKIN. Mr. President, as the 108th Congress comes to a close, many of us are looking back and asking whether we accomplished all that we might have. Now, of course, we are looking ahead to the next Congress for opportunities to move forward with some bipartisan agendas. What can we work on together to really do something good for our country?

The last year has been a challenging one. The campaign season always makes it a little more difficult to accomplish tasks that are already a challenge. It is not surprising, then, that many Members of this body look back on the 108th Congress with mixed feelings. I personally view it in which some important opportunities have been missed. But I also think some have been offset by what I detect as an emerging bipartisan concern and interest in some issues that have previously not received much attention.

In particular, I have been heartened by the degree of interest shown by my colleagues on both sides of the aisle on the issue related to obesity, health promotion and prevention of premature death and chronic disease.

This is very heartening that we see on both sides of the aisle strong interest in promoting wellness, in promoting disease prevention. As I have often said, we in America do not have a health care system; we have a sick care system. If you get sick, you get care, but there is precious little out there to keep you healthy in the first place. All the incentives are to patch you up, fix you, and mend you once you are ill. There are very few incentives to keep you healthy in the first place.

Now with all of the recent revelations on obesity and what that is doing to our society, more and more interest is being shown in what we can do as a Congress to change this paradigm, to change us from a sick care system to a truly health care wellness system in our country.

I am confident that in this area, we can make some historic progress, again, on a bipartisan basis in the new Congress that will convene in January.

I have been working for a long time in this area, but I am not the only one who appreciates the urgency of these issues. For example, the distinguished majority leader, Senator FRIST, has shown a keen interest in finding ways

to fight obesity, and he has taken some leadership positions on this, as has the Senator from New Mexico, Mr. BINGAMAN, who is my colleague on the Health, Education, Labor, and Pensions Committee. In fact, Senators FRIST and BINGAMAN teamed up to pass the Impact bill in the Senate and, if enacted, that bill will be a very positive step forward in the fight against obesity.

Our colleague from Indiana, Senator LUGAR, who has always been a well and very active and fit person himself as a devoted jogger, has also introduced a health promotion bill. It would establish the prevention of chronic disease as a major priority for the Federal Government. Our colleagues Senator WYDEN, Senator DODD, Senator CORNYN, and Senator KENNEDY have all been very active on the issues of wellness and obesity prevention.

My aim right now is not to provide an exhaustive list of Senators who are active in this area but to show there is a broad bipartisan interest in the Senate on wellness, health promotion, disease prevention, a health care paradigm.

We have made some progress this year, but given the scope of the obesity epidemic, given the spiraling cost of chronic disease, we need to act more robustly, more aggressively in the coming Congress. We currently spend in excess of \$1.8 trillion a year on health care in the United States. Fully 75 percent of that total is accounted for by chronic diseases, including heart disease, cancer, diabetes, and depression.

What these diseases all have in common is that in so many cases, they are preventable. In the United States, we fail to make an upfront investment in prevention. So what do we do? We spend hundreds of billions of dollars on treatment and disability, hospitalization that, in many cases, could have been avoided.

Again, as we look globally, we Americans take a great deal of pride in our system. We have the best hospitals. I also tend to think we have the best doctors. We certainly excel the rest of the world in biomedical research through the National Institutes of Health and disease prevention through the Centers for Disease Control and Prevention, which is the premier body in the world in terms of disease control. In fact, other countries look to our own CDC for guidance and direction in that area. If you want to get a heart transplant, a hip transplant, or a lung transplant, you come to America. Or if you want to get cancer treatment, you come to America. People come from all over. Kings, princes, heads of state, the wealthy, and the well-to-do all around the world come here to get treatment.

I would say if we are keeping a scorecard or report card in terms of treatment, we get an A. In terms of prevention and health care and keeping people healthy, I would say we are down

around a D minus, close to an F. This is what has to be changed.

We can take great pride in how we treat, cure, fix, mend, and replace parts. Those are great technological advancements. As I said, in so many of those cases, they are preventable, if only we will invest a little bit upfront.

The way we do things in this country is not only foolish, it is financially unsustainable. We cannot continue down the path on which we have been going for the last 30 to 50 years. We need this new paradigm in American health care, a prevention paradigm, a genuine health care system that concentrates, focuses resources on wellness and prevention.

Health care costs are out of control. Health insurance premiums are skyrocketing. More and more people in America are not covered with health insurance, and we have a raft of new studies documenting the obesity epidemic and consequences of our failure to emphasize wellness and prevention.

I have some charts. Caution: Public health crisis ahead. People a lot of times say, what business is it of the Government? Do we want a nanny Government to take care of everybody? No. Shouldn't people be in charge of their own wellness? Yes. But when it becomes a public health crisis, when it is not just me or you, but it is all of us, and when it means our tax dollars are going to take care of people with chronic diseases—75 percent of the costs of illnesses in America are due to chronic illnesses, most of which are preventable. So it is not just you smoking and not exercising and having a bad diet, it is the fact that you are going to consume health care dollars, and we are going to have to pay for it—all of us.

It is a public health care crisis. Two-thirds of Americans are overweight. Thirty percent of our kids are overweight. That is a public health care crisis.

I would like to cite several of the major caution signs that have flashed this year to remind us of the sense of urgency, and the reason I am taking the time on the Senate floor today, perhaps our last day of the year, is because it is urgent. As I said, I sense a willingness to work across the aisle, a bipartisan effort to do something about this. I remind people of the sense of urgency we have.

In March, a Centers for Disease Control and Prevention study determined that poor diet and lack of physical activity are now the second leading cause of death in the United States, leading to over 400,000 deaths annually. This study warned that poor nutrition and physical inactivity would soon overtake smoking as the leading preventable cause of death in America.

And by the way, if anyone had any lingering doubts about the dangers and destructive forces we are up against, yesterday, Hardee's, the fast food restaurant chain, unveiled its newest offering. And do you know what it is

called? The Monster Thickburger; just what we need—the Monster Thickburger.

This new product apparently is designed to make a Big Mac look like an hors d'oeuvre, a snack. The Monster Thickburger consists—are you ready for this?—of two one-third pound slabs of hamburger, four strips of bacon, three slices of American cheese, and mayonnaise, all served on a buttered sesame seed bun. Wow, can't wait to sink my teeth into that one. Well, this death-defying sandwich clocks in at 1,420 calories and contains a whopping 107 grams of fat.

Again, does anybody have any doubt on where we are headed? A couple of those every week, and one will be in our sick care system pretty soon, too.

Also in March, the Food and Drug Administration released its report called "Counting Calories," which offered a blueprint for confronting the obesity epidemic. Among other things, the FDA recommended increasing the amount of information available to consumers through food labeling. It called for enhanced Federal Trade Commission authority to police false or misleading product claims. It recommended that the Federal Trade Commission take steps to improve nutritional information available to consumers at restaurants, increase the information available to consumers through food labeling and nutritional information at restaurants.

Now, some restaurants do that. I have to admit. If one looks at the menu, it tells them how many grams of fat, how many grams of transfat, how many calories, carbohydrates, perhaps, salt, sodium. So one can be a little bit more informed about what they eat. We do that in the Senate servery. We can go through and see how many grams of fat is in everything.

I have been told by those who run our servery that since we started that about 3 months ago, one would be amazed at how many more people are picking up salads, how many more people are picking up the skinless chicken or turkey and things like that, taking skim milk instead of whole milk. It is information. But if one does not have the information, how do they know? So I am just saying that the Food and Drug Administration recommended increasing this information available to consumers.

In April, after years of careful analysis, the World Health Organization recognized the growing problem of obesity. They issued their global strategy on diet, physical activity, and health. It urged governments to review the role of food advertising and marketing, particularly with regard to children. It encouraged schools to implement policies that support children in adopting healthful diets and engaging in physical activity. The WHO report expressly stated that the role of government is crucial in achieving lasting change in public health.

Now, I will address this a little bit further. It urged governments to review the role of food advertising and marketing, particularly with regard to children. It encouraged schools to implement policies that support kids in healthful diets and physical activity. Eighty percent of elementary school kids in America today get less than 1 hour of physical activity a week.

Now I will bet that the occupant of the chair, the Senator from Missouri, and I, the Senator from Iowa, when we grew up, we had PE in small schools. I went to a two-room schoolhouse. We had 15 minutes of recess in the morning, we had 45 minutes at lunch, and we had 15 minutes in the afternoon. We had to go outside. The only time we did not have to go outside is when it was like 20 below. It had to be 20 below in the wintertime and then we could stay in, but other than that we had to get out and run around. And it was not competitive sports.

We have gotten off the track. If one is not involved in the high school football team, the basketball team, the soccer team, wrestling, whatever, swimming, they do not get anything. Every kid needs physical exercise and physical activity. We have seen some schools—there are some great schools out there—that ensure that every child, kids with disabilities, get physical exercise and physical activity, if not on a daily basis, two or three times a week. But we have now found elementary schools being built in America without even a playground, no indoor gym, no playground. So there is a role for government in ensuring that schools teach and have access to physical activity for kids.

So, again, the role of government in many ways is to support, not as a nanny but basically to set up systems so that people will be healthy starting early in life. We know what kids learn early is what they carry through, and with the obesity epidemic now among kids in America, with their lack of physical activity, it bodes ill for the future of our country.

We have also seen a number of new reports on the costs of obesity and chronic disease. One study by health economist Ken Thorpe in the *Journal of Health Affairs* determined that in the year 2000 we spent \$200 billion more on the treatment of disease and chronic conditions than we did just 13 years ago.

Five conditions accounted for one-third of the \$200 billion increase: heart disease, pulmonary conditions, mental disorders, cancer, and hypertension. All of them are preventable. Even more startling, some 27 percent of the rise in health care spending between 1987 and 2001 is attributed to the costs of treating obese patients. Twenty-seven percent of the rise is attributed just to treating obese patients. Five conditions, one-third of the \$200 billion increase, all of that preventable. Want to save money? Want to save the impact on our budgets? Want to help families

in terms of keeping their taxes down? This is the way to do it. We have to have better prevention.

Perhaps most compelling, we have also seen fresh evidence again that we are failing to teach our children about the importance of a healthy lifestyle. Perhaps most compelling of all is that the National Institute for Health Care Management Research and Educational Foundation found that only 16 percent of kindergarten programs meet the daily recommendations for physical activity by the Centers for Disease Control.

The Institute of Medicine of the National Academy of Sciences issued a major report just last month, October. The report was on preventing childhood obesity, a clarion call to action, urging a comprehensive national response to the childhood obesity epidemic where they focus on wellness and prevention. It sets forth the blueprint for a multifaceted national campaign against childhood obesity. This was just last month.

The Institute of Medicine of the National Academy of Sciences, the pre-eminent scientific medical body in this country, just last month, issued this warning.

So we need to act. We cannot twiddle our thumbs any longer. We cannot say, well, that is just the way things are. We cannot just say, well, it is free enterprise, and if someone wants to sell a monster thick burger and people want to eat it, let them. I am not saying Hardee's cannot put out a monster thick burger. They can do it. But I want to make sure that everyone who goes there and eats one of those has information to tell him or her how many calories, how many grams of fat, and what it means to them if they eat that. We need to start teaching our kids how to eat right. Experts are saying that this generation of kids growing up today, if we do not change rapidly, may be the first generation to live a shorter lifespan than their parents. Think about that. Our kids will have a shorter lifespan than what we have, the first time ever in history.

So we have had warnings from everywhere. The Centers for Disease Control, Health and Human Services, Food and Drug Administration, Federal Trade Commission, National Institutes of Health, National Academy of Sciences, Institute of Medicine, World Health Organization—on and on and on. Every single one of them urges that we use the power of the government to promote healthier lifestyles. Yet Congress has, thus far, failed to take any comprehensive action.

(Mrs. DOLE assumed the chair.)

Mr. HARKIN. The Institute of Medicine report on childhood obesity offers us a comprehensive approach to fighting obesity. It doesn't say that fighting obesity is the responsibility of government alone, or just one sector of society. It calls on all sectors of society to play a role in fighting obesity. In fact, the Institute of Medicine blueprint

bears striking similarities to the approach called for in a bill that I introduced earlier this year, the Healthy Lifestyles Prevention Act, known as the Help America Act of 2004.

As you can see from this report, the Institute of Medicine's recommendations mirror my bill in a number of ways. Over here is what the Institute of Medicine recommended to support nutrition and physical activity grant programs. That is in our bill. Nutrition labeling for restaurant foods, that is in our bill. The Federal Trade Commission should have authority to monitor food marketing—how it is marketed to kids. That is in our bill.

Let me digress for a moment on this marketing to kids. We now have counting books for kids who are just learning to count, 3 years old, 5-year-olds—a simple counting book, learning your 1-2-3-4s and 5s. Do you know what they are? They are called M&M counting books. You count by learning how many M&Ms there are.

I saw an Oreo cookie counting book. You count by how many Oreo cookies there are. So what happens? That will have little kids associate learning, associate getting better and progressing, with eating Oreo cookies or M&Ms, and thus begins a lifestyle and a habit pattern at a very early age. I found that hard to believe when I saw it, that these companies would actually go that far, to put in unhealthy food. I like an Oreo cookie as much as anyone else, don't get me wrong. You take them apart and eat the inside, you know how to do that. I love Oreo cookies. But let's be honest about it, it is maybe a little treat you have later on sometime, but to start getting kids in their counting books to count according to how many Oreo cookies there are, I am sorry, that sends the wrong message.

The Institute of Medicine recommended that community and child and youth-centered organizations promote healthful eating and physical activity. That is in our bill, too. Help get the YMCAs all over America focused on wellness, and I am happy to report the YMCA is in the forefront of this battle, and I am proud of them. They are in the forefront of this fight against childhood obesity and for wellness.

Improving streets and sidewalks to encourage walking and biking. Imagine the Institute of Medicine recommending that we build sidewalks.

There are housing developments being built in America today that don't even have a sidewalk. You want your kids to walk to school or to ride a bike? I happen to have a house out in rural Virginia. My wife and I have lived there for a number of years, since I have been privileged to serve in the Congress. So my kids, when they were growing up, went to a public high school in Fairfax County. It was a good school a mile from our house. A mile, that is a great walk for my kids to go to school, high school, but there is only one problem. There is no sidewalk, on a

busy street. I wouldn't even let them ride a bike down there. You are not going to ride a bike down that street. There are no sidewalks.

Again, every highway bill we pass here, every highway bill in which we take dollars out of the road use fund, the gas tax, and put it out to States for building highways and streets, ought to have provisions in it that you have to build sidewalks or you have to build walking paths. I am told in Europe today you cannot build a bridge unless it has a walking path, bike path, adjoining the bridge across the river or thoroughfare or wherever you build it. We ought to be doing that in America. If people want to ride bikes or walk, they can't get across the bridge. So that is in our bill, too.

Insurers should include screening and obesity preventive services in routine clinical practice. It is in our bill, but how many insurers do that? How many provide that you can go in and have screening, counseling, and you can have preventive services under your insurance premium, under your insurance program? I can count the number on two hands, probably—maybe one.

Schools should draw up nutritional standards for competitive foods in schools—competitive foods. I did see one school in Iowa this year in which they had set up their competitive foods. Competitive foods is a fancy name for snacks or vending machines, that kind of stuff. I saw one school in Iowa that took all that stuff out and only had healthful snacks, 100-percent juice drinks, granola bars, different kinds of fruits, things like that. That is the way we ought to be going.

Develop school policies to create schools that are advertising free—get advertising out of our schools. If you walk down the hallway, there is a big Pepsi machine, a big Coke machine. If you walk around the corner, there is your competitive foods, advertising all the candy bars and soft drinks and everything else. Why should we allow advertising in our public schools? I could never figure that one out.

Why don't we advertise here in the Senate? I have an idea, we will put up a sign: A Hardee's steakburger right here. Sell some wall space here. I'll bet it would be priceless. These cameras would pick it up every day. If we don't have advertising in the Capitol, why do we have it in the schools? Why do we bombard our kids every day with advertising for unhealthy habits?

I didn't mean to go through all of these. Those are some of them. But this is what the Institute of Medicine is saying that we ought to do.

I mentioned the bill I introduced, the Help America Act. I am going to reintroduce it next year. We spent many months working on this, on a comprehensive approach. You just can't address the obesity problem, the increase in chronic illnesses in America by just focusing on what we do or what you do in a school. It has to be comprehensive. It has to start from the earliest time of

our lives, in daycare centers, kindergarten, elementary schools. So it has to be home-based so we get more information to our families. It has to be school-based from kindergarten right on through high school and college. It has to be workplace-based so that people on their jobsites can have physical activity and wellness support. It has to be governmentally based so that we do not build housing developments without sidewalks or bridges without walking paths or bike paths; that we build more walking trails in our country.

It has to be Government based and making sure that we have Federal Trade Commission monitoring truth in advertising. It has to be community based. Communities have to pull together with their local YMCAs and others to have wellness programs for the entire community.

One of the great things popping up all over America today is mall-walking programs for the elderly, especially in my part of the country. In the wintertime, it is hard for the elderly to get out and malls have set up walking programs where elderly people will meet. They can walk and they have distance markers. They go around the mall, half a mile, three-quarters, 1 mile. They have a little place where they can stop and have water or coffee or tea or whatever they want. You would be amazed at how many of our elderly are now doing these mall-walking programs. By the way, it is not bad for the mall either. Sometimes they stop and shop, too.

These are the kinds of things we have to do on a community basis, workplace basis, a community basis to help promote a healthier lifestyle in America.

I could go on and on about the Institute of Medicine, what they recommended. The point is, we do have an authoritative blueprint for action. We have a bill that reflects that blueprint. The bill we introduced earlier this year, we will introduce again next year.

So the ball is really now in our court. I intend to reintroduce the HELP America Act in the 109th Congress.

We need a serious, ambitious probusiness, bipartisan effort to build on the steps we took this year. There is no question in my mind that the HELP America Act is a bill whose time has come to tackle some of the biggest health challenges of our day, in particular the obesity epidemic.

We have had report after report and warning after warning on the national level. But we have responded in only an incremental and piecemeal fashion. It is as though we were in the midst of a five-alarm fire but we stubbornly keep the hook and ladder engine in the firehouse relying instead on the garden hose to fight the fire. This is unacceptable.

When we reconvene in January, we need to come together on a bipartisan basis to address the obesity epidemic, to stress wellness and prevention in all aspects of our society. My goal is that

the new 109th Congress will be remembered as the Congress that replaced America's sick care system with a genuine health care system.

I yield the floor.

The PRESIDING OFFICER. The Senator from Missouri.

THE EMMETT TILL CASE

Mr. TALENT. Madam President, I rise today to talk briefly about a resolution Senator SCHUMER and I have co-sponsored in the Senate which we introduced yesterday. It is about the Till case.

I want to summarize for you the Emmett Till case. I don't normally read things on the Senate floor, but, in reviewing the notes from our office for the press conference that we had the other day, I really could not find a better statement for the background of this case than the notes. So I am going to read just a couple of paragraphs.

It is a story that I will preface by saying it has to shame every American. It is a hard story to listen to—a story from a time that thankfully was a very different time in this country but a story that has reached across the 50 years since it happened and is calling for action now.

In August 1955, Emmett Till, a 14-year-old African American was visiting family in Money, MS, from Chicago and allegedly whistled at Carolyn Bryant, a white woman. On August 28, Roy Bryant, Carolyn's husband, and his half brother, J.W. Milam, kidnapped Emmett from his uncle, Moses Wright's, home. They beat him, dragged him to banks of the Tallahatchie River and shot him in the head. Bryant and Milam then fastened a large metal cotton ginning fan and dumped his body into the river. Three days later, Emmett's body was pulled from the river and returned to his mother, Mamie Till, in Chicago. Mamie Till made a very courageous decision at that point. She decided to leave his casket open for 4 days to show the public what had happened to her son.

Tens of thousands of people paid their respects in person and the press published photos of Emmett's mutilated corpse around the world. In September 1955, Roy Bryant and J.W. Milam stood trial for Till's murder in Mississippi. An all white, male jury acquitted both men, after several women and African Americans were barred from serving on the jury; they reached their verdict after only 67 minutes of deliberation. Emmett's uncle Moses Wright, and another resident of the town, Willie Reed, both testified in court. As a result they were forced to flee to Chicago because their lives were in danger following their testimony. Worldwide, there was tremendous outrage at the murder and subsequent acquittal. In November, Wright and Reed returned to Mississippi and testified before a grand jury investigating the pending kidnapping charges against Bryant and Milam. But the grand jury refused to indict those men.