

from new and advanced technology allowing for greater public accommodation at places of business and in commercial establishments, to state and local government services and activities, to transportation and telecommunications technology for disabled Americans. Look around today—people with disabilities are participating to a far greater extent in their communities and are living fuller, more productive lives as students, workers, family members, and neighbors. They are dining out; cheering at football games and other sporting events, often even playing sports themselves; going to the movies; participating in state, local, and Federal Government; and raising families of their own.

It is evident that that the capability of this community far outshines the challenges of a disability. I am proud that the ADA has been particularly instrumental in removing many of the barriers that would otherwise impede the ability and success of the disability community. Take the example of Casey Martin, the professional golfer from Oregon with a rare disability that substantially limits one's ability to walk. Casey had long dreamed of playing in a PGA tour, but, because of his disability, Casey encountered a huge barrier. In these tournaments in which Casey wanted to play, the tour would not allow the use of a golf cart. When a Federal trial court in Oregon found that the PGA tour is a "public accommodation" and should modify their policy of no golf carts to accommodate Casey's disability, his vision became a reality. According to Casey, "Without the ADA I never would have been able to pursue my dream of playing golf professionally."

While for Casey Martin the ADA has meant achieving his most far-reaching goal, for other disabled Americans, the ADA has simply allowed them to live each new day with a little more ease and comfort. To name just a few areas in which the ADA has facilitated progress—access to restaurants and public restrooms, modifications to the aisles and entrances of supermarkets, assistive listening systems at places like Disney World and many theaters for the deaf and hard of hearing, and large print financial statements for those with vision impairments. Mr. President, these are the kind of simplicities in life that those without disabilities expect and take for granted, and because of the ADA, they have now come to be a part of the disability community's life too.

Just as the barriers that continue to face each of us in life take many years to craft, they take many years to conquer. Together, we must find the strength and the courage to pick our battles. I commend the disability community today on their passion and their vigilance, and I celebrate with

you on this 10th anniversary of the Americans with Disabilities Act for all that this day has brought to your community, and for all that it will continue to bring in the years ahead. Let today recommit each of us to the ADA for all Americans.

Mr. KENNEDY. Mr. President, 10 years ago today Congress passed landmark civil rights legislation, based on the fundamental principle that people should be measured by what they can do, not what they can't do. With the passage of the Americans with Disabilities Act, America began a new era of opportunity for the 47 million disabled citizens who had been denied full and fair participation in society.

We continue to build in Congress on the bipartisan achievements of the ADA. I'm gratified by President Clinton's strong endorsement today of the Grassley-Kennedy Family Opportunity Act now pending in Congress. The goal of our legislation is to remove as many of the remaining barriers as possible that prevent families raising children with disabilities and special health needs from leading full and productive lives. No family in this country should ever be put in a position of having to choose between a job and the healthcare their disabled child needs. The Family Opportunity Act ensures that no family raising a child with special needs would be left out and left behind.

For generations, people with disabilities were viewed as citizens in need of charity. Through ignorance, the nation accepted discrimination and succumbed to fear and prejudice. The passage of the ADA finally moved the nation to shed these condescending and suffocating attitudes—and widen the doors of opportunity for people with disabilities.

Today we see many signs of the progress that mean so much in our ongoing efforts to see that persons with disabilities are included—the ramps beside the stairs, the sidewalks with curbs to accommodate wheelchairs, the lifts for helping disabled people board buses.

Whether they are family members, friend, neighbors, or co-workers, persons with disabilities are no longer second class citizens. They are demonstrating their abilities and making real contributions in schools, in the workplace, and in the community. People with disabilities are no longer left out and left behind—and because of that, America is a stronger, better and fairer country today.

As the Americans with Disabilities Act, and the many disabled persons who worked so long and hard and well for its passage continue to remind us, equal opportunity under the law is not a privilege, but a fundamental birthright of every American.

INFECTIOUS DISEASE SURVEILLANCE

Mr. LEAHY. Mr. President, I want to briefly discuss a GAO report that was released earlier this week to be sure that other Senators are aware of.

The report, entitled "Global Health: Framework for Infectious Disease Surveillance," was commissioned by Senator MCCONNELL and myself, and Senators FRIST and FEINGOLD. It investigates the existing global system, or network, of infectious disease surveillance, and will be followed by a second report which analyzes the strengths and weaknesses of this network and make recommendations for strengthening it.

We requested this report in response to a growing concern among public health officials about the inability of many countries to identify and track infectious diseases and respond promptly and effectively to disease outbreaks. In fact, the World Health Assembly determined in 1995 that the existing surveillance networks could not be considered adequate.

By way of background, the term "surveillance" covers four types of activities: detecting and reporting diseases; analyzing and confirming reports; responding to epidemics; and reassessing longer-term policies and programs. I will touch on these categories in a bit more detail, as they illustrate the need for reform.

In the detection and reporting phase, local health care providers diagnose diseases and then report the existence of pre-determined "notifiable" diseases to national or regional authorities. The accurate diagnosis of patients is obviously crucial, but it can be very difficult as many diseases share symptoms. It is even more difficult in developing countries, where public health professionals have less access to the newest information on diseases.

In the next stage of surveillance, disease patterns are analyzed and reported diseases are confirmed. This process occurs at a regional or national level, and usually involves lab work to confirm a doctor's diagnosis. From the resulting data, a response plan is devised. Officials must determine a number of other factors as well, such as the capability of a doctor to make an accurate diagnosis. Unfortunately, in many developing countries this process can take weeks, while the disease continues to spread.

When an epidemic is identified, various organizations must determine how to contain the disease, how to treat the infected persons, and how to inform the public about the problem without causing panic. Forty-nine percent of internationally significant epidemics occur in complex emergency situations, such as overcrowded refugee camps. Challenges in responding to epidemics are mainly logistical—getting the necessary treatment to those in need.

Finally, in assessing the longer-term health policies and programs, surveillance teams can provide information on disease patterns, health care priorities, and the allocation of resources. However, information from developing countries is often unreliable.

I want to emphasize two points. The first is that all the activities that I have just described are done by what WHO calls a "network of networks." There is, in fact, no global system for infectious disease surveillance. Let me repeat, for anyone who thinks there is some centrally-managed, well-organized global system, there is not. Rather, what exists is a loose network, a patch-work quilt of sorts, involving the UN, non-governmental organizations, national health facilities, military laboratories, and many other organizations, all of which depend upon each other for information, but with no standardized procedures.

The second point is that in countries where a tropical climate fosters many infectious diseases, one also finds the least amount of reliable data. If we as a country, or we as a global community, are committed to eradicating the deadliest diseases, building the capacity for effective surveillance in the developing countries is where we need to focus our attention.

The sequel to this report is due to be released by the GAO in a few months. It will assess the strengths and weaknesses of this loosely-organized surveillance system, and make recommendations for strengthening it. We need to be able to accurately diagnose diseases, and quickly transmit the information to the global health community.

I urge other Senators to read this first report. This is an issue that has received far too little attention, and which directly affects the health of every American. Any disease, whether HIV/AIDS, malaria, TB, or others as yet unknown, which could infect and kill millions or tens of millions of people, is only an airplane flight away.

Accurate surveillance, which is the first step to an effective response, is critical. Yet today we are relying on a haphazard network of public, private, official, and unofficial components of varying degrees of reliability, patched together over time. It is a lot better than nothing, but the world needs a uniformly reliable, coordinated system with effective procedures that apply the highest standards. I look forward to GAO's next report, and its recommendations for action.

CAMPAIGN FINANCE REFORM

Mr. McCONNELL. As chairman of the Senate Rules Committee, which has jurisdiction over the campaign finance issue, and one who has been rather closely identified with the spirited debate in this arena over the past decade, I wholeheartedly support put-

ting S. 1816, the Hagel-Kerrey bill, on the Senate Calendar.

That is not to say I would vote "aye" were there a rollcall vote on the bill as it is currently drafted.

Senator HAGEL's legislation was the backdrop for a comprehensive series of hearings held by the Senate Rules Committee between March and May of this year. The final hearing featured the testimony of Senator HAGEL, Senator KERREY, Senator ABRAHAM, Senator HUTCHISON, and Senator LANDRIEU. An impressive, to say the least, bipartisan lineup of Senators bravely stepping into the breach separating those who persist in trotting out the old, blatantly unconstitutional campaign finance schemes of the past, from others like myself who firmly believe that the first amendment is America's greatest political reform and must not be sacrificed to appease a self-interested editorial board at the New York Times.

The Senator from Nebraska has taken what for the past couple of years has been the biggest bone of contention in the campaign finance fight in the Senate—party soft money—and essentially split the difference between the opposing camps. Rather than an unconstitutional and destructive provision to entirely prohibit non-federal activity by the national political parties, Senator HAGEL has crafted a middle ground in which the party so-called "soft" money contributions would be capped. Yet, even a cap raises serious constitutional questions and would surely be challenged were one to be enacted into law. Nevertheless, the Hagel-Kerrey approach is more defensible and practicable than outright prohibition.

Coupled with the party soft money cap in the Hagel-Kerrey bill is an ameliorative and common sense provision to update the hard-money side of the equation by simply adjusting the myriad hard money limits to reflect a quarter-century of inflation. An inflation adjustment of the hard money limits is twenty-five years overdue. Candidates, especially political outsiders who are challenging entrenched incumbents, are put at a huge disadvantage by hard money limits frozen in the 1970s.

The lower the hard money limits are, the more that insiders with large contributor lists are advantaged. Incumbents and celebrities who benefit from the outset of a race with high name recognition among the electorate also start way ahead of the unknown challenger. The greatest beneficiary of low hard money limits are the millionaire and billionaire candidates who do not have to raise a dime for their campaigns because they can mortgage the family mansion, cash out part of their stock portfolio and write a personal check for the entire cost of a campaign.

As hard money limits are eroded through inflation and non-wealthy can-

didates are further hampered, election outcomes are ever more likely to be determined by outside groups whose independent expenditures and issue advocacy are completely unlimited. That is "non-party soft money."

Mr. President, absent from the attacks on party soft money is any acknowledgement by reformers that the proliferation is linked to antiquated hard money limits which control how much the parties can take from individuals and PACs to pay for federal election activities. It stands to reason that hard money limits frozen in 1974 and thereby doomed to antiquity are going to spawn an explosion of activity on the soft money side of the party ledger.

It also is not coincidence that increased soft money activity in the past decade corresponded to vastly increased competition in the political arena. We are amidst the third fierce battle for control of the White House in the past decade. And every two years America has witnessed extremely spirited contests over control of the Congress. Democrats who had been exiled from the White House since Jimmy Carter's administration at long last got to spend some quality time at 1600 Pennsylvania Avenue and are not keen to give that up. Republicans, after four decades in the minority, got to savor the view from the Speaker's office in the House of Representatives and would like very much to keep it. And we have seen more than a little action on the Senate-side of the Capitol.

Reformers look upon all this activity over the past decade in abject horror, seeing only dollar signs and venal "special interests." I survey the same era and see an extraordinary period in which every election cycle featured a tremendous and beneficial national war of ideas over the best course for our nation to pursue in the coming years and which party could best lead America on that path.

All signs, Mr. President, of a competitive, healthy, and vibrant democracy.

While I strongly support the hard money adjustments in the Hagel-Kerrey bill, I remain concerned by the bill's silence in an area sorely in need of reform: Big Labor soft money. The siphoning off of compulsory dues from union members for political activity with which many of them do not agree is a form of tyranny which must not be permitted to continue. Senate Republicans have fought hard, and unsuccessfully, to protect union workers from this abuse. Democrats are understandably and predictably loathe to risk any diminution of Big Labor's contributions which may result from freeing the rank-and-file union members from forced support of Democratic candidates and causes, but the absence of reform in this area is unacceptable. Big Labor soft money and involuntary political contributions must be part of