

is going to have major adjustments. If our neighbors do so also, and Canada clearly is working rapidly to do so as we speak, because they are moving their antiterrorism and immigration packages in the next 2 weeks, we can make this.

The laws will be different but similar, with our neighbors devoting resources to their own airports and borders not adjacent to the U.S. For example, the southern border with Mexico and Central America, if we are sure about that border, then we do not have to be as careful on our border; or if the airports coming into Vancouver and Halifax have protections similar to ours, then we do not need to be as tight on the north border.

Furthermore, we need to work towards joint efforts with Canada and Mexico on our joint borders. For example with Canada, we can look for cooperation on truck sites. We can look for shared border crossings where we do not need as much. I believe we can accomplish this with both countries by working together.

#### ON WORLD AIDS DAY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. MILLENDER-McDONALD) is recognized for 5 minutes.

Ms. MILLENDER-McDONALD. Mr. Speaker, this Saturday, December 1, marks the commemoration of World AIDS Day. In my district, I will be holding a special event in support of this occasion.

As our distinguished minority leader, the gentleman from Missouri (Mr. GEPHARDT), stated at the World AIDS Day briefing held earlier today in the Capitol by the African Ambassadors Group and the International AIDS Trust, the issue of HIV/AIDS, he said, is the "moral issue of our time." It affects everyone and everything.

Mr. Speaker, we must leave no stone unturned to bring an end to this pandemic. We must find a way to create an endowment of funding to assist the war against the spread of this disease, both domestically and internationally.

We must increase and accelerate our financial support to the U.N. Secretary General's AIDS Trust Fund, and we must champion our own colleagues in their quest to craft a comprehensive approach to help alleviate the appalling suffering in Africa, as represented by the bill of my distinguished colleague, the gentlewoman from California (Ms. LEE), to establish a Marshall Plan for Africa.

Mr. Speaker, it is vitally important that we focus on ways and means to strengthen infrastructures and services that can help combat the impact of AIDS. HIV/AIDS, after all, is a multidimensional issue that has long-range development implications. It is not

just a matter of clinical treatment and curative measures. We must address the issues of poverty and debt relief, so that the poorest countries can apply more of their revenues to the basic human rights and human needs of their people.

We must help and encourage greater gender equity, so women and men can address their sexual dialogue on a more equal basis. We must achieve greater understanding of the cultural values and modes of behavior that undercut safe-sex practices that lead to the spread of this pernicious disease.

Finally, we must increase our financial support to develop activities and programs that can lay a more sustainable foundation for community empowerment and economic livelihood.

Only on this basis will communities around the world, through NGOs and public-private partnerships, be able to find the will to wage this war against AIDS. Our local event will bring together researchers, doctors, and other health professionals, as well as heads of foundations and pharmaceutical companies, together with community leaders to continue to raise support for combatting HIV/AIDS in the 37th district and in the region.

It is our hope that similar commemorative activities across America and around the world will highlight the leadership being brought to bear on this critical concern of our time. Just as we are building a powerful coalition to fight terrorism on a global scale, we can do no less when it comes to HIV/AIDS. Forty million people living with this dreadful disease is one too many.

#### COMMEMORATING WORLD AIDS DAY

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas (Ms. JACKSON-LEE) is recognized for 5 minutes.

Ms. JACKSON-LEE of Texas. Mr. Speaker, this week we will commemorate, celebrate, embrace, and share love on World AIDS Day, December 1, 2001. Today I had the pleasure and honor of being with the African Ambassadors Group and the International AIDS Trust to commemorate that for the House and Senate.

It is important that policy leaders stand up and be counted as we move forward to continue the fight against the devastation of HIV/AIDS worldwide.

Let me thank Sandy Thurman and, as well, all of the African ambassadors, and Ambassador Sheila Suzuli of South Africa, who gave very eloquent comments and remarks about the waging of the war in sub-Saharan Africa.

Let me also acknowledge my friends with the Names Project in Houston. I will join them tomorrow in celebrating and commemorating the loss of lives, and as well, the lives of those who are still living with AIDS.

As we do that tomorrow evening at the de Menil Museum, we do it together, embracing and noting the wonderment of the lives that are no longer with us but recommitting ourselves to fighting against the devastation of HIV/AIDS.

□ 1700

I say congratulations and my best wishes to the NAMES Project of Houston and all the other fighters in my community who are advocating against HIV/AIDS and working to provide prevention dollars and treatment dollars throughout the entire city, which includes of course the Donald Watkins Foundation.

September 11 will live forever in our hearts and minds as one of the most tragic and horrific acts of terrorism on our country. We have all joined forces to fight back against this terrible evil. Foreign countries have also responded and lent their support to help combat terrorism. It has proven that by joining together, any challenge can be overcome.

While we have focused our attention to addressing the immediate needs of the survivors and families who lost loved ones, increased security, and the economy, we must refocus our attention as well to the global pandemic that has claimed over 29 million lives. The same strategy we apply in our fight against this terrible, terrible dread of terrorism, we must continue the battle, however, in our fight to beat HIV/AIDS around the Nation. This is a global issue and everyone's problem, nationwide and worldwide.

The Global Health Alliance released a report yesterday, entitled "Pay Now or Pay More Later: An Independent Report on the Response to the Global HIV/AIDS Pandemic." Today, the African Ambassadors Group and International AIDS Trust sponsored a briefing on refocusing and reaffirming our commitment to AIDS. As we approach World AIDS Day on December 1, we must stand strong and continue to fight and raise awareness.

Forty million people around the world live with HIV/AIDS or will be living with it by the end of 2001, adults and children, 28 million of which live in sub-Saharan Africa alone.

Since the first HIV case 20 years ago, over 60 million persons have been infected, and over 20 million have already died from AIDS. The spread continues, especially in poor and developing countries.

In Africa, there are an estimated 11,000 new infections per day; and during 2001, 2.3 million Africans will die from HIV/AIDS. Only 10 percent of the world's population lives south of the Sahara, but the region is home to two-thirds of the world's HIV/AIDS. We must not tolerate such devastation, and it has suffered more than 80 percent of all AIDS deaths in sub-Saharan Africa.

I traveled to the South African region in 1999 and this year, and what I witnessed was unbelievable. First, I would like to commend the indomitable spirit of those who are fighting HIV/AIDS. The leadership, the government, the social agency, the NGOs, the people, they are all fighting unified together. It was a life-changing event to see and meet people infected by this deadly virus but also to meet those who were standing alongside of them, committed to defeat this deadly disease.

What affected me most was witnessing the thousands of orphan children whose parents had died from AIDS. Currently there are approximately 14 million children orphaned by HIV/AIDS, with a projection of 40 million children by 2010 if no action is taken. Every minute, an African child dies of AIDS. These orphans are more likely to be poor, deprived of education, abused or neglected.

Who cares for them when their parents die? HIV/AIDS also decimates the family support system, and when I went on one of my earlier trips to Africa, I saw a 4-year old who was left to be the only healthy individual in a family taking care of dying adults, dying from HIV/AIDS.

A teacher who works near the Chinakas and the Kasongos described how 15 of his 42 students have lost one or both of their parents. He sees thousands of children just sitting around, wanting to be left alone. He also noticed that some of these orphans come to school without shoes or without a sweater in the winter. Either their step-families put them last on the list, or their grandmothers could not scrape together enough money.

It is important to note the impact of HIV/AIDS in the United States. Non-Hispanic blacks represent 33 percent of reported AIDS cases in our Nation, and throughout 1994 more than 80,000 of 146,285 African Americans reported to have AIDS have died.

We must work together to fight AIDS worldwide around this country, because if we do not we will stand to lose the talent, the spirit of those who are infected. We must fight it around the world; otherwise we will lose as well. Cases in Hispanics, among women, African American and children, this is a challenge for us all.

As we look toward World AIDS Day on December 1, let me simply say that we must look toward it with a commitment that we will stand alongside of those battling that disease, and we will not let the funding diminish nor will our spirit diminish nor will our fortitude diminish this fight, and we will win.

Mr. Speaker, September 11 will live forever in our hearts and minds as one of the most tragic and horrific acts of terrorism on our country. We have all joined forces to fight back against the evil. Foreign countries have

also responded and lent their support to help combat terrorism. It is proven that by joining together, any challenge can be overcome.

While we have focused our attention to addressing the immediate needs of the survivors and families who lost loved ones, increased security, and the economy, we must refocus our attention to a global pandemic that has claimed over 29 million lives. The same strategy we apply in our fight against terrorism, we must also utilize in our fight to beat HIV/AIDS. This is a global issue and everyone's problem.

Just yesterday, the Global Health Alliance released a report entitled "Pay Now or Pay More Later: An Independent Report on the Response to the Global HIV/AIDS Pandemic". And today, the African Ambassadors Group and International AIDS Trust sponsored a briefing on Refocusing and Reaffirming our Commitment to AIDS". As we approach World AIDS Day on December 1, we must stand strong and continue to fight and raise awareness.

Forty million people around the world live with HIV/AIDS, twenty-eight million of which live in the Sub-Saharan African region alone.

Since the first HIV case 20 years ago, over 60 million persons have been infected, and over 20 million have already died from AIDS. The spread continues, especially in poorer countries.

In Africa, there are an estimated 11,000 new infections per day, and during 2001 approximately 2.3 million Africans will die from HIV/AIDS.

Only 10 percent of the world's population lives south of the Sahara, but the region is home to two-thirds of the world's HIV-positive people, and it has suffered more than 80 percent of all AIDS deaths.

I traveled to the South African region in 1999 and this year and what I witnessed was unbelievable. It was a life-changing event to see and meet with the people infected by this deadly virus. But what affected me the most was witnessing the thousands of orphaned children whose parents died from AIDS. Currently, there are approximately 14 million children orphaned by HIV/AIDS, with a projection of 40 million children by 2010 if no action is taken. Every minute an African child dies of AIDS.

These orphans are more likely to be poor, deprived of education, abused or neglected. Who cares for them when their parents die? HIV/AIDS also decimates the family support system.

A teacher who works near the Chinakas and the Kasongos described how 15 of his 42 students have lost one or both of their parents. He sees thousands of children just sitting around wanting to be left alone. He also noticed that some of these orphans come to school without shoes or without a sweater in the winter. Either their stepfamilies put them last on the list or their grandmothers couldn't scrape together enough money.

In the West, meanwhile, the HIV death rate has dropped steeply thanks to powerful drug cocktails that keep the disease from progressing. But that is not the case in African-American communities.

Non-Hispanic blacks represent 33 percent of reported AIDS cases in our Nation. Through December 1994, more than 80,000 of the

146,285 African-Americans reported to have AIDS have died.

While AIDS related deaths have begun to decline, there has been a dramatically greater decline among whites, 21 percent than among African-Americans 2 percent and Hispanics, 10 percent.

African-Americans and Hispanics have been disproportionately affected by the AIDS epidemic. Although 52 percent of reported AIDS cases occurred among African-Americans and Hispanics, these groups represent only 13 and 10 percent respectively of the total U.S. population.

Among women and children with AIDS, African-Americans and Hispanics have been especially affected, representing approximately 75 percent of reported cases among women and 80 percent among children.

In my District, reported AIDS cases in Blacks increased from 24 to 40 percent within the last 5 years. While reported AIDS cases in Whites decreased from 64 to 44 percent. From 1990 to 1998, the percentage of Blacks in Houston/Harris County diagnosed with AIDS increased from 27 to 53 percent.

The key to fighting this virus must involve a comprehensive approach that includes prevention, education, and support of a health care infrastructure. HIV prevention efforts must take into account not only the multiracial and multicultural nature of our society, but also other social and economic factors, such as poverty, underemployment, and poor access to the health care system, that impact health status and disproportionately affect African and Hispanic populations.

We, as Members of Congress, must continue to fight the struggle and persist in obtaining increased funding of the global AIDS response. This is one of the great challenges of our time and of this generation.

---

REMEMBERING THE LIVES OF  
REVEREND CHARLES H. SHYNE,  
JR., AND HIS WIFE, MRS.  
VERLENA PRUITT SHYNE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois (Mr. DAVIS) is recognized for 5 minutes.

Mr. DAVIS of Illinois. Mr. Speaker, there were 16,653 alcohol-related fatalities in the year 2000, 40 percent of the total traffic fatalities for that year. Driving under the influence of alcohol continues to be one of our major domestic problems and issues and we must continue to work towards finding lasting solutions to this major problem.

About a week ago, a driver under the influence of alcohol smashed out the lives of two of my community's most beloved citizens, Reverend Charles H. Shyne, Junior, and his wife of 54 years, Mrs. Verlena Pruitt Shyne. Reverend Shyne, at the time of his death, was serving as pastor of the Hamlet-Isom Christian Methodist Episcopal Church on West Division Street in Chicago. Mrs. Verlena Pruitt Shyne was a retired teacher who had worked for the Chicago public schools and other districts, who at the time of her death