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changes in the environment, improve seasonal drought predictions, and help to assess the impact of climate change. We can and we must work together to realize the promise of Kyoto.

A generation ago, our leaders began to realize this would become an issue we would all have to face. President Kennedy said, ''It is our task to hand undiminished to those who come after us the natural wealth and beauty which is ours.'' In other words, the natural wealth and beauty which is ours is not really ours. It belongs to the people who came before us, who live on in our memory, and to our children and grandchildren and their grandchildren which will come after.

In the United States, many of our Native American population say that they manage their own natural resources with seven generations in view. They think, in other words, about how today's decisions will affect their children seven generations down the line. We can at least think of our grandchildren. We have a serious responsibility to deal with poor people in a respectful way the world over because everyone deserves the right to try to advance his or her material condition so that all of our children can have decent lives and get decent education and build a decent future.

But we know from the scientific data available to us today that we can grow the economy at a rate that sustains both economic well-being and our natural resources. Indeed, we know that if we maximize the use of scientific technology and knowledge, we can grow the economy and even improve the condition of the natural environment.

That is our responsibility. It has come to our generation to make these decisions now so that future generations will enjoy all the wonderful technological advances of the 21st century. But first, we must act, and we must do it together.

Thank you very much.

NOTE: The President spoke at 2:45 p.m. at the Mokolodi Nature Preserve. In his remarks, he referred to the following Botswana Government officials: Minister of Commerce & Industry George Kgoroba; Vice President Festus Mogae; Minister of Foreign Affairs Mompati Merahfe; Permanent Secretary at the Department of Foreign Affairs Ernest Mpofu; Ambassador to the U.S. Archibald Mogwe; President Ketumile Masire; and former Defense Force Commander Ian Khama, currently Minister for Presidential Affairs and Public Administration. The President also referred to U.S. Ambassador Robert Krueger and his wife, Kathleen. A tape was not available for verification of the content of these remarks.

Statement on the Death of Bella Abzug

March 31, 1998

Hillary and I are deeply saddened to learn of the death of former Congresswoman Bella Abzug.

Bella Abzug was a great American and a true citizen of the world. Her conscience, intellect, and political acumen made an immeasurable contribution to our public life. She raised her passionate and tireless voice demanding the best for women, for all Americans, and indeed, for people all around the world. She will be sorely missed.

Our thoughts and prayers are with her family and friends.

Proclamation 7075—Cancer Control Month, 1998

March 31, 1998

By the President of the United States of America

A Proclamation

While cancer still casts a shadow over the lives of millions of Americans and their families, we can rightfully look back over the 1990s as the decade in which we measurably began to turn the tide against this deadly disease. From 1990 to 1995, the annual number of new cancer cases for every 100,000 Americans dropped slightly but continuously. Perhaps more important, the overall cancer death rate, which rose through the 1970s and 1980s, declined between 1991 and 1995, a trend that continues today and that we hope will be sustained into the next century. Thanks to years of dedicated, rigorous scientific study, people with cancer are now leading longer, healthier lives. More than eight million Americans living today have had cancer at some time, and these survivors are

a powerful reminder of the importance of maintaining our progress in cancer research, prevention, and control.

My Administration's new cancer initiative proposes an unprecedented $4.7 billion investment in cancer research through the National Institutes of Health (NIH) over the next 5 years. This significant increase in research funding has great potential to enhance early detection and diagnoses of cancer, to speed the discovery and development of new treatments, and to provide all cancer patients and their caregivers with improved access to the latest information about their disease. Part of these increased funds will go to NIH's Human Genome Project, which is helping to advance our knowledge in the promising field of cancer genetics. The National Cancer Institute's (NCI) recently unveiled Cancer Genome Anatomy Project website is connecting researchers to information on genetic factors that determine how a particular cancer behaves—how fast it grows, whether it will spread, and whether it will respond to treatment—as they work to develop new ways to prevent, diagnose, and treat cancer.

We are also continuing our aggressive cancer prevention efforts. The Centers for Disease Control and Prevention is entering the eighth year of its landmark National Breast and Cervical Cancer Early Detection program. This program brings critical breast and cervical cancer screening services to previously underserved women, including older women, uninsured or underinsured women, women with low incomes, and women of racial and ethnic minority groups. Medicare now provides coverage for annual mammography screening and for Pap tests, pelvic exams, and colorectal cancer screening. By January 2000, Medicare will also cover the costs of prostate cancer screening tests.

We are taking other important steps toward cancer control as well. The NCI and the Food and Drug Administration are working in partnership to ensure that potentially effective drugs are expedited through the development process so that new anticancer therapies can be made available more rapidly to the patients who need them. We are also proposing, as part of our new cancer initiative, that Medicare beneficiaries have the opportunity to participate in certain cancer clinical trials. This will allow patients to benefit from cutting-edge research and provide scientists with a larger pool of participants in their studies, helping to make the results more statistically meaningful and scientifically sound.

If we follow our present course—investing in research, translating research findings into medical practice, and increasing access to improved diagnostic and treatment programs—we can continue to make significant progress in our crusade against cancer. We must not slacken our efforts until we can fully control this devastating disease and ultimately eradicate it.

In 1938, the Congress of the United States passed a joint resolution requesting the President to issue an annual proclamation declaring April as ''Cancer Control Month.''

Now, Therefore, I, William J. Clinton, President of the United States of America, do hereby proclaim April 1998 as Cancer Control Month. I invite the Governors of the 50 States and the Commonwealth of Puerto Rico, the Mayor of the District of Columbia, and the appropriate officials of all other areas under the American flag to issue similar proclamations. I also call upon health care professionals, private industry, community groups, insurance companies, and all interested organizations and individuals to unite in reaffirming our Nation's continuing commitment to controlling cancer.

In Witness Whereof, I have hereunto set my hand this thirty-first day of March, in the year of our Lord nineteen hundred and ninety-eight, and of the Independence of the United States of America the two hundred and twenty-second.

William J. Clinton

[Filed with the Office of the Federal Register, 11:52 a.m., April 1, 1998]

NOTE: This proclamation was published in the *Federal Register* on April 2.

Letter to Congressional Leaders on the "Patients' Bill of Rights Act of 1998"

March 31, 1998

Dear _____:

I am writing to commend you on the Patients' Bill of Rights Act of 1998 that you are introducing today on behalf of the Democratic Caucuses of both Houses of Congress. This bill represents a critically important step towards enacting a long overdue "Patients' Bill of Rights" that Americans need to renew their confidence in the nation's rapidly changing health care system.

States across the nation have already begun to enact reasonable patient protections. In fact, 44 states, including 28 of the 32 states with Republican Governors, have passed at least one of the protections that my Advisory Commission on Consumer Protection and Quality recommended, and that I endorsed last year. However, a patchwork of non-comprehensive state laws cannot provide Americans with adequate patient protections, particularly because state health care laws do not have jurisdiction over more than 100 million Americans. Federal standards are essential to assure that all patients get the protections they need.

You have done a remarkable job bringing a broad-based coalition of Democrats together to move this important issue forward. I would particularly like to commend Senator Kennedy and Representative Dingell for their leadership in developing this legislation.

The Patients' Bill of Rights Act of 1998 includes important patient protections, such as the right to emergency care wherever and whenever a medical emergency arises; the right to talk freely with doctors and nurses about all the medical options available, not only the cheapest; and the right to an internal and external appeals process that allows patients to address their concerns and grievances. I am particularly pleased that it includes every protection recommended by the Advisory Commission. This bill also improves on other patients' rights legislation before the Congress because it does not include expensive protections for health care providers that have the potential to increase premiums excessively.

The bill you are introducing today provides a critical step towards developing bipartisan legislation that will pass the Congress. I look forward to working with the Congress to enact a "Patients' Bill of Rights" Act that I can sign into law this year.

I am confident that, working in a bipartisan fashion, the Congress will produce a bill that achieves the important balance of providing patients the protections they need without undermining health care affordability. We must ensure that whether they have traditional care or managed care, Americans have access to quality care. Thank you again for your strong leadership and commitment to this end.

Sincerely,

William J. Clinton

NOTE: Identical letters were sent to Senate Minority Leader Thomas A. Daschle and House Minority Leader Richard A. Gephardt. An original was not available for verification of the content of this letter.

Letter to Chairman Bud Shuster of the House Committee on Transportation and Infrastructure on Legislation Proposing a Uniform Standard Blood-Alcohol Level

March 31, 1998

Dear Mr. Chairman:

On March 28, 1998, I sent a letter to the Leadership addressing my concerns regarding H.R. 2400, the Building Efficient Surface Transportation and Equity Act of 1998. As the House prepares to consider this bill, it is my hope that the Lowey-Canady .08 provision be adopted.

As the crime rate continues to drop nationwide, we still lose an American to drunk driving every thirty minutes—every half hour a family is shattered and a child, parent or neighbor is lost forever. Setting a uniform limit for impaired driving at .08 blood alcohol content will help us crack down on the drunk driving epidemic and put a stop to these needless deaths. In addition, a uniform standard will still allow adults to drink responsibly.

This should not be a partisan issue, but rather an opportunity for the House to act