

for his friendship, support, and outstanding service as our Ambassador to Norway. With characteristic energy, he made impressive contributions to U.S.-Norway relations, something I saw firsthand when he persuaded me to make the

first-ever visit to Norway by a sitting U.S. President in November of 1999. I will miss him very much.

Hillary and I extend our condolences to his wife, Doreen, their children, and grandchildren.

## Statement on Signing the District of Columbia Appropriations Act, 2001 *November 22, 2000*

Today I am signing into law H.R. 5633, the "District of Columbia Appropriations Act, 2001."

I commend the House and Senate for passing a version of the District of Columbia appropriations bill that I can sign. I am pleased that the Majority and Minority were able to come together on this legislation under the leadership of Representative Eleanor Holmes Norton, the District's stalwart champion. While I continue to object to the riders in the enrolled bill, some of the most highly objectionable provisions that would have intruded upon D.C. citizens' right to make decisions about local matters have been deleted or modified from previous versions of the bill. This bill is a fair compromise.

I commend the Congress for providing virtually all of the Federal funds I requested for the District of Columbia. The bill includes essential funding for Courts, Corrections, and the Offender Supervision Agency, and for the tuition assistance program for District of Columbia residents. The bill fully funds the New York Avenue Metro station and provides a start on funding for brownfields remediation and economic development in Anacostia.

I continue to object to remaining riders that violate the principle of home rule, including, but not limited to, provisions infringing on voting rights, HIV/AIDS prevention, abortion, implementation of the Domestic Partners Act, special education, and the Mayor's personnel authorities.

The Act also includes troubling provisions with regard to needle exchange programs in the District. While I am pleased that it does not prohibit private entities from using their own funds for needle exchange programs, the Act does retain a ban on local funds for that purpose, an infringement of "home rule." Even more objectionable is the language that prohibits the exchange of needles in large portions of

the city. In the form in which it passed the House, this language would have had the practical effect of ending needle exchange programs in the District of Columbia. My Administration worked hard to remove this language from the final bill, and we appreciate the work of the conferees to make this provision less harmful and allow for those conducting needle exchange programs to adapt and continue operation. However, even though the language has been improved upon, these provisions are an encroachment on the District's prerogatives, create an unnecessary burden on the District, and could seriously disrupt current HIV prevention efforts.

The Act also prohibits the District from legislating with respect to controlled substances and from freely crafting effective programs for non-violent, drug-dependent offenders. This provision also significantly encroaches on the District's autonomy, and undermines its ability to deal effectively with this serious problem.

The people of the District of Columbia deserve the same respect in ordering their local affairs that the people of our States enjoy. These provisions must be re-examined in the future.

Today marks an important occasion for the District of Columbia. In 1995, the District faced a severe fiscal and managerial crisis, city services were in a shambles, and the city faced deficits as far as the eye could see. Today, thanks to the leadership of Mayor Anthony Williams, the District's finances are in order, city services are being restored, and the city stands on sound financial footing. Later this year, the District will be able to certify 4 straight years of balanced budgets, with growing surpluses, paving the way for cessation of the Financial Authority and a full return to Home Rule.

For our part, we have tried to be a sure and steady friend of the residents of the District of Columbia. In January 1996, I proposed a

plan to revitalize the District as the Nation's Capital, and to improve prospects for "home rule" to succeed. The plan was designed to relieve the District of Columbia government of major financial and managerial responsibilities that were beyond its capacity and that are commonly performed by States, rather than municipalities; to invest considerable resources to improve the city's criminal justice system and infrastructure; and to strengthen its economic base.

The National Capital Revitalization and Self-Government Improvement Act of 1997 significantly restructured the Federal-District of Columbia government relationship. The Act increased the Federal match rate for Medicaid from 50 to 70 percent; assumed certain state justice functions, including incarceration of adult felons, supervision of parolees, and financial oversight of the District's courts; relieved the city of \$5 billion of unfunded pension liabilities that the District had inherited from the Federal Government in the late 1970s; and provided tax relief to District of Columbia residents and businesses. Last year, my Administration persuaded the Congress to pass further changes to the Medicaid formula, saving the District \$9 million per year. The Revitalization Act implementation will save the District well over \$2 billion over the next 5 years.

In addition, I signed into law \$1.2 billion in Federal tax incentives over 5 years, including a wage credit to hire D.C. residents, additional small business deductions, tax exempt bond financing, a first time home buyer credit, and a zero capital gains rate. In addition to funding to implement the Revitalization Act, we have also obtained additional Federal appropriations for the District: \$239 million in FY '99, \$34

million in FY '00, and over \$55 million in FY '01. These appropriations have been used for critical economic development initiatives, including \$25 million to capitalize the National Capital Revitalization Corporation, \$25 million to fund a new Metro station at New York Avenue, and funding for key infrastructure projects, management reforms, education, and public safety. I also signed into law the College Access Act, providing \$17 million per year for D.C. high school students to attend out-of-state schools at in-state tuition rates.

Lastly, let me mention that since 1995, under the leadership of the Office of Management and Budget, Federal agencies on our D.C. Task Force have been involved in a range of activities designed to draw on the Federal Government's technical expertise and available Federal grants to improve the city's tax collection, education and training, housing, transportation, health care delivery, economic development, and other governmental functions. These activities are ongoing and touch upon virtually every aspect of District government.

I am proud of our support for the District, and even prouder of what the residents and government of the District have been able to accomplish. As the Congress concludes its business for the year, we look forward to working together to address other important issues affecting the District of Columbia.

WILLIAM J. CLINTON

The White House,  
November 22, 2000.

NOTE: H.R. 5633, approved November 22, was assigned Public Law No. 106-522.

## Statement on Signing the Minority Health and Health Disparities Research and Education Act of 2000

*November 22, 2000*

Today I am pleased to sign the "Health Care Fairness Act" into law. This legislation provides long overdue attention to the dramatic disparities in the incidence of disease and health care outcomes in minorities as compared to the overall population. It is unacceptable that African-American men have a higher overall cancer inci-

dence and infant mortality rates than any other racial or ethnic group; Hispanic and Native Americans suffer much greater rates of diabetes; and Asian-American and Pacific Islanders are afflicted with extraordinarily high levels of cancer of the liver.