

are sick—sick, sick. So you don't want that to ever happen again.

*Science and Technology Accomplishments*

*Mr. Sawyer.* Mr. President, we're talking about science and technology. And your administration is coming to a close. In years to come, looking back, how would you like the administration to be remembered in this area?

*The President.* First, I would like to be remembered for a serious commitment to pushing America forward and keeping us on the forefront of science and technology in two or three areas. We reorganized and revitalized the space program, kept it alive, and kept it moving. We had a very serious attempt to deal with the climate change in the development of alternative energy sources and conservation. We finished the sequencing of the human genome and began to work on its practical implications. We worked on—that's what the whole nanotechnology issue and all that. And fourthly, that we worked on information technology and tried to make sure

it was democratic—small “d”—with the Telecommunications Act, the E-rate, hooking the schools up to the Internet, so that—and finally, that we dealt with the scientific and technological implications of national security—biological warfare, chemical warfare, cyberterrorism—that we prepared America for those things.

I think that will be our legacy in this area.

*Mr. Sawyer.* Mr. President, thank you for talking to us.

*The President.* Thank you.

NOTE: The interview was taped at 3:30 p.m. in the Cabinet Room at the White House for later broadcast, and the transcript was released by the Office of the Press Secretary on December 11. In his remarks, the President referred to Prime Minister Jean Chretien of Canada; and Republican Presidential candidate Gov. George W. Bush and Vice Presidential candidate Dick Cheney. A tape was not available for verification of the content of this interview.

## Remarks on the Childhood Immunization Initiative and an Exchange With Reporters

*December 11, 2000*

*The President.* Thank you very much. And let me say, I took a lot of pride just listening to Mrs. Carter speak here. She seemed right at home.

When Hillary and I moved into the Arkansas Governor's mansion in 1979, Betty Bumpers began her lifelong campaign to wear me out about immunizations. [Laughter] And I reminded Rosalynn that it was in 1979 or 1980 that we actually did an immunization event in the backyard of the Arkansas Governor's mansion. I can't remember whether it was '79 or '80 now, but it was, anyway, a year or 2 ago.

So I can't thank these two women enough for what they have done. And I was marveling, when Mrs. Carter was going through all those issues, at just how well she knows and understands this issue. So I'm very grateful to both of them, because we wouldn't be here today if it weren't for them.

I also want to thank Secretary Shalala and Secretary Glickman and, in her absence, Hillary.

They have worked very hard on this for the last 8 years, and we have made some remarkable progress.

I want to recognize also Dr. Walter Ornstein of the CDC and Shirley Watkins of the Department of Agriculture, who will be very active in the steps that I'm going to announce today.

I think it's worth noting that we're meeting in the Roosevelt Room, which was named for our two Presidents and Eleanor Roosevelt. And Franklin Roosevelt spent almost half his life in a wheelchair as a result of polio. And I was part of the first generation of Americans to be immunized against polio.

And I remember, as a child, seeing other children in iron lungs. And I remember what an enormous elation it was for me and my classmates when we first got our polio vaccines, to think that that's one thing we didn't have to worry about anymore. It's hard for people now who weren't alive then and weren't part of it to even imagine what that meant to a whole

generation of children. But it was profoundly important.

We now know that vaccines save lives and agony. They also save money. They're a good investment. And we have done what we could, over the last 8 years, to make sure that our children get the best shot in life by getting their shots. And we have, as Rosalynn said, made progress.

In 1993 almost two out of five children under the age of 3 had not been fully vaccinated. And Secretary Shalala and Hillary and the rest of our team went to work with the Childhood Immunization Initiative to improve immunization services, make the vaccines safer and more affordable, and increase the immunization rates. We enacted the Vaccines for Children program to provide free vaccines to uninsured and underinsured children. And thanks to the work of people in this room and people like you all across America, these rates, as Mrs. Carter said, are at an all-time high. And the incidence of diseases such as measles, mumps, and rubella are at an all-time low.

In recent years, we've been able to say that for the first time in our Nation's history, 90 percent of our children have been immunized against serious childhood diseases. And just as important, vaccine levels are almost the same for preschool kids across racial and ethnic lines. So our children are safer and healthier.

But as has already been said today, there is still a lot to do. At least a million infants and toddlers are not fully immunized. Too many children continue to fall victim to diseases that a simple immunization could have prevented. Low-income children are far less likely to be immunized. In some urban areas, for example, immunization rates are 20 percent below the national average.

In Houston, just 63 percent of low-income kids are vaccinated. In Detroit and Newark, it's 66 percent. And we know areas with below-average immunization rates are at greater risk of potentially deadly outbreaks, such as what we saw with the measles epidemic in the early eighties—the late eighties. So today we are here to announce three new steps that we hope will build on the record and meet the outstanding challenges.

First, we have to go where the children are, as Mrs. Carter said. Over 45 percent of infants and toddlers nationwide are being served by the Women, Infants, and Children program. It's the

single largest point of access to health care for low-income preschool children who are at highest risk of low vaccination coverage. The immunization rates for children in WIC in some cases is 20 percent lower than the rates for other children. So WIC is clearly the place to start on the outstanding challenge.

Today I am directing WIC to conduct an immunization assessment of every child participating in the program, all 5 million of them. Each time a child comes in, their immunization status will be evaluated. Children who are behind schedule or who don't have records will be referred to a local health care provider. I am asking the CDC to provide WIC's staff with the information they need to conduct immunization assessments accurately and efficiently. We know this will work. WIC centers that have experimented with this type of approach have seen vaccination coverage increase by up to 40 percent in just one year.

Second, I am directing Secretary Shalala and Secretary Glickman to develop a national strategic plan to further improve immunization for children at risk—so they'll have something to do in this last 40 days. [Laughter] This would include steps to utilize new technology, share best practices, and examine how we can enlist other Federal programs serving children in the effort to improve immunization rates.

But it isn't a job just for Government alone. We need to work with other caring organizations to succeed. So third and finally, I'm announcing that the American Academy of Pediatrics is launching a new campaign to urge all 55,000 of its members to remind WIC-eligible parents to bring their immunization records with them when they visit WIC sites. I want to thank the members of the AAP for their initiative as well. We need to keep working until every child in every community is safe from vaccine-preventable disease.

Dr. Jonas Salk, the father of the polio vaccine, once said, "The greatest reward for doing is the opportunity to do more." We've done a lot together, and we have more to do. Thank you very much.

#### *Supreme Court*

Q. President Clinton, any comment on the Supreme Court today and what they might do?

The President. No, I think we ought to just wait and see what they do. One way or the

other, it will be an historic decision that we'll live with forever.

*Northern Ireland Peace Process*

Q. Mr. President, on Northern Ireland, you're going to be traveling to Britain and Ireland later this evening. Do you have any particular message for Sinn Fein on the issue of IRA disarmament?

*The President.* Well, I think I'll save my words for when I get to Ireland. But let me just observe what the state of play is here. We've had a peace now for a couple of years, overwhelmingly endorsed by the people of Northern Ireland, the people of the Irish Republic, the majority of both communities in Ireland. We've had a functioning government where people worked together across lines and did things that amazed one another in education and other areas.

No one wants to go back to the way it was. But there are differences about the implementation of the new police force and how that—and also about the schedule and method of putting the arms beyond use. And those are the two things that could still threaten the progress

that we're making. And if there's something I can do before I leave to make one more shot to resolve this, I will do it.

The main thing is, the people there are doing well. The Irish Republic has the highest growth rate, economic growth rate, in Europe now, and things are happening that were unimaginable just a few years ago. So I don't believe the people will let it slip back.

We have just got to get over—ironically, both issues, though they are related to one another, independently reflect kind of the lingering demons of the past, and we just have to get over there and try to purge a few more. And I hope I can make a contribution.

Thank you very much.

NOTE: The President spoke at 12:54 p.m. in the Roosevelt Room at the White House. In his remarks, he referred to former First Lady Rosalynn Carter and Betty Bumpers, wife of former Senator Dale Bumpers, cofounders, Every Child By Two; and Dr. Walter A. Ornstein, Director, National Immunization Program, Centers for Disease Control and Prevention.

## Memorandum on Improving Immunization Rates for Children at Risk

December 11, 2000

*Memorandum for the Secretary of Agriculture,  
the Secretary of Health and Human Services*

*Subject:* Improving Immunization Rates for Children at Risk

In 1992, less than 55 percent of children under the age of 3 nationwide had received the full course of vaccinations. This dangerously low level of childhood immunizations led me to launch, on April 12, 1993, the Childhood Immunization Initiative, which helped make vaccines affordable for families, eliminated barriers preventing children from being immunized by their primary care provider, and improved immunization outreach. As a result, childhood immunization rates have reached all-time highs, with 90 percent or more of America's toddlers receiving the most critical vaccines by age 2. Vaccination levels are nearly the same for pre-school children of all racial and ethnic groups,

narrowing a gap estimated to be as wide as 26 percentage points a generation ago.

Despite these impressive gains, immunization levels in many parts of the country are still too low. According to the Centers for Disease Control and Prevention, low-income children are less likely to be immunized than their counterparts. In fact, immunization rates in certain inner-city areas are as low as 65 percent, placing them at high risk for potentially deadly diseases such as diphtheria, pertussis, poliomyelitis, measles, mumps, and rubella. These diseases are associated with birth defects, paralysis, brain damage, hearing loss, and liver cancer. In addition, children who are not fully immunized are proven to be at increased risk for other preventable conditions, such as anemia and lead toxicity. Clearly, more needs to be done.

Today, I am directing you to focus your efforts to increase immunization levels among children at risk in a place where we clearly can