

Constabulary have been put forth. Cross border institutions have been established and are functioning.

They must abide by their obligations as well. Mr. President, Sinn Fein and the IRA must understand that if they do not, they will not have the support of the United States.

Today I am offering a resolution stressing the importance of decommissioning to the success of the peace in Northern Ireland and calling on the IRA to commit to the process and to offer a timetable as to when they will turn in their arms and explosives. And although the loyalist paramilitary organizations have significantly fewer weapons in their possession, they must fulfill their promise to disarm as well. The two main loyalist paramilitaries have stated that they will disarm when the IRA begins to do so. If the IRA moves on decommissioning, these organizations should respond immediately.

This is an historic moment in Northern Ireland—the best chance for peace in a quarter of a century. Let us not waste it. We must encourage those who are working for peace. But more importantly, we must make clear to those who want to destroy this opportunity by clinging to old and violent means, they can not succeed.

SENATE RESOLUTION 260—TO EXPRESS THE SENSE OF THE SENATE THAT THE FEDERAL INVESTMENT IN PROGRAMS THAT PROVIDE HEALTH CARE SERVICES TO UNINSURED AND LOW-INCOME INDIVIDUALS IN MEDICALLY UNDER SERVED AREAS BE INCREASED IN ORDER TO DOUBLE ACCESS TO CARE OVER THE NEXT 5 YEARS

Mr. BOND (for himself, Mr. HOLLINGS, Mr. COCHRAN, Mr. DASCHLE, Mr. HATCH, Mr. KENNEDY, Mr. HUTCHINSON, Mr. BREAUX, Mr. DEWINE, Mrs. LINCOLN, Mrs. MURRAY, and Mr. INOUE) submitted the following resolution; which was referred to the Committee on Appropriations:

S. RES. 260

Whereas the uninsured population in the United States continues to grow at over 100,000 individuals per month, and is estimated to reach over 53,000,000 people by 2007;

Whereas the growth in the uninsured population continues despite public and private efforts to increase health insurance coverage;

Whereas nearly 80 percent of the uninsured population are members of working families who cannot afford health insurance or cannot access employer-provided health insurance plans;

Whereas minority populations, rural residents, and single-parent families represent a disproportionate number of the uninsured population;

Whereas the problem of health care access for the uninsured population is compounded in many urban and rural communities by a lack of providers who are available to serve both insured and uninsured populations;

Whereas community, migrant, homeless, and public housing health centers have proven uniquely qualified to address the lack of

adequate health care services for uninsured populations, serving over 4,500,000 uninsured patients in 1999, including over 1,000,000 new uninsured patients who have sought care from such centers in the last 3 years;

Whereas health centers care for nearly 7,000,000 minorities, nearly 600,000 farmworkers, and more than 500,000 homeless individuals each year;

Whereas health centers provide cost-effective comprehensive primary and preventive care to uninsured individuals for less than \$1.00 per day, or \$350 annually, and help to reduce the inappropriate use of costly emergency rooms and inpatient hospital care;

Whereas current resources only allow health centers to serve 10 percent of the Nation's 44,000,000 uninsured individuals;

Whereas past investments to increase health center access have resulted in better health, an improved quality of life for all Americans, and a reduction in national health care expenditures; and

Whereas Congress can act now to increase access to health care services for uninsured and low-income people together with or in advance of health care coverage proposals by expanding the availability of services at community, migrant, homeless, and public housing health centers: Now, therefore, be it

Resolved,

SECTION 1. SHORT TITLE.

This resolution may be cited as the "Resolution to Expand Access to Community Health Centers (REACH Initiative)".

SEC. 2. SENSE OF THE SENATE.

It is the sense of the Senate that appropriations for consolidated health centers under section 330 of the Public Health Service Act (42 U.S.C. 254b) should be increased by 100 percent over the next 5 fiscal years in order to double the number of individuals who receive health care services at community, migrant, homeless, and public housing health centers.

Mr. BOND. Mr. President, I rise today to talk about the hot topic in the world of health care—health care access. Many people see this as the biggest problem in health care today.

Part of the problem, and the part that has received the most attention, is that too many Americans lack health insurance—about 44 million Americans aren't covered by any type of health plan. But an equally serious part of the problem is many people's simple inability to get access to a health care provider. Even if they have insurance, a young couple with a sick child is out of luck if they can't get in to see a pediatrician or another health care provider. And in too many urban and rural communities across the country, there just aren't enough doctors to go around.

Several plans have been proposed recently on how to deal with the health care access problem. Senator Bradley has a plan. The Vice President has one. There's also a bipartisan proposal for tax credits to help people buy health insurance. All of these plans have at least 3 things in common.

First, they all address a worthwhile goal. I think we all want to see that people have access to good health care, even if we might disagree on how to get there.

Second, they're all very ambitious. Senator Bradley in fact is basically proposing to use close to the entire \$1

trillion surplus to provide people with health insurance.

The third thing these plans have in common—and perhaps the most important thing—is that they probably have little chance of becoming law this year. Whether because of policy differences or political differences, it's just not likely that they will pass.

So today, we're launching a bipartisan effort—called the REACH Initiative—that does have a chance this year. There's no need to wait for an election—we can do it now.

Our proposal builds on the crucial work that organizations known as community health centers have been doing to ensure better access to health care. Health centers are private non-profit clinics that provide primary care and preventive health care services in medically underserved urban and rural communities across the country. Partially with the help of federal grants, health centers provide basic care for about 11 million people every year, 4 million of whom are uninsured.

The goal of the REACH Initiative is simple—to make sure more people have access to health care. We plan to achieve this by doubling federal funding for community health centers over a period of five years. We believe this will allow up to 10 million more women, children, and others in need to receive care at health centers. If we are successful with the REACH Initiative, we can practically double the number of uninsured and underinsured people that health centers care for.

The REACH Initiative basically recognizes the key contributions that community health centers have already made in addressing the health care access problems. But there is so much more that can still be done.

Now, out of all the ways we can address health care access problems, why are health centers a good solution and a worthwhile target for additional funding?

1. Health centers are an existing program that produces results. Too many health care proposals want to practically start from scratch, and make breathtakingly revolutionary changes. When I look at the health system and its admittedly huge problems, I sometimes think that might not be a bad idea. But it's also extremely risky. We need to remember that despite the many flaws in our health system, many people are pleased with it. We should be wary about making too radical changes that could interfere with what's right in our system. Instead, we can expand an existing part of the system that's been proven to provide cost-effective, high-quality care.

2. Health centers play a crucial role in health care, and are vastly underappreciated. It's amazing to me how few people are aware of the types of services community health centers provide, and just how prominent they are in health care. After all, health centers care for close to one out of every 20 Americans, one out of every 12 rural

residents, one out of every 6 low-income children, and one of every 5 babies born to low-income families.

3. Health centers truly target the health care access problem. By definition, health centers must be located in "medically underserved" communities—which simply means places where people have serious problems getting access to health care. So health centers attack the problem right at this source. Unlike other health care proposals, the REACH Initiative doesn't create problems of "crowding out" private insurance by replacing private dollars spent on health insurance with federal dollars.

4. Health centers are relatively cheap. Health centers can provide primary and preventive care for one person for less than \$1 dollar per day—about \$350 per year. Even better, health centers are able to leverage each grant dollar from the federal government into additional funding from other sources—meaning they can effectively turn one grant dollar into several dollars that can be used to address health care problems. With an extra billion dollars a year—the goal of the REACH Initiative in its fifth year—health centers could be caring for an additional 10 million people.

5. Expanding health center access would not be a government takeover of health care. New funding within the REACH Initiative. But this new funding would not go to create a huge new government bureaucracy. Instead, the REACH Initiative would invest additional funds in private organizations that have consistently proven themselves to be efficient, high-quality, and cost-effective health care providers.

To me, all of these reasons point to one logical conclusion—a need for drastically increased funding for health centers. Health centers are already helping millions of Americans get health care. But they can still help millions more—pregnant women, children, and anyone else who desperately needs care.

At the start of my remarks, I said that we were here to talk about and address the problem of health care access—but that's sort of a cold way to talk about it. So let me try again, but this time in human terms.

We're here to introduce the REACH Initiative to make sure that a young woman who has just found out she's pregnant—but who doesn't have health insurance—has a place to get prenatal care so she doesn't risk her health and her baby's health by waiting until late in the pregnancy.

We're here to introduce the REACH Initiative to make sure that a 6-year-old boy living in a heavily rural Missouri community—where there wouldn't otherwise be any health care providers at all—has a place to get regular checkups so he can stay healthy at home and in school.

We're here to make sure that a young couple without anywhere else to go has a place to get their infant daughter im-

munized to protect her from a variety of dreaded diseases.

These individuals, and millions more like them, are the reasons why we must make the goal of the REACH Initiative—doubled funding for community health centers—a reality.

SENATE RESOLUTION 261—EXPRESSING THE SENSE OF THE SENATE REGARDING THE DETENTION OF ANDREI BABITSKY BY THE GOVERNMENT OF THE RUSSIAN FEDERATION AND FREEDOM OF THE PRESS IN RUSSIA

Mr. HELMS (for himself, Mr. BIDEN, Mr. ROTH, Mr. LOTT, and Mr. DODD) submitted the following resolution; which was considered and agreed to:

S. RES. 261

Whereas Andrei Babitsky, a dedicated and professional journalist for Radio Free Europe/Radio Liberty (RFE/RL) for the last 10 years, reported on the 1994-1996 and the current Russo-Chechen wars;

Whereas on December 27, 1999, the Russian Information Committee (RIC) in Chechnya accused Babitsky of "conspiracy with Chechen rebels" after he broadcast a story that shed unfavorable light on Russian military actions in Chechnya;

Whereas on January 8, 2000, Russian security agents raided Babitsky's apartment in Moscow and confiscated several items and later ordered his wife, Ludmila Babitskaya, to report to a local militia station in Moscow after she attempted to pick up photographs taken by her husband in Chechnya;

Whereas on January 18, 2000, Babitsky was reportedly detained by Russian authorities in Moscow but later reports indicated that he was not formally arrested until January 27, 2000;

Whereas on January 26, 2000, Russian presidential spokesman Sergei Yastrzhembsky said that Babitsky "left Grozny and then disappeared" and declared that Russian security services had no idea as to his whereabouts and that "his security is not guaranteed";

Whereas on January 28, 2000, Russian media officials told RFE/RL that Babitsky would be released with apologies after having been charged with participating in "an illegal armed formation";

Whereas on February 2, 2000, Moscow officials announced that Babitsky would be transferred from Naursky district near Chechnya to Gudermes and then to Moscow where he would then be released on his own recognizance;

Whereas on February 3, 2000, Russian presidential spokesman Sergei Yastrzhembsky said that Russian officials exchanged Babitsky for 3 Russian prisoners of war and on the same day, Vladimir Ustinov, acting Russian prosecutor general, said Babitsky had been released and had gone over to the Chechens on his own accord;

Whereas the Government of the Russian Federation has repeatedly issued contradictory statements on the detention of Andrei Babitsky and provided neither a credible accounting of its detention of Babitsky nor any credible evidence of his well-being;

Whereas United Nations High Commissioner for Human Rights Mary Robinson stated on February 16 that Russian behavior in Chechnya and the detention of Andrei Babitsky appears to violate the Geneva conventions to which Russia is a signatory;

Whereas on February 16, 2000, Russian Human Rights Commissioner Oleg Mironov

denounced Moscow's handling of Babitsky as a violation of Russian law and international law and stated that the situation surrounding Babitsky signals "that the same thing may happen to every reporter";

Whereas the Union of Journalists in Russia declared on February 16 that the case of Andrei Babitsky is "not an isolated episode, but almost a turning point in the struggle for a press that serves society and not the authorities" and that "the threat to freedom of speech in Russia has for the first time in the last several years transformed into its open and regular suppression";

Whereas freedom of the press is both a central element of democracy as well as a catalyst for democratic reform;

Whereas the Government of the Russian Federation has repeatedly violated the principles of freedom of the press by subjecting journalists who question or oppose its policies to censorship, intimidation, harassment, incarceration, and violence; by restricting beyond internationally accepted limits their access to information; and by issuing misleading and false information; and

Whereas the Government of the Russian Federation has egregiously restricted the efforts of journalists to report on the indiscriminate brutality of Russia's use of force in Chechnya: Now, therefore, be it

Resolved, That it is the sense of the Senate that—

(1) the detention of Andrei Babitsky by the Government of the Russian Federation and the misinformation the Government of the Russian Federation has issued concerning this matter—

(A) constitute reprehensible treatment of a civilian in a conflict zone in violation of the Geneva Conventions and applicable protocols; and

(B) demonstrate the Government of the Russian Federation's intolerance toward a free and open press;

(2) the conduct of the Government of the Russian Federation leaves it responsible for the safety of Andrei Babitsky;

(3) the Government of the Russian Federation should take steps to secure the safe return of RFE/RL reporter Andrei Babitsky to his family;

(4) the Government of the Russian Federation should provide a full accounting of Mr. Babitsky's detention and the charges he may face; and

(5) the Russian authorities should immediately halt their harassment of journalists, foreign and domestic, who cover the war in Chechnya and any other event in the Russian Federation and should fully adhere to the Universal Declaration of Human Rights, which declares in Article 19 that "everyone has the right to freedom of opinion and expression; this right includes the freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media regardless of frontiers".

SENATE RESOLUTION 262—ENTITLED THE "PEACEFUL RESOLUTION OF THE CONFLICT IN CHECHNYA"

Mr. WELLSTONE submitted the following resolution; which was considered and agreed to:

S. RES. 262

Whereas the people of Chechnya are exercising the legitimate right of self-defense against the indiscriminate use of force by the Government of the Russian Federation;

Whereas the Government of the Russian Federation has used disproportionate force in the bombings of civilian targets Chechnya