

of people who do not—you ought to care about food security in this country.

How do you best provide food security in America? You do that by having a broad network of dispersed producers producing America's food. If you are concerned about bioterrorism harming America's food supply, you should be concerned about feedlots with 200,000 animals run by the big agrifactories. In contrast, widely dispersed family farms that dot the Nation and which represent the network of producers across the prairie, they are much less at risk, when it comes to bioterrorism.

If this country wants to do something for its economic future, for economic recovery, for food security, for national security, then it ought to decide it will stand up for family farmers and pass a decent farm bill.

Let me make a comment about the legislation that passed the House and the Senate Agriculture Committee. That legislation is not perfect. It is not what I would write were I to write it myself. However, it is better than the than Freedom to Farm. Each hurdle is a hurdle that we have to get past. We got past a hurdle yesterday by getting this out of the Senate Agriculture Committee. The next hurdle is to get it on the floor of the Senate.

I urge my Colleagues to bring this farm bill up as soon as we return from the Thanksgiving break. I hope to offer an amendment that will improve the safety net in this bill. I hope we pass this farm bill after some improvements on the floor. Then we can have a conference with the House, and then send the bill to the President.

We cannot fail in this job. We have a responsibility to pass a farm bill, and to do it now and do it right.

As I said, I know a lot of people have a lot of different interests. I come from a farm State. Yet I stand on the floor of the Senate and I say to people, I support Amtrak. I am a strong believer in Amtrak. Why? Because I think this country needs a rail passenger system. Amtrak comes to North Dakota, and it is important to us. But it is not the biggest issue in the world. To me, the national issue of having rail passenger service in this country is a very important issue. I support mass transit in the cities. We don't have mass transit in my home county. My home county has 3,000 people.

I support mass transit because, as a national matter, this country needs it. I hope my colleagues will understand as well that when I support those issues for the major urban centers of America, they will do themselves and this country a favor by supporting the rural interests which also contribute to America's security and which contribute to America's enterprise and economic health.

I thank the Senate Agriculture Committee, Senator HARKIN and others who led the way to get a bill out of that committee yesterday, and their staff who worked so hard to get this done.

Next week we will not be in session because of Thanksgiving. But the week following, it is the desire of Senator DASCHLE, myself and many others, including Senator HARKIN, that we will bring that bill to the floor of the Senate.

We very much want to put a farm bill on the President's desk and get that legislation signed. We want our farmers in this country to go into the fields next spring and plant next year's crops under a farm bill that has a better support level than the current bill, one that gives them the hope that if they do the right thing and things work well for them, they will be able to make a living on the family farm next year.

Mr. President, I see colleagues waiting to speak. I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon is recognized.

#### FLU VACCINES

Mr. WYDEN. Mr. President, I come to the floor to talk about a program for vaccinating Americans, particularly as the country heads towards the season when many have the flu.

This is an area I have a great interest in since my days as director of the Oregon Gray Panthers. Obviously, older people are particularly vulnerable. This year, certainly there is going to be considerable focus on the flu vaccination program.

Given the new threats of bioterrorism that have been widely discussed, certainly many are going to be particularly interested in getting the flu vaccination. It is important that we reevaluate how flu vaccinations are provided in light of the unfortunate, significant new health concerns of many Americans.

Certainly the threat of bioterrorism has increased demand for flu shots. In my view, it has caused considerable confusion. In recent days, my office has canvassed State health departments and many senior citizens programs around the Nation. We have found that while no shortage currently exists, there are delays and certainly a substantial amount of misinformation about the various programs and services that are available for older people. There have also been problems with one manufacturer that may be exacerbating delays in getting vaccine doses out to the public.

Even more important, my sense is there isn't yet a clear, understandable system in place for ensuring that high-risk Americans, particularly the Nation's older people, are vaccinated early and first.

My sense is that more needs to be done in addition to prioritizing the concerns of high-risk, vulnerable Americans to put in place a better distribution system for getting out vaccines. There needs to be a better plan to make sure that there are processes in place, if there are problems or snafus of one manufacturer. It is extremely important that there be a uniform mes-

sage coming from all health officials with respect to the flu vaccine program.

For example, while CDC and others have told Americans to get vaccinated later, others in the health system have urged Americans to get vaccinated quickly against the flu because of the anthrax threat.

Since anthrax has been in the news so much, it is logical for people to think they should get vaccinated immediately. But because people cannot get their shot the day they want it or the day a clinic is scheduled, some people may think there is an immediate shortage.

On the basis of the survey we have just done of the State health departments and many senior citizen centers, it does not appear there is a shortage with respect to the vaccine. But there are delays. There are instances where mixed messages have been sent by public health officials. This has certainly contributed to the confusion that exists.

Under the leadership of Senator BREAU, the Senate Aging Committee has been looking into this issue. At Senator BREAU's request—and let me also state the ranking minority member, Senator CRAIG, on the Aging Committee has been considerably interested in this in the past as well—our Aging Committee held a hearing that I chaired to look at the flu vaccine program.

We have worked with Secretary Thompson. I think he has made a number of steps that are constructive and have moved the program in the right direction, but certainly there is more to do.

For example, our survey found that in Indiana they received about 10 percent of the order the counties have placed, but it will have 50 to 100 percent of their order in 4 to 6 weeks. And, obviously, if shipments don't arrive on time, don't arrive in line with the plans that the programs and the senior citizen centers are putting out to their members, there is going to be a great deal of confusion.

So as we move to this crunch time for vaccinations, health officials in this country still cannot tell us if all the high-risk patients are being vaccinated, or if there are plans to vaccinate them. I think we need to develop a better system, for example, to track seniors who are in these programs. Many are signed up, and there are others who should be vaccinated early. This can be done if the public health system wants to do it.

So around the country there are concerns. I mentioned Indiana. In the State of Oregon, one large provider of public health clinics has received only about 40 percent of their order.

In Michigan, health officials are concerned that by the time they get the rest of the order they need in December, the public will not come. Doses may actually have to be dumped. So there are a variety of concerns about the flu vaccine program.

Mr. President, I ask unanimous consent that an article in yesterday's Washington Post be printed in the RECORD.

There being no objection, the article was ordered to be printed in the RECORD, as follows:

[From the Washington Post, Nov. 15, 2001]

#### LONGER LINES FOR FLU SHOTS

INCREASE ATTRIBUTED IN PART TO ANXIETY ABOUT ANTHRAX  
(By Leef Smith)

Regional health care providers are reporting a 20 to 30 percent increase in the number of people lining up at grocery stores and community clinics for flu shots, and attribute part of the surge to widespread anxiety about anthrax.

The early symptoms of inhalation anthrax—fever, cough and muscle pain—resemble those of the flu. As a result, doctors say, many people are getting vaccinated in hopes of staving off the flu and thus making anthrax easier to diagnose should it occur.

"We're seeing a lot of first-time flu shots," said Susan Randall, a registered nurse and clinical manager for Inova HealthSource, which is spearheading the Fight the Flu campaign in Northern Virginia and plans to administer 80,000 flu shots this season. The campaign plans to provide 50,000 shots in Maryland and the District. "If you ask people why they're getting the vaccination . . . some will say they're afraid of anthrax," she said.

But Randall said flu is serious enough on its own for people to consider being inoculated. "While it's tragic we've had four anthrax deaths, over 20,000 people die of the flu each year," she said. "People should take the flu seriously."

The federal Centers for Disease Control and Prevention has issued the same advice, noting on its Web site that numerous viruses cause flu-like symptoms. The site also discourages people from getting a flu shot simply to reduce concern about anthrax exposure.

"You should get a flu shot to avoid the flu, and the symptoms of the flu, not to avoid anthrax," said CDC spokesman Curtis Allen. "They're two different issues."

Flu seasons begins in November, with cases generally peaking in January and February.

Health care providers strive to vaccinate high-risk groups—people 65 and older, those with chronic medical conditions, medical workers and some pregnant women—by the end of October. But a delay this year in the delivery of flu vaccine from manufacturers—some of whom are upgrading their equipment to increase productivity—has hampered that effort.

CDC officials say there is more vaccine being manufactured this year than ever before—about 85 million doses—and insist that there will be enough to meet the rising demand.

A little more than half the supply was sent to distributors and health care organizations by the end of October, and another large batch is expected this month. The rest is due in December, although officials with the Food and Drug Administration, as well as the CDC, say the timetable could change.

Because of a supply delay, only about half of the 14,000 high-risk patients treated by Johns Hopkins Community Physicians, a coalition of 18 private medical practices, have received their vaccinations. The group had planned to vaccinate all of its at-risk patients by the end of October.

"We thought we were so smart," said physician Barbara Cook. "We put up posters telling people if you're 65 or older, come in and get your shots. We had to take them all

down because we ran out of vaccine almost immediately."

Likewise, the Fairfax County Health Department, which usually aims to begin its vaccination program for high-risk patients in early November, has received only 10 percent of the 5,800 doses of vaccine it ordered. While delays are not uncommon, officials said this year's has forced them to postpone many of their vaccination clinics.

"It would be our preference to immunize as early as possible, but without vaccine, we can't do that," said Rosalyn Foroobar, assistant director of patient care services for the Health Department. "Hopefully, we'll be able to provide [the shots] before the flu season really does hit. We'll get it. It's just late."

Even if everyone who wants a vaccination gets one, Randall of Inova HealthSource isn't sure that will be enough to prevent panic when flu season strikes in earnest.

"I think that underlying anxiety out there will cause people to wonder" about anthrax, she said. "Even if they've gotten a flu shot, I think our emergency rooms are going to be very, very busy."

Mr. WYDEN. Mr. President, I urge our colleagues to work with public health programs in their communities. I certainly intend to do that in Oregon, at home, during this high-risk season. I think it is possible to get clearer, more understandable messages out to the public about this program. I do think there needs to be a better system in place for making sure that high-risk persons, particularly older people, get these vaccines. I think we also need to take steps to make sure there are backup plans if there are problems with a manufacturer, both this winter and in the future.

Secretary Thompson has worked with us in a constructive way. Progress has been made. I certainly do not think there is a need for people to go out and panic. But I think there are steps that do still need to be taken so we do not have frustrated older people, health care providers, and others who want to take steps to protect their health and that of the American people.

Mr. President, with that, I yield the floor.

The PRESIDING OFFICER. The Senator from New Jersey.

#### VICTIMS OF TERRORISM RELIEF ACT OF 2001

Mr. TORRICELLI. Mr. President, I ask unanimous consent that the Finance Committee be discharged from further consideration of H.R. 2884, and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (H.R. 2884) to amend the Internal Revenue Code of 1986 to provide tax relief for victims of the terrorist attacks against the United States on September 11, 2001.

There being no objection, the Senate proceeded to consider the bill.

The PRESIDING OFFICER. The Senator from New Jersey.

Mr. TORRICELLI. Mr. President, as Members of the Senate proceed to

Thanksgiving Day celebrations with our families, there is little we can offer to the victims of September 11 but our prayers and our good hopes. But in this final act of the Senate, before we recess, perhaps there is something of this world we can do of some meaning for the children and the widows and the widowers who remain.

For these families, September 11 is the crisis that never ends. Even as the dead are buried and families reconstitute themselves, they are faced, every day, with the living reality of life without someone they loved—a father, a mother without a paycheck or savings or a financial future. They need our prayers. They need our support and our encouragement. But they also need our help.

I think H.R. 2884, as amended by the Senate Finance Committee, for this holiday, offers the hand of the American people to our neighbors. It very simply extends current American policy which waives Federal tax liability to the families of American soldiers or civilian employees of the U.S. Government who are killed in combat or in terrorist actions. This extension would now include American citizens whose family members were killed on September 11, 2001, in New York and Virginia.

First, liability for Federal income taxes will be waived for this year and last year. Any moneys previously paid will be refunded. This money is simply better used to pay mortgages and rents and to feed children than it is to be contributed, at this point, to the Federal Government.

Second, we are mindful that many people of moderate means were killed in the Pentagon and the World Trade Center who may not have paid Federal income taxes. They worked in the restaurants or they cleaned the buildings or they performed other valuable services. Their families may be in the most dire circumstances of all. They will no longer be liable for payroll taxes and will be refunded taxes previously paid.

Third, for those nonworking spouses and children who may have now been in a position to inherit the earnings of a father or a mother who is deceased, they, of course, receive that money knowing no more will be earned. Whatever money is inherited must carry them through a lifetime—to educate the children, house the family. There will be nothing else arriving. This legislation provides significant estate tax relief from all State estate taxes on assets of up to \$3 million and Federal estate taxes on assets of up to \$8.5 million.

Fourth, there are those who did not die on September 11 but whose physical wounds may be with them for a long time. Many are now eligible for disability benefits. Those benefits are theirs, all of them. No matter how long it takes for the scars to heal—the people to be able to walk or to see or to hear—the Federal Government should have no part of their disability funds. Taxes on them will be waived.