the Senator from Oklahoma (Mr. NICKLES), the Senator from Pennsylvania (Mr. SANTORUM), the Senator from Maine (Ms. SNOWE), the Senator from Mississippi (Mr. COCHRAN), the Senator from Connecticut (Mr. DODD), the Senator from Oklahoma (Mr. INHOFE), the Senator from Arizona (Mr. MCCAIN), the Senator from Alabama (Mr. SHELBY), and the Senator from Tennessee (Mr. THOMPSON) were added as cosponsors of S. Res. 247, supra.

At the request of Mrs. FEINSTEIN, her name was added as a cosponsor of S. Res. 247, supra.

S. RES. 255

At the request of Mrs. FEINSTEIN, the name of the Senator from Alabama (Mr. SESSIONS) was added as a cosponsor of S. Res. 255, a resolution to designate the week beginning May 5, 2002, as ''National Correctional Officers and Employees Week.''

S. CON. RES. 103

At the request of Mrs. CLINTON, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. Con. Res. 103, a concurrent resolution supporting the goals and ideals of National Better Hearing and Speech Month, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. LEAHY (for himself, Mr. CAMPBELL, Mrs. CLINTON, and Mr. SCHUMER):

S. 2431. A bill to amend the Omnibus Crime Control and Safe Streets Act of 1968 to ensure that chaplains killed in the line of duty receive public safety officer death benefits; to the Committee on the Judiciary.

Mr. LEAHY. Madam President, today I proudly join with Senators CAMPBELL, and CLINTON to introduce the Mychal Judge Police and Fire Chaplains Public Safety Officers' Benefit Act of 2002. I want to thank my colleagues for their leadership and strong support for public safety officers and their families. I also commend Representative NADLER and Representative MANZULLO for their leadership on the House version of this bill.

This bill aims to restructure the Public Safety Officers' Benefits Program to expressly include chaplains as members of the law enforcement and fire units in which they serve, and would make these chaplains eligible for the benefits available to public safety officers who have died or who have been permanently disabled as a result of injuries sustained in the line of duty. In addition, the Act would expand the list of those who may receive benefits in the event of a public safety officer's death in the line of duty by including as potential beneficiaries the persons named on the most recently executed life insurance policy of the deceased officer. In short, this legislation will ensure that the families of chaplains killed in the line of duty receive due payments through the Public Safety Officers' Benefits program.

On September 11, 2001, Father Mychal Judge, a chaplain with the New York City Fire Department, was killed by falling debris as he ministered to victims of the horrific terrorist attacks on the World Trade Center. He was survived solely by his two sisters.

Current law allows the Bureau of Justice Assistance to determine whether or not a public safety officer died as a direct or proximate cause of a personal injury sustained in the line of duty, and, if such criterion is met, directs the BJA to pay a monetary benefit of $250,000 to the surviving family members of the officer. In the case of Father Judge, the BJA correctly determined that he was eligible for payment of death benefits. However, Father Judge had no wife or children, and outlived his parents, and no benefits were paid to his life insurance beneficiaries, his sisters, as they were ineligible under existing law to qualify as his beneficiaries and receive death benefits. This case is not unique, of the approximately 450 public safety officers killed in the September 11 attacks, there are 10 individuals known to have died without spouses, children or parents, so the $250,000 death benefit will not be paid. This is simply wrong.

For the purpose of determining benefit eligibility, the U.S. Code limits ''public safety officers'' to law enforcement officers; firefighters; rescue crews; FEMA employees; and members of State, local, or tribal emergency management or civil defense agencies who perform official duties in cooperation with FEMA. While the language of existing law could be interpreted to include chaplains, the Mychal Judge Police and Fire Chaplains Public Safety Officers' Benefit Act would resolve any existing ambiguities. It specifically recognizes chaplains as public servants eligible for Public Safety Officers' Benefits so long as they serve as officially recognized or designated members of a legally organized volunteer fire or police department, or are officially recognized or designated public employees of a legally organized fire or police department, and was responding to a fire, rescue, or police emergency when injured or killed.

Additionally, this legislation would expand the list of those allowed to receive such benefits in the event of an officer's death in the line of duty. Current law restricts such beneficiaries to the spouse, child, or parent of the decedent. Our bill would expand this list, which would still give priority to spouses and children, but, in the event that neither survived the officer, would allow the monetary benefit to be paid to the individual designated by such officer as a beneficiary under the officer's most recently executed life insurance policy. In the event that there was no such individual named or that an individual so named did not survive the officer, the benefit would then be paid to the parents of the officer.

Before us we have yet another unique opportunity to provide much-needed relief for the survivors of the brave public servants who selflessly risk and sacrifice their own lives everyday so that others might live or be comforted. I look forward to continuing to work with my colleagues on legislation to support our nation's public safety officers who put their lives at risk every day to protect us, and I urge the Senate to pass this bill expeditiously.

By Mr. SMITH of New Hampshire:

S. 2432. A bill to prohibit the use of fiscal year 2003 Federal funds for support of the Palestinian Authority pending the cessation of terrorist activities by the Palestinian Authority; to the Committee on Foreign Relations.

Mr. SMITH of New Hampshire. Madam President, I rise today to offer a long-overdue bill for the purpose of defunding terrorism by Yasser Arafat and his supporters, by shutting off their flow of dollars from the U.S. Treasury.

It was the belief of the previous administration that Yasser Arafat and his Palestine Liberation Organization would live up to their renunciation of terrorism, and the newly-formed Palestinian Authority headed by Arafat and his PLO cronies could operate as a responsible governing body to further peace.

Instead, Arafat, the PLO and the PA have used the guise of their new-found political legitimacy, and agreement to the Tenet peace plan, to mask their real desires.

The reality of the situation is that the Palestinian Authority is joined at the hip with the PLO and other terrorist groups, such as Tanzim, the armed wing of Fatah, the largest faction of the PLO.

Tanzim is headed by a member of the PA's legislature, and is believed to have developed an alliance with Hamas and the Palestinian Islamic Jihad.

Our aid frees up other money the PA uses to pay for the bombs that are killing innocent men, women and children in Israel.

The chart was compiled by my staff from a published list of each such attack last year. That list is 25 pages long.

We dare not forget the level of terror visited upon Israel by Palestinian terrorists. The terror attacks in Israel in the year 2001 alone, from the first one on New Year's day, to the last one on December 12 are sobering: 79 separate incidents; 1220 injured; an additional 160 killed.

It has been reported that on March 2, 1973, Yasser Arafat ordered the execution of Cleo Noel, the American Ambassador to the Sudan. Arafat and his supporters have since been tied to countless acts of terror and murder. Therefore, it is beyond belief that our country to this day provides the Palestinian Authority and related entities more than $75 million dollars every year.

There have been foreign intelligence reports that Arafat has perhaps $10 billion stowed away, a small fortune. He doesn't ''need'' U.S. humanitarian aid.

It is flat out wrong to ask American taxpayers to support and subsidize the PA when Yasser Arafat and the PLO have made no attempt to use the resources at their disposal to provide the most basic of humanitarian aid and services to their people. The interest alone from Arafat's bank account could lift countless Palestinians out of squalid conditions.

Of course the opponents of my bill will argue that this is just ''humanitarian aid'' for Arafat-friendly NGO's, which begs the reality that those dollars free up Arafat's other money for him to then use to pay to manufacture bombs.

We now have the proof, in Arafat's own handwriting, that the Palestinian Authority is still paying the terrorist's bills.

Consider the proof, on the official letterhead of the Presidential Bureau of the Palestinian Authority, slash, Palestine Liberation Organization, bearing the signature of Yasser Arafat just 8 days after our country was attacked on 9–11, ordering $600 be paid from the treasury of the Palestinian Authority to each of three terrorists. Two of them are senior activists of the Fatah terrorist group, one of these, Ziad Da'as, is the head of the group behind a recent deadly terrorist attack on a Bat-mitzvah party in Israel. The Israeli Defense Ministry says they recently captured this document at Arafat's office in Ramallah.

There is still more proof: an order for Yasser Arafat to the Finance Ministry of the Palestinian Authority from January 7 of this year. It was faxed from Fatah on January 20. Here, Arafat orders the disbursement of $350 to each of the 12 named Fatah activists. According to the Israeli Defense Ministry, who captured this document at Arafat's headquarters in Ramallah, each of these 12 individuals are known terrorists, belonging to Fatah and or Tanzim. Arafat's approval is given in response to a request of Ra'ed Karmi, then the head of the Fatah and Tanzim terror groups, which perpetrated numerous murderous attacks on innocent Israeli civilians since September 2000.

As recently as April 7 of this year, Tim Russert on ''Meet the Press'' asked the Secretary of State to deny that Arafat is funding terrorism. Here is what Russert said:

''Israel says documents link Arafat and terrorism. They seized documents and made them public, which liked the office of Yasser Arafat with terrorist attacks carried out against Israeli civilians and other targets. One of the documents, said to be an invoice submitted by a leading Palestinian militant group to a Palestinian official.... Among other items, the invoice requested 20,000 Israeli Shekels, ($4,200 American), to buy electrical and chemical components for the production of a month's supply of 30 bombs. It's an invoice of terrorism, said Dori Gold, an advisor to Prime Minister Sharon. Mr. Secretary, do you believe the Palestinian Authority harbors or supports terrorism?

Do you know what our Secretary of State replied?

Did he deny the authenticity of this document? He did not.

Did he deny that Arafat paid the bill? He did not.

Did he deny that our taxpayer dollars are thus funding the killing of innocent men, women and children? He did not.

What he said was, ''It is a complex situation''.

There's nothing complex about it! Our tax dollars should never be used for terrorism. Period. End of discussion!

I don't care if Arafat has agreed to negotiate.

I don't care if Arafat has agreed to the Tenet plan.

I don't care that we need to keep contacts with the Palestinians, we can do that anyway without subsidizing, and therefore legitimating, their activity.

We should not be funding terrorism, and that is all there is to it

The United States should not continue a policy which has utterly failed to curb the violence on the part of these radical Islamic terrorist groups that Arafat and the PLO have sway over.

Furthermore, American taxpayers should not be fooled into footing a bill for ''humanitarian aid'' when Arafat and his regime have no desire in their hearts to co-exist peacefully with the State of Israel.

When our land was so brutally attacked last fall, the President set a new agenda. He said, ''From this day forward, any nation that continues to harbor or support terrorism will be regarded by the United States as a hostile regime.''

Well, my colleagues, that is what Mr. Arafat and his minions are: a hostile regime.

Even Secretary Powell, in that ''Meet the Press'' interview conceded as much. He said that the United States has never shrunk from the accusation that the Palestinian Authority supports and harbors terrorism.

So why then, why are we taking tens of millions of dollars every year out of our taxpayer's pockets and sending it to the P.A. where it can be used to free up other money to build bombs that suicidal maniacs strap on themselves to blow up a café, or a schoolbus?

The bill I am offering today will put an end to that. I say no more money should be sent to anyone that will use it in a way that frees up Arafat to pay his bomb-building bills.

I say no more money that goes to destabilizing the powderkeg in the Middle East.

I say no more money for Arafat's new intifada against Israel.

My colleagues, I strongly urge you to stand with me on the side of Israel and against terrorism and to support this bill.

I ask unanimous consent that the text of bill be printed in the RECORD.

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

S. 2432

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. PROHIBITION ON USE OF FISCAL YEAR 2003 FEDERAL FUNDS FOR SUPPORT OF PALESTINIAN AUTHORITY PENDING CESSATION OF TERRORIST ACTIVITIES BY PALESTINIAN AUTHORITY.

(a) CONTINGENT PROHIBITION ON AVAILABILITY OF FISCAL YEAR 2003 FUNDS.—Notwithstanding any other provision of law, no funds available to any department, agency, or other element of the Federal Government for fiscal year 2003 may be obligated or expended for the purpose, or in a manner which would have the effect, of supporting—

(1) the Palestinian Authority;

(2) any entity supported by the Palestinian Authority;

(3) any successor entity to the Palestinian Authority or an entity referred to in paragraph (2); or

(4) any private, voluntary organization for—

(A) projects related to the Palestinian Authority; or

(B) projects located in Palestine that would otherwise be undertaken by the Palestinian Authority or an entity referred to in paragraph (2) or (3).

(b) TERMINATION OF PROHIBITION.—The prohibition in subsection (a) shall cease to be effective upon the submittal by the President to Congress of a certification that neither the Palestinian Authority, nor any entity supported by the Palestinian Authority, has engaged in planning or carrying out any terrorist act during the six-month period ending on the date of the certification.

(c) SUPPORT.—For purposes of this section, support shall include direct and indirect support, whether such support is financial or otherwise, including support for the Holst Fund of the World Bank and the United Nations Relief and Works Agency.

By Mr. HUTCHINSON:

S. 2433. A bill to designate the facility of the United States Postal Service located at 1590 East Joyce Boulevard in Fayetteville, Arkansas, as the ''Clarence B. Craft Post Office Building''; to the Committee on Governmental Affairs.

Mr. HUTCHINSON. Madam President, I rise today to introduce legislation to designate a United States postal facility in Fayetteville, AK in honor of one of America's greatest heroes and fellow Arkansan, Clarence B. Craft. This bill would name the facility at 1590 East Joyce Boulevard as the ''Clarence B. Craft Post Office Building.'' Mr. Craft passed away on March 28, 2002, but left behind a legacy of kindness and courage. Prior to his passing he was one of only 148 living persons to be warded our Nation's highest award for actions above and beyond the call of duty, the Congressional Medal of Honor. Clarence Craft was an extremely humble person, and rarely talked about the accolades that made him a ''special man'' as he was described by those who knew him well. He spent the last twenty-five years of his life in northwest Arkansas giving selflessly of his time as a volunteer for

the Veterans' Affairs Medical Center in Fayetteville. He was a true and dedicated friend to the veterans, one who lifted their spirits with personal visits, often visiting every patient in the hospital.

Clarence Craft's actions on May 31, 1945, are truly deserving of this recognition. On the island of Okinawa, then-Private First Class Craft launched a one-man attack against the Japanese defense on Hen Hill. Opposed by forces heavily armed with rifles, machine guns, mortars and grenades, Clarence Craft killed at least 25 enemy soldiers. His heroic efforts were the key to the U.S. forces' penetration of a defense that had repelled repeated, heavy assaults by battalion-sized U.S. formations for twelve days, and resulted in the entire defensive line crumbling.

I enthusiastically encourage my colleagues on both sides of the aisle to support this bill in honoring Clarence B. Craft, an American hero.

I ask unanimous consent that the text of the legislation be printed in the RECORD.

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

S. 2433

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. CLARENCE B. CRAFT POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 1590 East Joyce Boulevard in Fayetteville, Arkansas, shall be known and designated as the ''Clarence B. Craft Post Office Building''.

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the Clarence B. Craft Post Office Building.

By Mr. SCHUMER (for himself and Mrs. CLINTON):

S. 2434. A bill to suspend temporarily the duty on Hydrated hydroxypropyl methylcellulose; to the Committee on Finance.

Mr. SCHUMER. Madam President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 2434

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. HYDRATED HYDROXYPROPYL METHYLCELLULOSE.

(a) IN GENERAL.—Subchapter II of chapter 99 of the Harmonized Tariff Schedule of the United States is amended by inserting in numerical sequence the following new heading:

''	9902.98.09	Hydrated hydroxypropyl methylcellulose; cellulose, 2-hydroxypropyl methyl ether; cellulose; hydroxylpropyl methyl ether (CAS No. 9004–65–3) (provided in subheading 3912.39.00)	Free	No change	No change	On or before 12/31/2005	''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) applies to goods entered, or withdrawn from warehouse for consumption, on or after the 15th day after the date of enactment of this Act.

By Mr. SARBANES (for himself, Mr. DODD, Mr. SCHUMER, Ms. STABENOW, Mr. CORZINE, Mr. KERRY, Mr. KENNEDY, Mr. DURBIN, Ms. MIKULSKI, Mrs. CLINTON, Mrs. BOXER, Mr. WELLSTONE, Mr. TORRICELLI, Mr. DAYTON, and Mr. LEVIN):

S. 2438. A bill to amend the Truth in Lending Act to protect consumers against predatory practices in connection with high cost mortgage transactions, to strengthen the civil remedies available to consumers under existing law, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

Mr. SARBANES. Madam President, earlier today, I had a press conference with a number of my colleagues, Senators SCHUMER, STABENOW, CORZINE, and CLINTON, as well as Mayor DeStefano of New Haven, CT, Mayor McCollum from Richmond, VA, Wade Henderson, Executive Director of the Leadership Conference on Civil Rights, and Tess Canja, a member of the Board of AARP, to announce the introduction of the ''Predatory Lending Consumer Protection Act of 2002.''

When I took over as Chairman of the Committee on Banking, Housing, and Urban Affairs last year, I made it clear that one of my highest priorities would be to use the Committee as a way to shine a bright light on the deceptive and destructive practices of predatory lenders.

We then held a series of three hearings, starting in July of 2001 and continuing through January of this year, at which the Committee heard from housing experts, community groups, legal advocates, industry representatives and victims of predatory lending in an effort to determine how best to address this problem. The bill I am introducing this afternoon, along with 14 of my colleagues, represents the result of the recent work of the Committee, as well as efforts from the previous Congress.

In particular, this legislation builds on the excellent work of my colleagues in the Senate and Representative LAFALCE, with whom I introduced legislation on this topic in the last Congress.

Homeownership is the American Dream. We say this so often that there is a danger of the idea becoming almost trivial, or devoid of real meaning. But it pays to step back for a second and understand how true and fundamental this is.

Homeownership is the opportunity for Americans to put down roots and start creating equity for themselves and their families. Homeownership has been the path to building wealth for generations of Americans, wealth that can be tapped to send children to college, pay for a secure retirement, or simply work as a reserve against unexpected emergencies. It has been the key to ensuring stable communities, good schools, and safe streets. Common sense tells us, and the evidence confirms, that homeowners are more engaged citizens and more active in their communities.

Little wonder, then, that so many Americans, young and old, aspire to achieve this dream.

The predatory lending industry plays on these hopes and dreams to cynically cheat people out of their wealth. These lenders target lower income, elderly, and, often, uneducated homeowners for their abusive practices. And, as a study released today by the Center for Community Change so clearly indicates, they target minorities, driving a wedge between these families and the hope of a productive life in the economic and financial mainstream of America.

We owe it to these hardworking families to provide protections against these unscrupulous pirates.

Let me share with you one of the stories we heard at our hearings in July. Mary Ann Podelco, a widowed waitress from West Virginia, used $19,000 from her husband's life insurance to pay off the balance on her mortgage, thus owning her home free and clear. Before her husband's death, she had never had a checking account or a credit card. She then took out a $11,921 loan for repairs. At the time, her monthly income from Social Security was $458, and her loan payments were more than half this amount. Ms. Podelco, who has a sixth grade education, testified that after her first refinancing, ''I began getting calls from people trying to refinance my mortgage all hours of the day and night.'' Within two years, having been advised to refinance seven times, each time seeing high points and fees being financed into her new loan, she owed $64,000, and lost her home to foreclosure.

Ms. Podelco's story is all too typical. Unfortunately, most of the sharp practices used by unscrupulous lenders and brokers, while unethical and clearly abusive, are perfectly legal. This bill is designed to address that problem by tightening the interest rate and fee triggers that define a high cost loans; the bill improves protections for borrowers receiving such loans by prohibiting the financing of exorbitant fees, ''packing'' in of unnecessary and costly products, such as credit life insurance, and limiting prepayment penalties. Finally, it protects these consumers' rights to seek redress by prohibiting mandatory arbitration, as the Federal Trade Commission proposed unanimously in 2000.

We cannot extol the virtues of homeownership, as we so often do, without

seeking at the same time to preserve this benefit for so many elderly, minority, and unsophisticated Americans who are the targets of unscrupulous lenders and brokers. This legislation will help achieve this important goal.

Before closing, let me say that, in addition to the aforementioned AARP, Leadership Conference on Civil Rights, and Center for Community Change, CCC, this bill has been endorsed by the National Consumer Law Center, ACORN, the National League of Cities, National Consumer Reinvestment Coalition, Consumers Union, Consumer Federation of America, NAACP, the Self-Help Credit Union, and the U.S. Conference of Mayors.

Finally, I ask unanimous consent to print in the RECORD the Executive Summary of the new CCC study entitled ''Risk or Race? Racial Disparities and the Subprime Refinance Market.'' While predatory lending is not by any means exclusively a problem of racial discrimination, this study demonstrates how much more minorities are forced to rely on subprime lending as a source of mortgage credit. Because predatory lending is concentrated in the subprime market, this study provides new evidence on why the protections provided by the Predatory Lending Consumer Protection Act are so important.

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

RISK OR RACE? RACIAL DISPARITIES AND THE SUBPRIME REFINANCE MARKET—A REPORT OF THE CENTER FOR COMMUNITY CHANGE

(Prepared by Calvin Bradford, Calvin Bradford & Associates, Ltd.)

EXECUTIVE SUMMARY

African-Americans and Hispanics are disproportionately represented in the subprime home refinance mortgage market. Surprisingly, this study finds that the disparity between whites and African-Americans and other minorities actually grows at upper-income levels and is greater for higher-income African-American homeowners than for lower-income white homeowners.

High levels of subprime mortgage lending represent markets where borrowers are paying unusually high costs for credit, while often depleting their home equity. Of particular concern are the consistent and pervasive racial disparities and concentration of subprime lending in communities of color and to borrowers of color at all income levels. The persistent racial patterns found in this analysis raise questions as to whether factors other than risk alone account for them.

These patterns exist in all regions and cities of all sizes, thereby raising concerns about the absence of prime conventional mortgage loans in these geographic areas. The subprime market is fertile ground for predatory lending, a disturbing part of the explosive growth in this market. Abusive credit practices in the subprime segment of the mortgage market are stripping borrowers of home equity they may spend a lifetime building. Thousands of families end up facing foreclosure, which destabilizes communities and often shatters families.

The subprime market provides loans to borrowers who do not meet the credit standards for borrowers in the prime market. Most subprime borrowers use the collateral in their homes for debt consolidation or other consumer credit purposes. The growth in subprime lending has benefitted credit-impaired borrowers, those who may have blemishes in their credit records, insufficient credit history, or non-traditional credit sources. When undertaken responsibly, subprime lending offers the opportunity to further expand lending markets to underserved populations.

However, research by the U.S. Department of Housing and Urban Development (HUD) and others has documented the waive of foreclosures occurring in the subprime market. High foreclosure rates for subprime loans indicate that many subprime borrowers are entering into mortgage loans they cannot afford. Thus, high levels of subprime lending indicate markets where borrowers have unusually high risks of losing their homes. The sheer geographic concentration of these loans, therefore, may have a significant negative impact not just on individual borrowers, but on entire neighborhoods. Foreclosed homes frequently remain vacant for extended periods, during which they are neglected. These vacant homes can depress property values and lead to neighborhood deterioration and disinvestment.

This study represents some important differences from previous work. It is national in scope, analyzing lending patterns in all 331 metropolitan statistical areas (MSAs), and ranking metropolitan areas by a variety of measures of subprime lending. It also includes a regional analysis, looking at the variations in lending patterns in different geographic regions within the country. The study focuses on single-family conventional refinance loans, where subprime lending is most concentrated, using 2000 data provided by the Federal Home Mortgage Disclosure Act. In addition to looking at lending patterns based on the race and income of the borrower, the study also analyzes the way these patterns play out at the neighborhood level and identifies the types of neighborhoods in which subprime loans are most concentrated. Finally, in conjunction with this study, the Center for Community Change is making available an important new national database on subprime lending, which is posted on our website at www.communitychange.org.

Our analysis is based on two key measures. One is the percentage of home refinance loans made to any given racial or ethnic group that are subprime. The second is a comparison between this figure and the percentage of subprime refinance loans made to white borrowers in the same geographic market. This comparison is expressed as a ratio, the ''racial disparity ratio.'' A ratio of 1.0 indicates no disparity, a ratio above 1.0 indicates that minorities are receiving a higher proportion of subprime loans than whites. The higher the ratio, the greater the disparity between white and non-white borrowers.

KEY FINDINGS

This study documents the pervasive racial disparities in subprime lending. Placed in the context of previous research, this study supports the position that risk alone does not explain these racial disparities. Our three major findings are as follows:

1. There are significant racial disparities in subprime lending, and these disparities actually increase as income increases.

Lower-income African-Americans receive 2.4 times as many subprime loans as lower-income whites, while upper-income African-Americans receive 3.0 times as many subprime loans as do whites with comparable incomes.

Lower-income Hispanics receive 1.4 times as many subprime loans as do lower-income whites, while upper-income Hispanics receive 2.2 times as many of these loans.

At a level of 5.93, St. Louis has the nation's highest disparity ratio between upper-income African-Americans and upper-income whites. It was one of five metropolitan areas where this disparity ratio was greater than 4.0. In another 18 cities, this ratio was between 3.0 and 4.0.

2. High concentrations of subprime lending and racial disparities in subprime lending exist in all regions of the nation.

Each region contains metropolitan areas where the level of subprime lending is above the national average of 25.31%.

In 17 MSAs, the level of subprime lending is more than 1.5 times the national norm. Fourteen of these are in the Southeast or Southwest, 7 are in Texas. El Paso has the highest overall level of subprime loans in the nation: 47.28%.

For African-Americans, Hispanics and Native Americans, disparities exist in all regions of the country, reaching as high as 3.25 or more in the Midwest and Great Plains.

3. High concentrations of subprime lending and racial disparities occur in metropolitan areas of all sizes.

Twelve of the 17 metropolitan areas that have concentrations of subprime lending more than 1.5 times the national norm have populations below 500,000. For example, Enid, Oklahoma, the nation's smallest metropolitan area, ranks #12 in percentage of subprime lending. On the other hand, 4 of these 17 metropolitan areas are above 1 million in population.

When we examined disparity ratios for cities in different size categories, we found the highest disparity ratios for African-Americans, Hispanics and Native Americans in cities under 250,000 in population. For example, the highest disparity ratio for African-Americans is found in Kankakee, Illinois, with a population of 103,833 and a disparity ratio of 6.10. For Asians, the highest disparity ratios are generally found in cities between 500,000 and the 1 million in population.

ADDITIONAL RACIAL IMPACTS

In examining the racial dynamics of subprime lending, our research identified three distinct dimensions to the patterns: (a) high overall percentages of subprime loans made to African-Americans and Hispanics; (b) high disparity ratios when these percentages are compared to white borrowers; and, (c) high disparity ratios for neighborhoods with significant African-American and Hispanic residents as compared to white neighborhoods. Examples of these patterns include:

African-Americans

In every single metropolitan area, the percentage of subprime loans made to African-American borrowers was higher than the national norm of 25.31%. (Note: certain metropolitan areas were excluded from this calculation because they had fewer than 100 loans to African-Americans, which was the number we set as the threshold for this calculation.)

Buffalo, New York had the highest percentage of subprime loans to African-Americans, 74.53%.

There were no metropolitan areas where the disparity ratio for African-Americans fell below 1.64.

The highest disparity ratio for African-Americans was Kankakee, Illinois, at 6.10. This was followed by Albany, Georgia, (5.69) and Dothan, Alabama (5.23)

Chicago had the highest disparity ratio for African-American census tracts: 4.12. It was followed by Milwaukee (4.04) and Philadelphia (3.40). Eight metropolitan areas had disparity ratios above 3.0 for African-Americans census tracts; another 65 cities had disparity ratios above 2.0.

Hispanics

The highest percentages of subprime loans to Hispanic borrowers were found in El Paso, Texas, (52.36%) and San Antonio, Texas (51.46%).

San Jose, California, had a disparity ratio for Hispanics of 2.45, the highest in the nation. Fourteen metropolitan areas had disparity ratio above 2.0.

In Corpus Christi, Texas, 75.48% of refinance loans in Hispanic census tracts were subprime, the highest percentage of subprime loans in Hispanic tracts in the nation.

Albuquerque, New Mexico, had the highest disparity ratio for Hispanic census tracts, 2.59.

CONCLUSION

The persistent racial disparities in levels of subprime lending found in this analysis do not, in and of themselves, constitute conclusive proof that there is widespread discrimination in the subprime lending markets. These disparities do, however, raise serious questions about the extent to which risk alone could account for such patterns. Discrimination has been a persistent problem in the home finance markets in the United States. The history of mortgage lending discrimination adds weight to the need to explore more fully the role that discrimination plays in the subprime markets through either differential treatment of individual minority borrowers or through the effects of industry practices.

The issue of whether there is racial exploitation in the subprime markets essentially rests on two issues. First, are the disparities in subprime lending related to race? Second, can these disparities be fully explained by legitimate risk factors? Recent research suggests that risk alone does not explain the huge racial disparities that this study found across all income levels. Among the factors that influence the racial disparities in subprime lending:

The absence of active mainstream prime lenders in minority markets has increased the chances that borrowers in these communities are paying a high cost for credit. For example, the finding that racial disparities actually increase as income increases suggests that a portion of subprime lending is occurring with borrowers whose credit histories would qualify them for lower-cost, conventional, prime loans.

Both Fannie Mae and Freddie Mac, the publicly chartered secondary mortgage market enterprises, have questioned whether risk explains the use of subprimes loans. Freddie Mac has estimated that from ''10 to 30 percent of borrowers who obtained mortgages from the subprime market could have qualified for a conventional loan through Loan Prospector'' (Freddie Mac's automated underwriting system). (See Freddie Mac, ''We open Doors for America's Families,'' Freddie Mac's Annual Housing Report for 1997).

Subprime refinance lending tends to be ''sold'' to customers rather than ''sought'' by them. Subprime lenders aggressively market their loans to potential borrowers. These marketing techniques disproportionately target minority market segments, often to homeowners with considerable equity in their homes. Since mainstream prime lenders are absent from many of these same communities, homeowners are more susceptible to being persuaded that the more expensive subprime loans are all that is available to them.

There is other evidence that risk factors do not explain racial differences in the use of subprime lending. A recent study by the research Institute for Housing America concluded, ''after controlling for borrower income, debt, and credit history, racial groups behave differently.'' (See Pennington-Cross, Yezer, and Nichols, Credit Risk and Mortgage Lending: Who Uses Subprime and Why? Research Institute for Housing America (2000).) Specifically, the study noted that minorities are more likely to use subprime lending than whites.

Subprime lending may provide certain borrowers with access to credit they could not otherwise obtain in the prime markets. However, the wide disparities in subprime lending to African-Americans and Hispanics at all income levels, suggest that factors other than risk may be at work. Further, the pervasiveness of subprime lending in communities of color, in all regions and in metropolitan areas of all sizes, raises important public policy concerns about possible adverse implications stemming from these heavy geographic concentrations. It also suggests that minority homeowners may be particularly vulnerable to predatory lenders, which by most accounts target communities with high levels of subprime lending.

By Mr. SPECTER (for himself, Mrs. FEINSTEIN, Mr. HATCH, Mr. KENNEDY, Mr. HARKIN, Mrs. BOXER, Mr. DURBIN, Mr. MILLER, Mr. CORZINE, Ms. MIKULSKI, Mrs. CLINTON, and Mr. THURMOND):

S. 2439. A bill to prohibit human cloning while preserving important areas of medical research, including stem cell research.

Mr. SPECTER. Madam President, I have sought recognition to introduce legislation to prohibit human cloning while preserving important areas of medical research, including stem cell research.

I introduce this legislation on behalf of Senator FEINSTEIN, Senator KENNEDY, Senator HATCH, Senator HARKIN, Senator BOXER, Senator DURBIN, Senator THURMOND, Senator MILLER, Senator CORZINE, Senator MIKULSKI, Senator CLINTON—and I do believe there will be other cosponsors joining that parade.

Stem cells offer enormous hope for solving some of the most tragic illnesses confronting Americans—and for that matter people worldwide. In November of 1998, stem cells burst on the scene, holding this unique promise. Stem cells are extracted from embryos, and they may be used to replace defective cells in the human body. For example, enormous progress has been made on conquering Alzheimer's, conquering Parkinson's, on cancer, on heart ailments, and many other illnesses.

A controversy arose because they came from embryos and embryos can produce life. Embryos are characteristically or customarily created for in vitro fertilization. Normally, about a dozen are created, maybe three or four are used, and the rest are discarded. It is from those discarded embryos that the stem cells are extracted. If all of those embryos could turn into human life, that would obviously be the very best use of those embryos. But there are some 100,000 in storage, and it is a practical impossibility for those embryos to be used for human life.

In last year's appropriation bill coming out of the subcommittee of Labor, Health, Human Services and Education, where I am the ranking member, $1 million was appropriated to promote adoption of embryos. We are now working on legislation to give a tax credit for people who use the embryos for adoption. But since there are so many of these embryos which are not going to be utilized for adoption purposes, and the alternatives are either to discard them or to use them, then it makes good sense to use them to save lives.

There is general repugnance against reproductive cloning. The legislation which we are introducing now would ban reproductive cloning and impose very substantial criminal penalties.

Unfortunately, the scientists use a term, ''therapeutic cloning,'' which has led to confusion and has given a process known as nuclear transplantation a bad name. Essentially what nuclear transplantation is, it is to take DNA from a cell of a person who has Parkinson's and then insert that in a egg of a woman with the DNA removed. Then the stem cells which are produced from that egg are compatible with the donor's DNA. For example, those stem cells could be used to combat the Parkinson's which that individual has.

The legislation contains very substantial protections to be sure that in the course of this nuclear transplantation none of this will be implanted in the womb of a woman or otherwise used to produce human cloning, reproductive cloning—cloning of a person. There are very tough criminal penalties attached.

To Reiterate, over the past 4 years, the Labor, Health and Human Services and Education Appropriations Subcommittee has held 14 hearings at which scientists, patients, and ethicists have described the promise of stem cell research and nuclear transplantation to produce stem cells. A problem arises from the fact that scientists misnamed the promising technique of nuclear transplantation to produce stem cells. In calling this technique therapeutic cloning, scientists used a word, which for many Americans, conjures up grotesque images from bad science fiction movies: mad scientists, bubbling test tubes, and row after row of zombie-like creatures.

Most Americans equate the word cloning with human reproductive cloning, where a carbon copy of a person is created in a process that also gave us Dolly the sheep and CC the cat. By this definition so-called therapeutic cloning is not really cloning at all. It is a process that creates embryonic stem cells genetically matched to a patient for the purpose of repairing unhealthy or injured tissue.

For example, if a patient has heart damage, the genetic material from one of his cells could be transplanted into a human egg cell that has had its genetic material removed. After a time, stem cells are produced, coaxed into becoming heart cells, and transplanted into

the damaged heart to restore function. Because the cells are an exact match of the patient's cells, no rejection would occur. Scientists have suggested that this procedure is better termed nuclear transplantation to produce stem cells.

Embryonic stem cells can be coaxed into becoming any of the more than 200 types of cells in the human body, and therefore may be used to treat a vast array of diseases and disorders including heart disease, Parkinson's disease, diabetes, paralysis, Alzheimer's disease, and severe burns. Scientists at the National Academy of Sciences estimate that the combination of nuclear transplantation and stem cell therapies could spare the lives of 170,000 Americans each year.

History shows us the devastating effects of tying the hands of scientists for ideological reasons. Galileo was imprisoned for his support of Copernicus' theory that the planets revolve around the sun. Pope Boniface VIII banned the practice of cadaver dissection in the 1200's. This set back the understanding of human anatomy and the practice of medicine for over 300 years. In the 1800's, the Scottish Calvinist Church objected to the use of anesthesia during labor because the ''pain of childbirth was God's will.'' Let us not repeat the mistakes of history.

Recently 40 American Nobel laureates stated that:

legislation [that would ban all cloning] would foreclose the legitimate use of nuclear transplantation . . . and impede progress against some of the most debilitating diseases known to man.

Former Presidents Ford and Carter have written to President Bush stating their opposition to reproductive cloning and their strong support for nuclear transplantation to produce stem cells. I believe that when the facts are weighed there will be strong bipartisan support for such a policy.

As I said, today, I, along with Senators FEINSTEIN, KENNEDY, HATCH, HARKIN, BOXER, DURBIN, MILLER, CORZINE, MIKULSKI, CLINTON, and THURMOND am introducing a bill which would prohibit human cloning while preserving important areas of medical research, including nuclear transplantation to produce stem cells.

Let me review the key provisions of the bill. It would prohibit human reproductive cloning by imposing a criminal penalty of up to 10 years in prison and a civil penalty of at least one million dollars. It would allow medical research into nuclear transplantation to produce stem cells, also known as therapeutic cloning, thereby allowing promising research towards cures for a vast array of diseases to go forward. It would apply strict Federal ethical requirements to all nuclear transplantation research. These include informed consent, an ethics board review, and protections for the safety and privacy of research participants. The legislation imposes a $250,000 civil penalty for violation of the ethics requirements.

I believe that the Senate should act quickly to ban human cloning. In the process, we must preserve important areas of medical research, such as nuclear transplantation to create stem cells. The bill that I and my colleagues have introduced will do that in an ethical and moral way.

I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 2439

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Human Cloning Prohibition Act of 2002''.

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Human cloning is unsafe, immoral, and unacceptable.

(2) Federal legislation should be enacted to prohibit anyone from attempting to conduct human cloning, whether using Federal or non-Federal funds.

(3) To deter human cloning, any attempt to create a human clone should be a felony subject to severe punishment.

(4) The National Academies (including the National Academy of Sciences and the Institute of Medicine) and the National Bioethics Advisory Commission recommended that any legislative action undertaken to ban human cloning should be careful not to interfere with important areas of scientific research, such as nuclear transplantation to produce stem cells.

(5) The National Academies found that there are significant differences between human cloning and nuclear transplantation. Specifically, the Academies determined that, unlike human cloning, the creation of embryonic stem cells by nuclear transplantation does not involve implantation of an embryo in a uterus and thus cannot produce a complete, live-born animal (that is, a ''clone'').

(6) The National Academies found that scientific and medical considerations that justify a ban on human cloning are not applicable to nuclear transplantation.

(7) The National Academies concluded that nuclear transplantation has great potential to increase the understanding and potential treatment of various diseases and debilitating disorders, as well as our fundamental biological knowledge. These diseases and disorders include Lou Gehrig's disease, Parkinson's disease, Alzheimer's disease, spinal-cord injury, cancer, cardiovascular diseases, diabetes, rheumatoid arthritis, and many others.

(8) The National Academies determined that nuclear transplantation research could improve our ability to transplant healthy tissue derived from stem cells into patients with damaged or diseased organs. Such research could greatly reduce the likelihood that a person's body would reject that tissue and also help obviate the need for immunosuppressive drugs, which often have severe and potentially life-threatening side effects.

(9) Based on these expert conclusions and recommendations and other evidence, nuclear transplantation is a valuable area of research that could potentially save millions of lives and relieve the suffering of countless others, and thus should not be banned.

(10) The National Academies recommended that nuclear transplantation experiments should be subject to close scrutiny under the Federal procedures and rules concerning human-subjects research.

(11) Given the need for additional oversight in this area, strict ethical requirements for human subjects research, including informed consent, safety and privacy protections, and review by an ethics board, should be prescribed for all research involving nuclear transplantation, whether using Federal or non-Federal funds.

(12)(A) Biomedical research and clinical facilities engage in and affect interstate commerce.

(B) The services provided by clinical facilities move in interstate commerce.

(C) Patients travel regularly across State lines in order to access clinical facilities.

(D) Biomedical research and clinical facilities engage scientists, doctors, and others in an interstate market, and contract for research and purchase medical and other supplies in an interstate market.

SEC. 3. PURPOSES.

It is the purpose of this Act to prohibit human cloning and to protect important areas of medical research, including stem cell research.

SEC. 4. PROHIBITION ON HUMAN CLONING.

(a) IN GENERAL.—Title 18, United States Code, is amended by inserting after chapter 15, the following:

''CHAPTER 16—PROHIBITION ON HUMAN CLONING

''§ 301. Prohibition on human cloning

''(a) DEFINITIONS.—In this section:

''(1) HUMAN CLONING.—The term 'human cloning' means implanting or attempting to implant the product of nuclear transplantation into a uterus or the functional equivalent of a uterus.

''(2) HUMAN SOMATIC CELL.—The term 'human somatic cell' means any human cell other than a haploid germ cell.

''(3) NUCLEAR TRANSPLANTATION.—The term 'nuclear transplantation' means transferring the nucleus of a human somatic cell into an oocyte from which the nucleus or all chromosomes have been or will be removed or rendered inert.

''(4) NUCLEUS.—The term 'nucleus' means the cell structure that houses the chromosomes.

''(5) OOCYTE.—The term 'oocyte' means the female germ cell, the egg.

''(b) PROHIBITIONS ON HUMAN CLONING.—It shall be unlawful for any person or other legal entity, public or private—

''(1) to conduct or attempt to conduct human cloning; or

''(2) to ship the product of nuclear transplantation in interstate or foreign commerce for the purpose of human cloning in the United States or elsewhere.

''(c) PROTECTION OF RESEARCH.—Nothing in this section shall be construed to restrict practices not expressly prohibited in this section.

''(d) PENALTIES.—

''(1) CRIMINAL PENALTIES.—Whoever intentionally violates paragraph (1) or (2) of subsection (b) shall be fined under this title and imprisoned not more than 10 years.

''(2) CIVIL PENALTIES.—Whoever intentionally violates paragraph (1) or (2) of subsection (b) shall be subject to a civil penalty of $1,000,000 or three times the gross pecuniary gain resulting from the violation, whichever is greater.

''(3) FORFEITURE.—Any property, real or personal, derived from or used to commit a violation or attempted violation of the provisions of subsection (b), or any property traceable to such property, shall be subject to forfeiture to the United States in accordance with the procedures set forth in chapter 46 of title 18, United States Code.

''(e) RIGHT OF ACTION.—Nothing in this section shall be construed to give any individual or person a private right of action.''.

(b) ETHICAL REQUIREMENTS FOR NUCLEAR TRANSPLANTATION RESEARCH.—Part H of title IV of the Public Health Service Act (42 U.S.C. 289 et seq.) is amended by adding at the end the following:

''SEC. 498C. ETHICAL REQUIREMENTS FOR NUCLEAR TRANSPLANTATION RESEARCH, INCLUDING INFORMED CONSENT, INSTITUTIONAL REVIEW BOARD REVIEW, AND PROTECTION FOR SAFETY AND PRIVACY.

''(a) DEFINITIONS.—In this section:

''(1) HUMAN SOMATIC CELL.—The term 'human somatic cell' means any human cell other than a haploid germ cell.

''(2) NUCLEAR TRANSPLANTATION.—The term 'nuclear transplantation' means transferring the nucleus of a human somatic cell into an oocyte from which the nucleus or all chromosomes have been or will be removed or rendered inert.

''(3) NUCLEUS.—The term 'nucleus' means the cell structure that houses the chromosomes.

''(4) OOCYTE.—The term 'oocyte' means the female germ cell, the egg.

''(b) APPLICABILITY OF FEDERAL ETHICAL STANDARDS TO NUCLEAR TRANSPLANTATION RESEARCH.—Research involving nuclear transplantation shall be conducted in accordance with subparts A and B of part 46 of title 45, Code of Federal Regulations (as in effect on the date of enactment of the Human Cloning Prohibition Act of 2002).

''(c) CIVIL PENALTIES.—Whoever intentionally violates subsection (b) shall be subject to a civil penalty in an amount that is appropriate for the violation involved, but not more than $250,000.

''(d) ENFORCEMENT.—The Secretary of Health and Human Services shall have the exclusive authority to enforce this section.''.

Mrs. FEINSTEIN. Mr. President, I rise to join my colleagues Senators SPECTER, KENNEDY, HATCH, HARKIN and THURMOND to introduce legislation banning human cloning, but permitting valuable stem cell research to continue.

At the dawn of a new era in medicine, it would be unconscionable for Congress to prohibit medical research that offers hope to so many people with crippling and often incurable diseases. There is broad agreement across our society that human reproductive cloning should be prohibited. And our bill bans human reproductive cloning. But there is also widescale support to continue research that may yield cures for paralysis, cancer, Parkinson's disease, Alzheimer's and so many other illnesses. And our bill allows this important research to continue. Simply put, nuclear transplantation research has nothing to do with cloning humans. Rather, it has everything to do with saving lives and alleviating suffering.

The legislation we are introducing today bans human reproductive cloning, that is, creating a whole-body, carbon copy of a human being. Such cloning is unsafe, immoral, and unacceptable. Under the bill, anyone who even attempts human cloning will be subject to 10 years in jail and a minimum $1 million fine. However, the bill does not ban somatic cell nuclear transplantation. This is a technique that offers enormous potential for providing cures for diseases such as cancer, diabetes, cystic fibrosis, and heart disease as well as conditions such as spinal cord injuries, liver damage, arthritis, and burns.

Somatic cell nuclear transportation works like this: 1. The nucleus, that is, the DNA, is taken from the body cell of a sick person; 2. It is then injected into an unfertilized egg from which the nucleus has been removed; and 3. The egg is stimulated to divide and produce stem cells. These stem cells can potentially grow into any organ or tissue. This ''new'' organ or tissue would have the same DNA as the sick person and thus can be implanted without rejection by the person's body. This could save the lives of the thousands of people every year waiting for an organ or tissue to be donated or who receive a transplant but suffer complications from powerful immuno-suppression drugs.

Today, almost 80,000 Americans are waiting for organ transplants, while hundreds of thousands more need tissue transplants. Nuclear transplantation research offers many other applications as well. It could be used to produce human proteins such as blood clotting factors that aid in healing wounds. It could yield information on stem cell differentiation, providing valuable information about the mechanism of aging and the cause of cancer. It could even be used to find a cure for cancer by teaching us how to reprogram cells. However, we must acknowledge that nuclear transplantation research, like all scientific and medical research involving human diseases and conditions, involves complex ethical issues.

Currently, this research is largely unregulated in the private sector. That is why this legislation would impose a number of ethical requirements on it, including informed consent, an ethics board review, and protections for the safety and privacy of research participants. These regulations are found in Subparts A and B of 45 CFR 46 and are incorporated in full into the bill we introduce today. Currently, these regulations apply to any research done or funded by the federal government. Our legislation would extend the regulations to all research involving somatic cell nuclear transplantation.

The bottom line is that these regulations will prevent exploitation of women as part of nuclear transplantation research and, more generally, require that researchers do this research in an ethical manner. These regulations are already routinely applied to government-funded researchers who do research on human subjects, and they seem to have worked well. Moreover, the bill provides that anyone engaging in unethical nuclear transplantation research would face up to a $250,000 fine.

I ask unanimous consent that a summary of Subparts A and B of 45 CFR 46 be printed in the RECORD directly following my remarks.

The PRESIDING OFFICER. Without objection, it is so ordered.

(See exhibit 1.)

Ms. FEINSTEIN. I would also add that I believe that there may be a need for even greater oversight over nuclear transplantation research than is provided in the bill we introduce today.

I intend to work with my colleagues to strengthen this legislation further before it is enacted. There may well be a need to include additional provisions for regulation and oversight. For one thing, I believe that we should add the full text of Subparts A and B of 45 CFR 46 to this legislation to make clear what the bill actually says. And I will work with my colleagues to do so. Unfortunately, competing legislation goes far beyond such regulation. It would completely ban nuclear transplantation—criminalizing scientific research that offers the promise of saving the lives of millions and relieving the suffering of countless others. In fact, it would even make it a crime for a doctor to cure a patient if that cure was developed overseas from nuclear transplantation research.

I strongly oppose such legislation. I believe that passing such a sweeping ban would be a huge mistake. As is the case with many medical technologies, it is not stem cell research techniques that are the problem, but some of their potential applications. The scientific and medical evidence is overwhelming that nuclear transplantation offers the promise of curing many deadly diseases and debilitating conditions. As Professor Irving Weissman, chair of the National Academies' panel on cloning, testified before a Judiciary Committee hearing I chaired, ''[T]here are no scientific or medical reasons [for banning nuclear transplantation], and such a ban would certainly close avenues of promising scientific and medical research.'' In fact, over 80 major organizations and associations have already come out in favor of our approach.

These include the American Medical Association, National Health Council, Parkinson's Action Network, Juvenile Diabetes Research Foundation, and Federation of American Societies for Experimental Biology, which represents over 600,000 medical researchers around the country. Moreover, the leading blue-ribbon scientific and medical panels that have examined the cloning issue have also supported our approach.

The National Bioethics Advisory Commission, the National Academies' Panel on Scientific and Medical Aspects of Human Cloning, and the California Advisory Committee on Human Cloning all concluded that we should ban human reproductive cloning, but not interfere with important areas of scientific research, including nuclear transplantation.

I have been very moved by the many sick people and their relatives that have contacted me and told me that my legislation offers them hope. One of the most compelling stories is that of

Kris Gulden who testified at our hearing on the subject. Ms. Gulden, a former veteran police officer, received several awards for her outstanding law enforcement work. She also maintained an active schedule outside the office, including winning the women's triathalon gold medal in August 1996 at the biannual International Police Olympics in Salt Lake City. Tragically a car struck Ms. Gulden while she was training for the 1998 AIDS Ride, leaving her with a severe spinal cord injury. That accident changed her life. Nine days before the accident, she was participating in a triathalon in Memphis. Nine days after the accident, she was left exhausted just trying to brush her teeth. I'll never forget her words: ''In my dreams, I still walk. I run, I play basketball, and I wear the uniform of the Alexandria Police Department. When the sun rises each morning, it brings reality with it. I rise to the sight of a wheelchair, yet I rise with the hope that maybe this will be the morning that I can move my legs.''

In the face of the enormous promise of nuclear transplantation research, it is difficult to see why anyone wants to dash the hopes of Kris Gulden and the millions of others facing debilitating and painful illnesses and ailments. As former Senator Connie Mack has testified before the Senate:

A cell isn't human life if it hasn't been fertilized by a sperm and placed in the womb'' and '[t]he research value of these cells is enormous. They have the potential to form any cell in the body and can reproduce indefinitely. Studies in animals demonstrate that this could lead to cures and treatments for millions of people.

The legislation we introduce today would ban human reproductive cloning and preserve valuable medical research. I urge my colleagues to support this bill.

I would also ask unanimous consent that several letters I have received supporting the Specter-Feinstein-Kennedy-Hatch approach to cloning be printed in the RECORD.

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

JOINT STEERING COMMITTEE
FOR PUBLIC POLICY,
Bethesda, MD, April 9, 2002.

Hon. ORRIN G. HATCH,
U.S. Senate, Hart Senate Office Building, Washington, DC.

DEAR SENATOR HATCH: I am writing to seek your help with efforts being made by many disease advocacy groups and by many of us in the scientific community to protect highly valuable scientific research from an overzealous legislative proposal intended to prohibit the cloning of human beings.

The measure in question, S. 1899, introduced by Senator Brownback and others, would, in effect, establish criminal penalties for three things: (i) attempts to produce a human being by methods that include transfer of a somatic cell nucleus (''nuclear transfer'') and placement of any resulting embryos into a uterus; (ii) the transfer of a human cell nucleus into an egg cell for any purposes; and (iii) the important of any products of nuclear transfer, including those used for medical treatment.

No scientist of my acquaintance believes that it is currently appropriate or safe, even if it were feasible, to undertake the complex process intended to result in the birth of a cloned human being. For that reason, you are unlikely to hear objections to the first prohibition established by the Brownback bill, even from those who may question whether legislation and criminal penalties are useful instruments for preventing attempts at cloning that might be undertaken by irresponsible individuals.

The second and third prohibitions, however, are deeply disturbing to many people, including those of use who have given considerable thought to the difficult ethical issues presented by these new technologies. The third prohibition is inappropriately punitive in the more obvious way: it could lead to punishment of seriously ill patients who have gone abroad to seek novel treatments that are unavailable in this country because they are based on nuclear transfer. But the second prohibition is troubling in a more profound way. For the first time in my experience, an American law would create criminal penalties for the use of a highly promising scientific method, regardless of the intent of the investigator, and would threaten to delay development of new therapies for common diseases.

To appreciate our concerns, it is important to understand the nature of what is called ''nuclear transfer''. Recent studies with experimental animals show that a cell nucleus containing all, but expressing only some, of the genes of an organism can undergo extensive changes, or ''reprogramming'', when moved from one cell environment to another. This means that a nucleus from a highly specialized cell—for example, a skin call—can radically revise the set of genes that it uses when it is put into another cell, such as an egg cell, from which the pre-existing nucleus has been removed. In the new environment of the recipient cell, the genes in the nucleus appear to function as appropriate to that environment.

Thus, when the recipient cell is an egg, the genes regain the ability to direct the progeny cells, which arise by division, to form nearly any of the many cell type that are found in a mature organism, if the cells are coaxed to do so by appropriate stimuli. This phenomenon has the potential to lead to great things a deeper understanding of human development, important insights into disease mechanism, and the abundant production of normal cells of virtually any type, which could then be used to treat a wide variety of diseases. Moreover, if a parent is the source of the transplanted, reprogrammed nucleus, the normal cells could be used to treat that individual without fear of immune rejection.

Clearly we have a lot to learn before we can efficiently apply nuclear transfer and reprogramming to medical purposes—most obviously, we need to learn the best recipes to foster reprogramming and development into the various cell types. But studies with certain animal models of disease already show that these strategies can work, and the fundamental discoveries that have emerged from work with nuclear transfer offer legitimate hope for still greater discoveries in the future.

Unfortunately, the opportunities make such discoveries and develop new therapies may well be denied to American scientists because of any inappropriate equation of the method used in reprogramming cells (nuclear transfer) and the goal of cloning whole organisms. This confusion is based in part on the use of nuclear transfer in an otherwise very different multi-step process that led ultimately to the birth of Dolly the sheep and other cloned animals. Indeed, S. 1899 considers transfer of a human somatic cell nucleus into an nucleated human egg for the purpose of reprogramming to be a punishable act of human cloning.

It is crucial to emphasize how nuclear transfer, the reprogramming step, differs from attempts to generate a full-fledged organism. Absent transfer to a uterus, the cells that result from nuclear transfer into an egg cytoplasm will not form the complex and organized collection of cell types that characterize a developing organism. The initial aggregate of fewer than 200 cells, formed after introduction of a nucleus into an egg, lacks the recognizable types of cells that are needed to develop into the organs of a human being, and it is barely visible to the naked eye. Individual cells from this aggregate, however, can be used to develop stem cell lines, to study development of specialized cell types in a Petri dish, and to prepare materials for cell-based therapies.

Furthermore, in the future, it is possible that cell reprogramming can be carried out in ways that do not involve the use of human egg cells or nuclear transfer itself. The chemicals in the cytoplasm of an egg cell that guide reprogramming have not yet been identified, but when they are it will be possible to use other cells and even simpler defined recipes to reprogram adult cells. Of course, these things will never happen, at least in this country, if the use of nuclear transfer to human eggs is outlawed.

The Brownback bill that we are worried about today closely resembles a bill (S. 1601) proposed in 1998 by Senator Bond and others. At that time, you helped to derail the passage of that ill-considered measure with an insightful letter to one of the bill's sponsors and a speech on the Senate floor. Many of my colleagues and I believe that the concerns you raised then about the need to ''ban cloning of human beings but do so in a way that allows, to the extent ethically proper, valuable research to continue'' are still valid. For that reason, I hope you will join us in opposing S. 1899.

Thank you for your consideration of my views on this important legislation. Needless to say, I am prepared to discuss any of the points I have made with you or your staff at any time.

With best personal regards,
HAROLD VARMUS,
Chair, Joint Steering Committee for Public Policy.

CALIFORNIA INSTITUTE OF TECHNOLOGY,
Pasadena, CA, April 8, 2002.

Senator ORRIN G. HATCH,
Hart Office Building,
Washington, DC.

DEAR SENATOR HATCH: I am writing in opposition to the Brownback bill on cloning.

I am a Nobel Laureate who has worked for 40 years in basic biological science and biotechnology. I have seen how a glimmer of an idea can grow to transform a technology, and I have great faith in the ability of basic science to create miraculous treatments for medical conditions.

The use of nuclear transfer into the embryonic cells for reproductive purposes (so-called reproductive cloning) is a technology that is a long way from being safe enough to be used to create human beings. So, issues of morality aside, I am totally opposed to using cloning technology for human reproduction. All of my colleagues with whom I have talked are equally opposed, but I am aware that there are people threatening to try to carry out the procedure. Thus, I support a legislative ban on reproductive cloning. I hope that any such ban will have a sunset clause so that in 5 years the question can be revisited.

There is another use of somatic cell nuclear transfer into early embryonic cells

that is quite different from the process of reproductive cloning. This is often called therapeutic cloning, although that is a terminology that many people find confusing. Such nuclear transfer could be used to produce individual stem cells that may have extraordinary medical value. It is also a valuable technique for probing the causes of genetic diseases. Twice this week, I have heard of new advances that make such a technology increasingly promising. Furthermore, the procedure whereby mouse cells derived by somatic cell nuclear transfer can be used therapeutically has just been described in the journal Cell, erasing any doubt about the feasibility of the method. Thus, it would be a great loss to medical science for somatic cell nuclear transfer for therapeutic use to be legislatively banned.

I am aware that there are bills in the Senate that would fit the requirements that I have set out. Senator Feinstein of my state along with Senator Kennedy has proposed such a bill as has Senators Specter and Harkin. They make the distinction between banning nuclear transfer for reproductive purposes and continuing to allow nuclear transfer for research and therapeutic purposes. These are bills that I can support.

Sincerely yours,

DAVID BALTIMORE,
President.

AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE,
Washington, DC, February 28, 2002.

DEAR SENATOR: The Board of Directors of the American Association for the Advancement of Science (AAAS) recently adopted a policy statement on human cloning. I am enclosing a copy for your attention.

Citing the serious risks associated with the procedure, the AAAS statement supports a legally enforceable ban on human reproductive cloning. At the same time, however, it backs stem cell research using cells derived with nuclear transplantation techniques, a procedure sometimes called therapeutic or research cloning. Such research offers enormous potential health benefits. However, because it also raises serious ethical, social, and religious concerns, it must be conducted under close scrutiny by the federal government.

AAAS is the world's largest general scientific society with over 135,000 individual members and 275 affiliated societies representing all fields of science and engineering. Founded in 1848, it is also the publisher of Science magazine and has long been a leader in promoting ethical and responsible science.

Sincerely,

ALAN I. LESHNER,
Chief Executive Officer.

Enclosure.

AAAS STATEMENT ON HUMAN CLONING

The American Association for the Advancement of Science (AAAS) recognizes the intense debates within our society on the issue of human cloning. Since 1997, AAAS has engaged the public and various professional communities in dialogue on the scientific and social issues associated with human cloning and stem cell research. Those experiences form the backdrop for this statement on human cloning.

BAN REPRODUCTIVE CLONING

AAAS endorses a legally enforceable ban on efforts to implant a human cloned embryo for the purpose of reproduction. The scientific evidence documenting the serious health risks associated with reproductive cloning, as shown through animal studies, make it unconscionable to undertake this procedure. At the same time, we encourage continuing open and inclusive public dialogue, in which the scientific community is an active participant, on the scientific and ethical aspects of human cloning as our understanding of this technology advances.

SUPPORT STEM CELL RESEARCH (INCLUDING ''RESEARCH CLONING'')

AAAS supports stem cell research, including the use of nuclear transplantation techniques (also known as research or therapeutic cloning), in order to realize the enormous potential health benefits this technology offers. Such benefits are likely to be many years away. If they are to be realized at all, however, it will only be through carefully designed research subject to peer review. Because there are religious, ethical, and social concerns raised by the prospect of creating stem cells for research purposes, we believe that research cloning should only proceed under close scrutiny by the federal government over both the public and private sectors.

EXERCISE APPROPRIATE OVERSIGHT

A thorough assessment of existing guidelines and policy, including consideration of possible new regulations specific to this type of research, should be undertaken in light of the concerns surrounding it.

Adopted by the AAAS Board of Directors, Boston, Massachusetts, February 14, 2002.

THE AMERICAN SOCIETY OF HUMAN GENETICS,
Bethesda, MD, February 5, 2002.

Hon. DIANNE FEINSTEIN,
U.S. Senate,
Washington, DC.

DEAR SENATOR FEINSTEIN: The American Society of Human Genetics (ASHG) is a society of researchers and professionals in human genetics that represents nearly 8000 scientists, physicians, nurses, genetic counselors, and students actively engaged in genetic discovery, teaching, and application of knowledge of human genetics and the human genome.

As a major scientific organization whose members have broad expertise and interest in matters related to human genetics, and in the application of genetic knowledge to the well being of people, the Society strives to be extremely thoughtful, thorough and ethical in pondering many of the scientific issues raised in public debate today. As stewards of the field of human genetics elected by the membership of the Society, the Board of Directors of ASHG affirms that basic research and the development of future applications of that research require the ongoing commitment to scientific integrity and social responsibility that has served our organization well for the last 50 years. In other words, scientists must proceed with commitment to rigorous critical evaluation and a heightened sense of responsibility to the patients who entrust their life and health to us.

In concert with these principles, it is important for you and your colleagues to know that the ASHG concurs wholeheartedly with your bill ''The Human Cloning Prohibition Act'' that bans reproductive human cloning but is finely crafted so as not to prohibit new and evolving techniques that could potentially change the course of human illness as we know it today so that the collective quality of life is enhanced for all of us. Dr. Bert Vogelstein, in his testimony before the Labor Health and Human Services subcommittee on December 4, 2001, so eloquently captured the distinction surrounding two very different medical endeavors—regenerative medicine and the cloning of a human—the former being the potential key to the problem of immune rejection, the latter being morally and medically unacceptable.

In closing, the Senate must be sure that any legislative action only bans cloning to create a human being and does no harm to legitimate biomedical research. Each Senate vote on proposed legislation must make this distinction clear or any ban would have profound negative impact on the advances that have been made thus far in this pioneering and exciting field.

We congratulate you and your fellow senators for your insight and conviction to advancing the field of biomedical research.

Sincerely yours,

DR. P. MICHAEL CONNEALLY,
ASHG President.
DR. JOANN A. BOUGHMAN,
ASHG Executive Vice President.

APRIL 12, 2002.

CLOSING MINDS TO STEM CELL RESEARCH

The United States Senate is about to consider legislation that will determine the fate of a remarkable new form of medical research known colloquially as ''therapeutic cloning''. The research could lead to unprecedented treatments for human disease, but has fallen prey to the confused debate over human stem cell research on the one hand, and the prospects of creating a cloned person on the other—two very different exercises that are now intricately entwined.

The debate has its roots in the medical potential of human stem cells. All the tissues in our bodies arise from stem cells that are found in the early human embryo. Over the past several years, scientists have learned how to isolate and propagate human stem cells. There is hope that we will eventually be able to use these cells to more effectively treat cancer, diabetes, spinal cord injury, Alzheimer's and Parkinson's diseases, and others. This prospect has inspired great hope among individuals with ailments that had previously seemed incurable.

Human stem cells can be isolated in several ways. The most visionary approach utilizes a procedure that was first dubbed ''therapeutic cloning'', but should more accurately be termed ''somatic cell nuclear transfer'' or simply ''nuclear transplantation''. To perform nuclear transplantation, scientists replace the genetic material of an unfertilized human egg with that from an adult cell. The egg is then induced to proliferate into a primitive structure known as the ''blastocyst'', from which stem cells can be harvested. Tissue derived from such stem cells would be immunologically compatible with the donor of the genetic material, thus circumventing rejection of the tissue when it is transplanted into the donor in order to renew a failing organ.

Blastocysts produced by nuclear transplantation can also be implanted into the uterus in order to produce fully developed organisms that are genetically identical to the original donors—''clones'' such as the celebrated sheep Dolly. The prospect of using such ''reproductive cloning'' to create humans is repugnant to most scientists and the general public alike. Consequently, there is widespread support for legislation that would prohibit the production of human clones.

But the use of nuclear transplantation to obtain stem cells is another matter. At the time stem cells would be isolated from blastocysts produced by nuclear transplantation, the structures are no larger than the head of a small pin, of the order of 100–150 cells, and have no distinctive tissues—in particular, no neural tissue. Moreover, they have been obtained artificially, without even the intervention of fertilization, and will not be used to produce cloned individuals. They are biologically akin to the very early embryos produced in fertility clinics by fertilization in test tubes, except that they contain the genes of only one individual rather

than those of two. The U.S. condones the discard of surplus embryos made in fertility clinics. Why should it criminalize the medical use of blastocysts produced by nuclear transplantation? Unfortunately, the term ''therapeutic'' cloning'' was originally used to describe nuclear transplantation, so the procedure is now tarred with the same brush as reproductive cloning. Rarely has semantic inaccuracy been more misleading.

The Senate will be offered two very different legislative approaches to nuclear transplantation. One approach, sponsored by Senator Sam Brownback, would prohibit both reproductive cloning and nuclear transplantation itself. The other approach, sponsored in two similar forms by Senators Dianne Feinstein and Edward Kennedy, and by Senators Tom Harkin and Arlen Specter, would ban reproductive cloning, but permit research with nuclear transplantation to go forward. Also in the wings is a proposed moratorium on nuclear transplantation as an alternative to full fledged prohibition, but this has yet to take legislative form.

The Brownback bill is an onerous piece of legislation. It would criminalize a form of medical research that is intended to explore the prospects for stem cell therapies, not to create cloned persons; importation of treatments developed in other nations by the use of nuclear transplantation; even the receipt of such therapies abroad. It holds out the prospect of a U.S. diabetic returning from Great Britian—where the production of stem cells by nuclear transplantation is authorized—with a pancrease restored through the agency of nuclear transplantation and finding herself a felon.

The proposed moratorium is not a satisfactory alternative. It raises the specter of interminable discussion and political machinations, perhaps stalling research on nuclear transplantation indefinitely. The proponents of a moratorium argue that ''the widespread creation of clonal embryos would increase the risk that a human clone would be born, and would further open the door to eugenic procedures.'' But nuclear transplantation itself is in no way a ''eugenic procedure''. And any legislative prohibition of reproductive cloning automatically forbids the use of nuclear transplantation for that purpose.

Congress should unite around legislation that would prohibit reproductive cloning, but permit research on nuclear transplantation to go forward under suitable regulations and oversight. The makings of such legislation are already before the Senate, in the form of the Feinstein-Kennedy and Specter-Harkin bills. Legislation fashioned from these bills could offer a forthright, progressive and humane solution to the impasse over nuclear transplantation. The U.S. public deserves no less.

PAUL BERG, PH.D.
J. MICHAEL BISHOP, MD.
ANDREW S. GROVE, PH.D.

Dr. Berg is Emeritus Professor in the Department of Biochemistry at Stanford University and a Nobel laureate in chemistry. Dr. Bishop is Chancellor at the University of California, San Francisco, and a Nobel laureate in Physiology or Medicine. Dr. Grove is a cofounder and presently chairman of Intel Corp., and a cancer survivor.

ASSOCIATION OF AMERICAN UNIVERSITIES,
Washington, DC, April 25, 2002.

Hon. DIANNE FEINSTEIN,
U.S. Senate,
Washington, DC.

DEAR SENATOR FEINSTEIN: I am writing to let you know that the Association of American Universities has now adopted a position on human cloning, which is attached. The AAU represents 61 leading public and private research universities in the United States and two in Canada.

Our university membership adopted this statement unanimously, and we look forward to working with you to enact legislation consistent with it, which would include the legislation you have introduced on this topic, S. 1758.

Your leadership in the fight to ensure that appropriate restrictions against human reproductive cloning are enacted, while allowing important research on nuclear transplantation to produce stem cells to continue, is most appreciated.

Cordially,

NILS HASSELMO,
President.

Enclosure.

AAU STATEMENT ON HUMAN CLONING

The Association of American Universities has a long history of supporting academic and scientific freedom. It also recognizes the importance of conducting research consistent with ethical, legal, and safety requirements.

AAU strongly opposes human reproductive cloning, and supports legislation to ban this practice. The National Academy of Sciences (NAS) has concluded that cloning procedures are currently not safe for humans and that no responsible scientists or physicians are likely to undertake to clone a human. We generally do not support legislation to limit fields of research, but since some organizations have announced an intention to clone humans, we concur with the NAS that a legal ban is more likely to deter any attempt to close a human than would any voluntary system or moratorium. The ban should be reconsidered at five-year intervals, based on current scientific knowledge.

In contrast to human reproductive cloning, AAU continues to support both basic and applied stem cell research. AAU therefore supports nuclear transplantation to produce stem cells, also known as somatic cell nuclear transfer, as nonreproductive cloning, and as therapeutic cloning. AAU concurs with the NAS that nuclear transplantation to produce stem cells has considerable potential for advancing our fundamental knowledge and developing new medical therapies to treat debilitating diseases. Continuing the investigation of stem cells produced by nuclear transplantation is the only way to assure that the value of this nascent technology is realized. Before applications to humans should be considered, we need further study of cells derived from the process of nuclear transplantation, subject to federal safeguards. This research should proceed in parallel with other types of stem cell research, including human embryonic and adult stem cell research.

Adopted by the AAU Membership on April 23, 2002.

PATIENT STORIES FROM CALIFORNIA SUPPORTING SPECTER-FEINSTEIN APPROACH ON CLONING

FROM STEFANIE SONICO IN CATHEDRAL CITY, CA

''I totally and completely support stem cell research in hopes that it will lead to a cure for juvenile diabetes and other such devastating diseases. My son developed juvenile diabetes at 20 months old and is now 16 years old. Without stem cell research, his future is frightening. He does not need to look forward to kidney failure, eye damage, heart disease and stroke, and death 15 years before his time. He needs to believe that the United States of America, a free country, supports research, done by renowned scientists, to find a cure for diabetes. He needs to believe that the United States will not imprison scientists for their knowledge and their skill. I am a Christian that believes that we have an obligation to use our God-given brains and skills to better mankind. The research I support involves a cell in a petri dish that will produce cells to cure a disease like diabetes and that is called therapeutic cloning. My son and the millions of children like him, need the research and the results that will come from therapeutic cloning. Thank you.''

FROM LISBETH DERMODY IN MONTEREY, CA

''My son sustained a spinal cord injury 4 years ago and is now a quadriplegic; my husband developed the first symptoms of Parkinson's Disease 10 years ago and is now deteriorating and experiencing Parkinson's dementia. Stem cell therapy is our best hope that these two brilliant and productive men may expect some improvement in their lives and an alleviation of the psychological and physical suffering they endure every hour of every day. I urge defeat of the Brownback Bill; I urge support of intelligent and humane research that will help my loved ones.''

FROM HELLEN MUELLER, MODESTO, CA

''I am a type 2 diabetic with severe neuropathy. Recently, I had surgery for thyroid cancer and have lost the use of my parathyroids. I look to science particularly the science of cloning for help in treating my ailments. Life has become difficult as I am in pain much of the time. Even normal activities are limited for me. I would like to live the years I have left relatively pain-free, diabetes free too.

My husband has terrible knees. He suffers from degenerative cartilage and arthritis as does my sister. It would be wonderful if they could be helped by SCNT [somatic cell nuclear transplantation]. My husband is still able to work; however he pays a great price in the pain that he suffers. Only by using a large amount of pain killers is he able to get thru a work day. My sister is very incapacitated by her problems.

My sister's husband has had by-pass surgery which resulted in cognitive problems. Stem cell research, cloning, etc seem to be the only hope on the horizon.

In 1990 I lost a husband to ALS [Amyotropic Lateral Sclerosis or Lou Gehrig's disease]. Today I understand scientists are very hopeful that stem cell research will lead to a cure for this killer. He was gone one year after diagnosis. I was left without a husband, my son without a father. What a miracle it would be if this could be avoided for other people.''

SUMMARY OF HUMAN SUBJECT REGULATIONS AS INCORPORATED INTO SPECTER-FEINSTEIN LEGISLATION

GENERAL RESEARCH PROVISIONS

Types of Research Covered

Would cover ALL research involving somatic cell nuclear transplantation, regardless of who performs it or whether it is funded by the government.

Assurance and Certification Procedure

The institution conducting the research must: Submit a statement of ''written assurance'' outlining the procedures by which the institution will abide by federal regulations, and certify that the research has been reviewed and approved by an institutional review board (IRB) (see below for definition of IRB).

Penalities

HHS may require that the project be terminated or suspended if it finds an institution has failed to comply with federal regulations

HHS may also require the institution to pay a civil penalty of up to $250,000.

DEFINITIONS AND REQUIREMENTS

Institutional Review Board (IRB)

Research institutions must establish (or hire outside) Institutional Review Boards to

review and approve research involving somatic cell nuclear transplantation. Each IRB must have at least five members.

In order to approve this research involving human subjects, the IRB must determine that all of the following requirements are satisfied: Risks to subjects are minimized and are reasonable in relation to any anticipated benefits and importance of the knowledge expected; selection of subjects equitable; informed consent is sought and appropriately documented from each subject; when appropriate, the research plan makes adequate provision for monitoring and protecting the data collected, to ensure the safety and privacy of subjects; and when some of the subjects are likely to be vulnerable to undue influence (such as mentally disabled or disadvantaged persons), additional safeguards must be included in the study to protect the rights and welfare of these subjects.

The IRB has the authority to suspend or terminate approval of research that fails to meet these requirements, or that has been associated with unexpected serious harm to subjects.

Informed Consent

No investigator may use a human subject in research unless the investigator has obtained the legally effective informed consent of the subject.

An investigator can seek consent only under circumstances that minimize the possibility of undue influence.

No informed consent, whether oral for written, may include any language through which the subject waives his legal rights, or the investigator is released from liability for negligence.

Basic elements of informed consent: The following information must be provided to each subject: A statement that the study involves research, an explanation of the purposes of the research, the expected duration of the subject's participation, a description of the procedures to be followed, and identification of any procedures which are experimental; a description of any reasonably foreseeable risks or discomforts to the subjects; a description of any benefits to the subject or to others which may reasonably be expected from the research; a disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the subject; a statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained; for research involving more than minimal risk, an explanation as to whether the subject will be compensated, and an explanation as to whether any medical treatments are available if injury occurs and, if so, what they consist of, or where further information may be obtained; an explanation of whom to contact for answers to pertinent questions about the research and research subjects' rights, and whom to contact in the event of a research-related injury to the subject; and a statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled, and that the subject may discontinue participation at any time without penalty or loss of benefits, to which the subject is otherwise entitled.

Additional Protections for Pregnant Women and Fetuses

General Restrictions: Research on fetuses and pregnant women cannot be undertaken, unless: Appropriate studies on animals and nonpregnant individuals have been completed; the risk to the fetus is caused solely by interventions or procedures that hold out the prospect of direct benefit for the woman or the fetus; or, if there is no such prospect of benefit, the risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge which cannot be obtained by any other means; any risk is the least possible for achieving the objectives of the research; if the research holds out the prospect of direct benefit to the pregnant woman, the prospect of a direct benefit both to the pregnant woman and the fetus, or no prospect of benefit for the woman nor the fetus when risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge that cannot be obtained by any other means, only the mother's consent is needed; if the research holds out the prospect of direct benefit solely to the fetus then the consent of both the pregnant woman and the father must be obtained, except that the father's consent need not be obtained if he is unable to consent because of unavailability, incompetence, or temporary incapacity or the pregnancy resulted from rape or incest; individuals engaged in the activity will have no part in (i) any decisions as to the timing, method, and procedures used to terminate the pregnancy, and (ii) determining the viability of the fetus at the termination of the pregnancy; and no inducements, monetary or otherwise, may be offered to terminate pregnancy for purposes of the activity.

STATEMENTS ON SUBMITTED RESOLUTIONS

SENATE RESOLUTION 258—URGING SAUDI ARABIA TO DISSOLVE ITS ''MARTYRS'' FUND AND TO REFUSE TO SUPPORT TERRORISM IN ANY WAY

Mr. SMITH of New Hampshire (for himself and Mr. NELSON of Nebraska) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 258

Whereas in the days following the September 11, 2001 attacks on the United States, the United States Government, its allies, and friends quickly agreed that identifying and severing sources of finance to entities which support and fund terrorist activities is critical to combating terrorism and preventing future terrorist acts against United States citizens and interests;

Whereas, since the September 11, 2001 terrorist attacks on the United States, the Kingdom of Saudi Arabia has publicly condemned terrorism in all its shapes and forms;

Whereas on February 5, 2002, the Embassy of Saudi Arabia released a statement—

(1) expressing the commitment of the Kingdom of Saudi Arabia to preventing charitable and humanitarian organizations and the funds they raise from ''being used for any other purpose''; and

(2) confirming ''that it will take every measure possible to prevent the use of these charitable efforts for any unlawful activities, in accordance with international resolutions in this regard'';

Whereas a press release on the Embassy of Saudi Arabia website states that ''the Saudi Committee for Support of Al-Quds (Jerusalem) Intifada has so far distributed about SR 123.75 million {U.S. $33 million}. Minister of the Interior Prince Nayef bin Abdulaziz, who is the Committee's Chairman, expressed his appreciation to the Saudi people for their response in supporting their Palestinian brothers in Israel's blatant aggression against them. Financial aid has been disbursed to the families . . . of 358 martyrs, as well as 8,000 wounded, 1,000 handicapped, and another 102 Palestinians who have received treatment in the Kingdom's hospital.'';

Whereas an August 20, 2001, press release on the Embassy of Saudi Arabia website states that the Saudi Government, in 2000, in support of the Al-Intifada (uprising), ''. . . offered financial support to one thousand families of Palestinian martyrs and those who suffered injuries in the cause'';

Whereas an April 9, 2002 UPI.COM article states that ''Saudi Arabia makes no distinction in compensation to families of suicide bombers and those killed by Israeli military action''; and

Whereas martyrs' funds, or any other source of funding, explicitly designed to fund acts of violence, or to compensate the family members of those individuals who engage in violent activities, are recognized as acts to entice and recruit individuals to undertake suicide bombings and other terrorist acts, and reinforces such violence as a legitimate method to air and to forward political grievances and nationalistic goals: Now, therefore, be it

Resolved, That it is the sense of the Senate that the Kingdom of Saudi Arabia should—

(1) immediately dissolve its ''martyrs'' fund;

(2) fulfill its stated commitment to combating violence and terrorism; and

(3) eliminate the funding of terrorism in every way possible.

Mr. SMITH of New Hampshire. Madam President, the legislation I am introducing today addresses an important and serious subject in the ongoing war on terrorism. The attention of the world has been focused on the conflict in the Middle East between Israelis and Palestinians, and on the devastation wrought by suicide bombers. We are not focusing enough attention, however, on external factors which have significantly contributed to the escalated violence in the Middle East, and on how we can use our vast economic and diplomatic powers to effect changes, to end subsidies to terrorists, and to bring about peace in the Middle East.

A good first step would be to cut off U.S. indirect aid to Yassir Arafat and the Palestinian Authority as a sign of our displeasure with their jihad, and with their wanton destruction on innocent Israeli civilians. Our aid legitimizes their terrorist activity and has not contributed to a lessening of the violence, but rather, the opposite. It sends very conflicted signals when we are fighting a global war on terrorism in the wake of 9/11, yet subsidizing Arafat, a known terrorist.

We must also cut off aid because our limited taxdollars for foreign aid should only be directed towards the desperately needy. Arafat is known to have stashed away billions of dollars he earns from taxing Palestinians working in other Arab countries, and none of that vast personal wealth is being used to benefit his Palestinian constituency. I believe Arafat prefers that they live in deplorable conditions because misery contributes to strife, if Palestinians are deprived and impoverished, it is easier to entice then to throw stones, or to sacrifice themselves by becoming human bombs.