

Several people who are not here have been very much involved in this issue, including Senator WYDEN of Oregon and a handful of other former Governors who serve now in the Senate—among them, Senator VOINOVICH of Ohio and Senator BOB GRAHAM. A couple of former mayors who serve here as well worked on this issue, and this includes the former mayor from California, Senator FEINSTEIN, and a former mayor from a little town called Gillette, WY, a fellow named ENZI, who have all been involved in this, along with Senator BYRON DORGAN of North Dakota.

We shared goals and we shared a number of the same objectives. None of us were interested in taxing access to the Internet. None of us wanted to inhibit its growth. But at the same time, none of us were interested in undercutting the ability of State and local governments to raise revenues to fund their own programs.

As a former Governor, as a former chairman of the National Governors Association, as are Senators ALEXANDER and VOINOVICH, I never liked it very much when the Federal Government would tell my State or any other State what to do but not to provide the revenue, the wherewithal to do that thing that was being ordered.

I never liked it when the Federal Government undercut my State or any State's ability to raise revenues to pay for programs that we deemed necessary and not provide the revenues to offset that loss.

I think in the end we have come out with a compromise that is not everything that those of us who are former Governors and mayors who worked with Senator ALEXANDER and myself wanted, and certainly all that was sought by Senators ALLEN and WYDEN. Having said that, I believe we have ended up in a very good place. Senator MCCAIN is not here today, at least in the Chamber at this moment, and I thank him for bringing us to common ground on this issue.

We have passed a compromise that I think sends a good message, that may have applicability to other issues. And there are a whole lot of issues that we have considered this year, certainly that we will be considering next year, where we generally share the same goals, but for some reason we do not—and maybe it is the lack of trust, the lack of interpersonal relationships to be able to work through our differences to get fairly close to, at the end, the goals that we share, to legislation that reflects the goals that we share. In this case we did it. And for all who have had a hand in fashioning what I think is a most acceptable compromise and a good ending, I just want to say well done.

The Commerce Committee will now move to new leadership beginning in January. I presume the leader, the chairman, will be Senator STEVENS, and the ranking Democrat will be Senator INOUE. They have as close a per-

sonal bond as I think any two Senators across the aisle who serve in the Senate. I think that bodes well as they and their committee look down the road to what further changes we need to make, again, to deny the ability to have access to the Internet, make sure we don't inhibit the growth of the Internet and all it can do for our economy, and finally making sure we are fair to State and local governments. It is not an easy thing to do, but in this instance I think we have done quite well for State and local governments, and industry hasn't fared too badly either. With that having been said, I yield the floor.

The PRESIDING OFFICER. The Senator from Illinois is recognized.

Mr. DURBIN. I ask unanimous consent to speak as if in morning business.

The PRESIDING OFFICER. The Senator should advise that we are in morning business.

Mr. DURBIN. I thank the Chair.

GLOBAL AIDS FUNDING

Mr. DURBIN. Mr. President, last Saturday, just 7 days ago, I was in Cape Town, South Africa, for a conference sponsored by the Chicago Council on Foreign Relations. With me were my colleagues, Senator SUSAN COLLINS, Congresswoman BARBARA LEE from the State of California, and we had an opportunity to visit an AIDS clinic, a clinic that is funded by the Global Fund. It is an area known as West Cape, and it is an extremely poor area. Many people are infected.

South Africa may be the most devastated country on that continent when it comes to the disease of AIDS. To think that 25 percent of the men and women in the South African military are infected with AIDS, to think that most of the major employers in companies find that at least one-fourth of their workforce is infected, is an indication of the reach of this terrible disease.

We went to this clinic because something historic was happening there. Because of the Global Fund and because of contributions from countries such as the United States, for the first time we are providing AIDS pills, ARV therapies to people who are infected. What that means is that for some of the poorest people on Earth, they will receive a few pills which, if they take them dutifully each day, they can live. And if they do not receive the pills, or don't take them, they will surely die. Think about that moment when they first heard of the possibility that they might be on the list to be saved with these drugs.

So we went to this clinic where they are measuring the rate of the infection of these poor people, and if they are far enough along with their infection, where their life is threatened, they qualify. They waited on benches in a crowded room silently for hours, literally for hours for a chance to be examined in the hopes that they would receive these pills.

Outside this clinic was a little dirt playground, just the most basic thing, filled with children. The kids were playing with everything they could find, stones and sticks and old rubber tires, just trying to while away the time together while they waited for their parents who were listening and waiting to be counseled to find out if they would be allowed to live or die. The children had no idea what was going on. They are just little kids. Some of them may be HIV-positive, too. But we walked by this playground, and the kids looked up at this delegation in their suits and ties walking through, and they looked at us and they waved, and we waved back, and I thought: I am going to go over and say hi to the kids.

I no sooner took two steps toward these children when they left the playground, 30 or 40 of them, and gathered around me hugging me. And then, as they were hugging me, these little toddlers, these kids, spontaneously started singing the African national anthem. You could not script that. It sounds like a scene from a movie. It is real life. It happened a week ago. And in this clinic in West Cape, a miracle is occurring. The United States, because of its caring and compassion, has reached out through the Global Fund to give these children the chance that they will grow up with a parent. And for many children in Africa there is no chance—12 million AIDS orphans on that continent, more infections on the continent of Africa than any other place on Earth.

We know how bad it is. We know it is getting worse. Take any minute that I speak in the Chamber, and in that 1-minute period of time, across the world 6 people will die from AIDS, and 10 more will become infected. So no matter what we are doing, as good as it is, we are approaching this with steady steps going after this disease and epidemic while it races away from us infecting more people than we can possibly save with the resources we are putting into it. Stephen Lewis is a special envoy for the United Nations for HIV/AIDS in Africa, and he said, "Never in human history have so many died for so little reason." Then he went on to say, speaking to me and to all of us, "You have a chance to alter the course of that history. Can there be any task more noble?" This is the moral challenge of our generation.

Mr. President, 60 years from now, 100 years from now, people will look back and judge us by what we have done with the global AIDS epidemic. Questions have been asked for almost six decades about what the world did in response to the Holocaust. We will be asked by future generations: What did you do about this epidemic reaching Holocaust proportions and beyond? In 2002, the countries that came together to form the Global Fund said we are going to fight AIDS and malaria and tuberculosis, and all the countries committed some \$3 billion to almost

300 programs to go after those diseases in nearly 130 different countries. Since the beginning, the United States has been involved and we have said for every dollar that we contribute, we want \$2 from the rest of the world.

In some years we have fallen short. In some years the rest of the world has fallen short. But we need to continue to make a contribution.

Now, what troubles me is this: Last year, as a nation, we contributed \$547 million to the Global Fund. This year we will contribute less. The disease is not under control. The disease is growing faster than our contributions toward ending it. This year if we are lucky we will contribute \$438 million—far short of last year's contribution. And the Global Fund tells us that they need \$551 million from the United States. They will find matching funds 2 to 1 from around the world, and they have plenty of projects just like the one I described to you.

In that West Cape clinic right now 550 victims of HIV/AIDS are receiving the therapy that keeps them alive every day—550.

The universe of those who are eligible is 4,000, to give you an idea. As we contribute to the Global Fund, we are scratching the surface of what this disease is doing to the world around us. As we reduce our contributions to this Global Fund, it limits our ability to save people.

I have spoken, of course, about HIV/AIDS. The challenge of malaria is just as alarming. The Global Fund has been financing the treatment of over 30 million people for over 5 years, a huge increase from the 10,000 people currently treated with new drugs. They need money to do it. People die from malaria as they do from so many other things.

In addition, we have to understand that the fight against tuberculosis is one we can win but one we must assume our responsibility for.

We need to make certain when the supplemental appropriations bills come before Congress, as they are likely to in the next several months, that we revisit our contribution to the Global Fund, not just for those kids in Africa but for ourselves. That life lost in Africa may seem so distant and removed from our own lives but in some ways we are connected. We are all God's children. We all believe this Creator put us on Earth for a purpose, and that purpose is to care for the less fortunate of our brethren.

At the International AIDS Conference in Bangkok last July, Nelson Mandela, who is probably one of the greatest living people, declared:

History will surely judge us harshly if we do not respond with all the energy and resources that we can bring to bear in the fight against HIV/AIDS.

Nelson Mandela is right. History will stand in judgment of the bill we pass today, the supplemental bill that will come, and the resolve of this Congress and this administration to make sure

that we continue to lead the world in this historic humanitarian effort.

I yield the floor.

The PRESIDING OFFICER. The distinguished Senator from Tennessee is recognized.

IDEA CONFERENCE REPORT RATIFICATION

Mr. ALEXANDER. Mr. President, I say a few words about the legislation passed last night that we call IDEA, to help children with disabilities.

The Individuals with Disabilities Education Act (IDEA) which we have enacted is critical for the approximately 6.5 million children with special needs across the country, 125,000 of which I've in my home state of Tennessee.

The bill makes a number of substantial reforms. I would like to highlight two that I think are particularly important:

No. 1, the bill clarifies the definition of a highly qualified teacher, and

No. 2, the bill also creates a seamless early childhood program for children from birth until school age.

Research has shown that students taught by effective teachers greatly outperform those taught by ineffective teachers. That's why it is a priority for me to ensure that students have a highly qualified teacher in their classroom, especially special education students.

I am grateful language was included to clarify for schools what the definition of a highly qualified teacher means. This is particularly important for the 6,037 Certified Special Education teachers employed by Tennessee's public schools, especially for middle and high school teachers.

After the passage of No Child Left Behind, many middle and high school special ed teachers were concerned that they would have to become highly qualified in every subject—reading, math, history, science. The language in the Conference Report allows states to develop a Highly Objective Uniform State System of Evaluation, HOUSSSE, for special ed teachers teaching multiple core subjects. Teachers can also be deemed highly qualified if they meet the educational requirements for each subject under NCLB test or degree. This important flexibility gives states more options to determine what makes a special education highly qualified so that we can keep veteran teachers in these classrooms and enable new teachers to become highly qualified and dedicate their careers to these special children.

I am a strong supporter of early intervention to help children with special needs before they reach school age, so that when they enter school they can succeed. I'm pleased by the changes to the Part C early intervention program included in the conference report. This program has enabled millions of infants and toddlers with disabilities to enter school with

the skills they need to learn, grow and prosper. The bill before us today makes two needed changes to Part C.

First, it allows States to give parents the option of either (a) keeping a child in the Part C program until reaching school age, or (b) having their child transferred to the pre-school program at age three. This provides a comprehensive and fluid system of services for special needs children from birth to school age.

Second, it provides incentive grants to States that choose to give parents that option. Under the conference report, 15% of appropriated funds in excess of \$460 million for Part C will be dedicated to these incentive grants.

In Tennessee, about 5,730 children participate in the Part C program. One of these children is Kaylie, a little girl who was born with Down Syndrome. The hospital referred her family to the Kiwanis Center for Child Development for services as part of the Part C early childhood program. At the Kiwanis Center, Kaylie receives physical, occupational, and speech therapy—there is even a therapeutic pool. She is provided with child care where she interacts with other children her age. All these services are provided through various federal and state programs, but the Part C program was the critical link that coordinated these programs so she can receive them all at one site. Kaylie was only 8 months old when I told this story at our Senate HELP Committee mark-up of this bill; today she's about two years old. Under the current Part C system, when Kaylie turns 3 she will no longer be able to continue to receive this seamless system of services at Kiwanis. She will have to attend the half-day pre-school program at the local elementary school. That date is fast approaching. But the changes included in this Conference Report, that we are about to ratify, will allow the state of Tennessee to give Kaylie's family the option to stay in the Part C program and continue receiving services at the Kiwanis Center until she goes to Kindergarten. Any fees that Kaylie's family currently pays they will continue to pay. If Kaylie's family would like her to attend the local public school for pre-school they still will have the opportunity to send her. We ought to give her parents that choice, and I'm grateful we're acting in time to make that possible.

This is one more example of the Senate working in a bipartisan way.

This is a complex bill. It affected 6.5 million children with special needs across this country, and 125,000 of them were in Tennessee.

Again, I want to focus on two aspects of it, especially how it affects teachers and children and families all across the country.

First, it clarifies the definition of a highly qualified teacher. That is important because of the No Child Left Behind Act.

Second, it allows children with special needs who are receiving services in