

The University of Pittsburgh's Center for Rural Health Practices released a report this week which highlights specific rural health disparity issues. The report indicated that death rates for children and young adults are highest in the most rural counties. Nationally and within each region, death rates from unintentional injuries increases greatly as counties become less urban. And death rates for motor vehicle-related injuries in most rural counties are over twice as high as the rates in central counties of large metro areas. My home State of South Dakota ranks 8th with two other States for having the worst motor vehicle death rate in the Nation.

In addition, adolescents living in the most rural counties are most likely to smoke. For example, in 1999 for the United States as a whole, 19 percent of adolescents in the most rural counties smoked compared with 11 percent in metro counties. This disparity also holds true for adults who smoke. Adults in rural areas are more likely to consume alcohol than those living in other areas, and both men and women in rural areas have higher rates of self-reported obesity than men and women in other areas.

Minorities in rural areas also face additional health disparities. Diabetes among Native Americans is more than twice that of the general population, and heart disease and cancer are the leading causes of death among this population. Infant mortality among this population is 1.7 times higher than among non-Hispanic whites and the sudden infant death syndrome or SIDS rate among this minority group is the highest of any population group in the nation.

It is important that we find ways to address rural public health disparities. Access to health care providers is a critical component of the solution and that is why I have long supported rural provider payment equity. Payment equity ensures that the doors stay open at our local hospitals and physicians offices. I feel that Congress needs to continue to address this important issue and make a commitment to rural residents across America that it will support initiatives to remedy this problem.

While payment equity is a critical component in solving this disparity issue, it is only part of the overall solution. Access problems continue to be a distinct challenge in rural communities, due largely to declining rates of health care workers in these areas. In 1998, there were six times as many general pediatricians per 100,000 in central counties of large metro areas as in the most rural counties and five times as many general internists.

One of the ways to address this problem is through enhanced funding for important Federal programs that promote the recruitment and retention of health care workers. I have recently sent letters to the leadership on the Senate Labor, Health and Human Serv-

ices, Education Appropriations Subcommittee, requesting a \$63 million dollar increase for Title VIII nurse education programs created under the Nurse Reinvestment Act. I have also asked the committee to restore the President's proposed drastic cuts of almost \$200 million for the Title VII health professions programs, by providing \$308 million for these programs.

In order to further address rural health disparities, we need to strengthen efforts towards establishing a 21st century health care system that utilizes information technology to allow health care professionals across rural America to share their knowledge, expertise and resources. I have worked with my colleagues in the Senate to secure funding in recent years to allow just that, such as the wonderful health information systems project through the Community HealthCare Association of South Dakota, and the nurse distance learning project through the University of South Dakota and the Good Samaritan Society. I encourage my colleagues to continue to build on these types of rural specific projects nationwide so that we may see this dream of a modern 21st century health care system become a reality.

In order to address the Native American health disparities problems, in addition to improving access to direct health care services, it is important that we obtain comprehensive data on key health risk factors impacting this population. In South Dakota, the Northern Plains Tribal Epidemiology Center in Rapid City is providing information to tribes and working with tribes to help access health data through good assessment tools, which can be used to develop interventions and improve the health in Native American communities across the State. This is an effective model for approaching a critical minority health problem and the Center combines epidemiology, research, and public health practice to develop interventions that can be disseminated to the tribal communities.

Often our best solutions come from the local experts. I look forward to working with public health experts in both South Dakota, as well as the Nation at large, to address these shortfalls in rural health. I believe that the information we gain through these discussions will provide Congress with a broader scope of knowledge, thus allowing us to better meet the needs of those who fall into this health disparity category.●

#### JOHN THORNTON

● Mr. ALEXANDER. Mr. President, I rise today to tell my colleagues about a generous person, who I am proud to call my friend and a Tennessean.

His name is John "Thunder" Thornton. You may have read about his generosity last week in USA Today.

In 1998, John went to the Final Four in San Antonio. While there, he had a

frightening experience—he has a heart attack in the back of a taxi cab. His cab driver, Ceasar Hernandez, quickly drove him to the hospital and then made sure his teenage children, Dori and Johnny, got back to the hotel where family friends could take care of them.

In the USA Today article, John said, "Caesar saved my life, and he comforted my kids at a time when they needed that. I wanted to do something for him."

So to show his appreciation 6 years ago, John bought the stranger who saved his life a 1998 Cadillac sedan. The new car allowed Mr. Hernandez to start a cab company in his hometown of Victoria, TX instead of commuting to San Antonio to drive a taxi.

John's gratefulness and graciousness doesn't end there. He returned to San Antonio last Friday for the Final Four. While there, he took Mr. Hernandez to the games and dinner and also had a surprise in store. Anyone who knows John knows he's an avid fan of the University of Tennessee. Ten years ago, he bought an orange and white stretch limo that he's driven to UT games across the country. Now Mr. Hernandez's taxi cab fleet includes that limousine.

This isn't the first time something like this has happened. Most people in Tennessee know about John's gift to the University of Tennessee in Knoxville to establish the Thornton Athletic Student Life Center. But most people don't know that 10 years ago, when John sold his business in Georgia, he paid off the mortgages of every employee that worked for him.

As I said earlier, I am proud to call him my friend, and I am proud to call him a Tennessean. His father, Lloyd, and my father carpooled to work at the Aluminum Company of America in Alcoa when John and I were growing up in Maryville.

The Lloyd L. Thornton stadium at Maryville College is named in honor of him—a tribute by his son.

On a personal note, I was proud to introduce John's daughter Dori, our Tennessee Cherry Blossom princess, at an event last week. She is a young Washington professional doing a fantastic job in political event planning and fundraising for Hammond and Associates. Like her father, Dori has an incredible energy and commitment to service. She serves as a patient care volunteer at the Children's National Medical Center and the Gilda's Club of Greater Washington and is a Junior Achievement kindergarten teacher at Douglas MacArthur Elementary School. She is a lovely young woman and a true Tennessee volunteer.

Mr. President, thank you for allowing me to tell you and our Senate colleagues about a man who has found success and has set an example for all of us in what he does for others with that success.●

## BOB EDWARDS AND NATIONAL PUBLIC RADIO

• Mr. HARKIN. Mr. President, the management of National Public Radio has announced that Bob Edwards, the host of "Morning Edition" for a quarter century, will be removed from the show at the end of this month. NPR executive vice president Ken Stern explained that getting rid of Edwards was part of "a natural evolution." He says that it was "a programming decision about the right sound."

"Natural evolution?" The "right sound?" I have no idea what these words mean. In fact, I have yet to talk to anyone who knows what those words mean.

If NPR's management wants to remove a star broadcaster, enormously popular all across America, you would think they would offer a clear, coherent explanation. But, no, the best we are offered is that they want a different "sound."

Well, this is not very sound on the part of NPR management. Think about it: Bob Edwards has been the host of "Morning Edition" for 25 years. He has won every radio broadcasting award imaginable, including the 1999 Peabody Award. He has built "Morning Edition" into the No. 1 morning show on radio in the United States, with almost 13 million loyal listeners. He has played a major role in doubling NPR's audience over the last 10 years.

Now, I didn't go to Harvard Business School. I don't have the business and management credentials of the top executives at NPR. But I have enough sense to heed the oldest and wisest rule of management: If it ain't broke, don't fix it.

If you are fortunate to have the best in the business, a broadcaster who is the heart and soul of the No. 1 morning show on radio, then, for heaven's sake, you don't remove him. You don't dump him. You raise his pay.

Characteristically, Bob Edwards was gracious and restrained. He said, "I would love to have stayed with 'Morning Edition.' But it is not my candy store."

No, "Morning Edition" is not Bob Edwards' candy store. Nor is National Public Radio the candy store of Mr. Stern, Jay Kernis, Kevin Klose, and the other NPR executives apparently responsible for this decision.

I would remind them that NPR's middle name is "Public." National Public Radio and its affiliate stations depend on taxpayer dollars and contributions from ordinary Americans. NPR depends on the public's support. And I have yet to talk to one person, one member of Congress, one listener of public radio who supports this decision.

Americans are speaking up and expressing their unhappiness. NPR has been deluged with telephone calls and e-mails. And I certainly encourage people to call their local NPR station or go to the NPR website at [www.npr.org](http://www.npr.org), where you can register your dis-

satisfaction. Urge NPR's executives to reconsider this unwise decision. Urge them to listen to their listeners.

Let me be clear, I do not advocate or support any kind of boycott of NPR. It would be a misguided and counterproductive for people to withhold contributions to their local NPR station. After all, National Public Radio is a national treasure. It is the gold standard of radio news and journalism. And we should do nothing that undermines it.

But we have a right to speak up. And we need to speak up. So by all means, send an e-mail to NPR. The address of the ombudsman at NPR is simple enough: [ombudsman@npr.org](mailto:ombudsman@npr.org). In addition, call your local NPR affiliate. Urge them to request NPR to reconsider its decision to remove Bob Edwards from "Morning Edition." And if NPR digs in its heels, urge your local affiliate to discontinue "Morning Edition" and find alternative programming for the morning time slot.

Obviously, I am personally a big fan of Bob Edwards. I listen to him virtually every morning, and have for as long as I can remember. He is a straight-shooter, smart, erudite, witty, and calm. He doesn't shout or rant. In other words, he adds class to radio news reporting and interviews.

So I urge executives at National Public Radio to reconsider their decision to remove Bob Edwards from "Morning Edition." And I urge Americans who share my respect for Bob Edwards to make their voices heard.●

## IN MEMORIAM OF NORMAN A. LeBEL

• Ms. COLLINS. Mr. President, I would like to take a moment to reflect on the life of Professor Norman A. LeBel, who passed away on December 21, 2003. Professor LeBel's life was dedicated to organic chemistry research where he was an outstanding example to his colleagues and an inspiration to his students.

Professor LeBel was born in Augusta, Maine on March 22, 1931, and received an A.B. degree in chemistry from Bowdoin College in 1952. Professor LeBel and his wife Connie, also from Maine, returned often to the States.

Professor LeBel obtained a Ph.D. in organic chemistry from the Massachusetts Institute of Technology in 1957. He then moved to Detroit, MI, where he began a 40-year career at Wayne State University in the Department of Chemistry, during which time he directed the research of 32 Ph.D. students. Professor LeBel made numerous contributions to organic chemistry during his long career, the most notable being the development of the chemical transformation commonly called the LeBel Reaction. He retired in 1996, after serving Wayne State University as chairman of the chemistry department; as chief of staff for the office of the provost; and as interim dean of the College of Liberal Arts.

Professor LeBel served the American Chemical Society (ACS) in a number of roles, starting as chairman of the Awards Committee of the Detroit Section (1961-1962), then secretary-treasurer of the Division of Organic Chemistry (1965-1969). He was a division councilor for 20 years, starting in 1970, and served on the Committees on Publications, Nominations & Elections, and Divisional Activities. Professor LeBel was also general chairman of the international chemistry meeting known as Pacificchem 2000.

Among his many awards, Professor LeBel received the Wayne State University President's Award for Excellence in Teaching in 1981, the ACS Organic Chemistry Division's Paul G. Gassman Distinguished Service Award in 1996, and the ACS Santa Clara Valley Section's Shirley B. Radding Award in 2001.

In conclusion, I want to express my condolences to Professor LeBel's family and former students. His contributions to the field of organic chemistry are only equaled by his devotion to higher education.●

## ASSISTED LIVING

• Mr. BREAUX. Mr. President, I rise today to honor the Louisiana Assisted Living Association, LALA, which will be celebrating "Assisted Living Day" open April 14, 2004 in the State capitol. Both in my home State and in States across the Nation, disabled individuals and older Americans are voicing their demand for a wide range of long-term services. Assisted living represents a significant piece of that continuum of care.

Decades ago, those in need of long-term care had limited options—family caregivers, skilled nursing homes or institutional care. In many cases, family caregivers cannot provide the proper level of care for their loved one for a variety of reasons. In other instances, the person does not require the high level, around-the-clock care of a skilled nursing facility or institution. Now, many disabled persons and older Americans with functional limitations and/or cognitive impairments are finding the assistance they need and desire in assisted living, and in other home and community-based settings.

Unfortunately, our Federal financing structure has a strong institutional bias and does not reflect Americans' growing desire to be cared for in settings other than nursing homes or institutions. Public preference is not the only momentum driving this need for change—we see this direction in our courts as well. At the Federal level, the landmark Olmstead decision underscored this push toward allowing our country's elderly and disabled to live in the least restrictive settings for as long as possible. And, in my home State of Louisiana, this momentum was echoed in the Barthelemy case, in which the court strengthened the rights of people to get assistance in