

you can add one more test, bringing the total to 18 federally mandated tests over 13 years of school.

And this total does not include testing programs already in place at the State level, many of which have been thrown into disarray as States struggle to amend their existing tests to comply with the new NCLB requirements. Wisconsin currently tests students in reading in grade three through the Wisconsin Reading Comprehension Test, and in reading/language arts, math, science, and social studies in grades four, eight, and ten with the Wisconsin Knowledge and Concepts Examinations. And this is in addition to regular classroom tests and quizzes and tests given at the district level by many of the 426 school districts in my state. And then, for those students hoping to go to college, there is the pre-SAT, the SAT, the ACT, and on and on.

The Wisconsin Legislature enacted a requirement for a high school graduation test in 1997. But that test, which was to be required of all students beginning with those in the graduating class of 2003, was delayed for one year due to State budget constraints, and was subsequently delayed for an additional 2 years for that same reason, pushing the requirement from the class of 2003 to the class of 2006.

Last year, as part of the State's 2004-2005 budget, the Wisconsin Legislature repealed the State graduation test, which many parents and educators in my State opposed and vigorously fought against for many years. Now it appears that the President wants to reinstate this requirement on the students of my State—and to impose it on the other 24 States that don't currently have such a test—over the will of the Wisconsin Legislature. And with States still unsure of the actual cost of the NCLB-mandated testing and little in the way of Federal funds to develop and implement it, another Federal testing requirement could bend the already dire budget situations in many States and school districts to the breaking point.

According to a new report from the Center on Education Policy, CEP, 20 States now require high school exit exams, and another five will require such tests by 2009. I support the right of State legislatures and local school districts to determine the frequency with which students are tested, including whether to require a high school exit exam. When I was a member of the Wisconsin legislature, I supported legislation that created statewide tests for the students of my State. But I opposed the extra layer of federally mandated tests piled onto students and teachers with the enactment of the No Child Left Behind Act, and I will oppose any proposal for a federally mandated high school exit exam.

Students, teachers, and schools are more than a test score, and education should be a well-rounded experience that is not narrowly focused on students passing a test to help their

schools avoid being sanctioned by the Federal Government. Standardized tests measure where a particular student is at a particular day and time. These tests do not make allowances for outside factors such as test anxiety, illness, worry about a troubled home situation, or the fact that the child taking the test may not have eaten that day. To measure the performance of a school and its teachers and students on two test scores per grade does a disservice to these same students, teachers, and schools.

I will continue to monitor the effect of the No Child Left Behind Act on Wisconsin students, and I hope that the debate on this law, both in my State and nationally, will result in meaningful changes to this deeply flawed law that will ensure that each child is given the opportunity to succeed and that each school has the resources necessary to give these students that opportunity.

I ask unanimous consent to print the above-referenced editorial in the RECORD.

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

[From the Appleton Post-Crescent, Sept. 8, 2004]

TOO MANY TESTS MEAN DIMINISHED EDUCATION

A quarter-million kids in Wisconsin will spend part of this school year studying for and taking standardized tests.

In the next school year, that number will nearly double, as tests mandated by state government—pushed by the federal No Child Left Behind Act—expand to include more grade levels and more subjects.

There will be more time needed to take tests, and to prepare students to take the tests. And it's all being done to test . . . the schools.

Sure, the kids are the ones taking the tests, but ultimately it's the schools' performance that's being graded. No school wants to be deficient in its test results because, under No Child Left Behind, there may be consequences.

But with more testing on the way—and more classroom time devoted to the tests—what's going to happen to our kids' education? What won't our kids be learning because they'll be studying for more tests?

This year, third-graders have reading tests and fourth-, eighth- and 10th-graders have reading, language arts, math, science and social studies tests. Next year, those tests will remain, but third-graders will add a math test and fifth-, sixth- and seventh-graders will have reading and math tests.

It can be argued that standardized tests show our children are learning. But what are they learning? How to pass one particular test, which tests one particular subject and is geared toward one particular style of learning?

It also can be argued that schools must be accountable and standardized tests are the best way—if flawed—to ensure accountability. But, the more testing schools must do, the more time is taken from education that doesn't involve passing a test.

And the more testing schools have to do—in the name of no child being left behind—the greater the chance that your child could be left with a less complete education.

RANDY JENSEN: NATIONAL SECONDARY PRINCIPAL OF THE YEAR

Mr. CRAPO. Mr. President, I am pleased by the education received by children in my home State of Idaho. Our teachers are caring, administrators are dedicated, and our schools are effective. The preparation for life and for further learning that I received in Idaho classrooms during my youth has served me well throughout the years.

Today, I am especially pleased to honor Randy Jensen, the Principal of William Thomas Middle School in American Falls, ID, who has been selected as the National Secondary Principal of the Year. For nearly 20 years, Mr. Jensen has worked to make William Thomas a welcoming and supportive environment for students and staff. His commitment to communication, teamwork and proactive problem solving is well recognized by parents and members of the community, and has now been recognized by his colleagues at the national level.

Mr. Jensen correctly states that middle school is "a tumultuous time in the lives of young people, so those of us who know and love them must be their advocates." Mr. Jensen has been just that: an effective advocate for Idaho students. It is altogether fitting that he should be recognized and honored. So today, I offer my congratulations and best wishes to Randy Jensen, National Secondary Principal of the Year.

(At the request of Mr. DASCHLE, the following statement was ordered to be printed in the RECORD.)

GLOBAL HEALTH AND PROTECTION AGAINST BIOTERROR ATTACKS

• Mr. AKAKA. Mr. President, I rise today to express my concern that we need to do much more and do it much sooner to address the threat posed by Avian influenza and other infectious diseases.

The Avian influenza outbreaks that occurred in late June 2004 indicate that the virus is becoming more pathogenic and more widespread according to World Health Organization, WHO, officials. In addition, this virus has crossed the species barrier, moving from infected chickens or ducks directly into humans in three documented outbreaks since 1997.

I am most troubled, however, by a warning from WHO officials that the virus may acquire the ability to spread easily from human to human, and thus, trigger a global influenza pandemic. According to the Centers for Disease Control and Prevention, CDC, an influenza pandemic could cause an estimated 89,000 to 207,000 deaths, 314,000 to 733,000 hospitalizations, and cost from \$71-\$167 billion in the United States alone. We cannot afford to take this threat lightly.

The so-called bird flu is deadly to humans. It killed 24 out of 35 people who

contracted it from chickens in Thailand and Vietnam earlier this year. In July an additional three were killed in Vietnam. This fatality rate is in the same range as the Ebola virus which is considered one of the most virulent viral diseases known to man.

Lack of effective treatment options for Avian flu contribute to its lethality. Creating an effective vaccine for the Avian influenza virus is extremely difficult. The virus is so deadly that a vaccine cannot easily be grown in eggs, the usual method of production. Other vaccine production methods are being studied, but the required extensive safety tests for a new vaccine mean that large scale vaccine distribution is not feasible in the near term.

Equally disturbing is that only one drug is currently believed effective to treat Avian flu, an antiviral medicine called Tamiflu which helps only if taken within one to two days of developing symptoms of the disease.

The WHO recently decided Tamiflu should be included in regional stockpiles to be distributed at the first sign of a new influenza virus spreading among humans. Unfortunately, if a pandemic of Avian flu were to occur now, the manufacturer of Tamiflu could not produce enough of the drug to meet the huge demand that would occur, and there is no generic substitute.

In light of these very limited treatment options, we should heed the WHO's warning and take aggressive steps to prevent a pandemic from occurring while at the same time increasing our preparedness to respond to all public health emergencies by developing a global defense system against the outbreak of diseases, including those resulting from terrorist attacks.

On July 31, 2003, I introduced S. Res. 208 to address this concern. The resolution seeks to improve American defenses against the spread of infectious diseases by calling for improvements in global disease surveillance capabilities because the early warning of a disease outbreak is key to its identification, the quick application of countermeasures, and the development a cure.

The recent Presidential Directive 10, "Biodefense for the 21st Century," observes that many bioterror attacks could initially mimic naturally occurring diseases and potentially delay recognition of an attack. This is another important reason why I believe that the United States must strengthen its ability to detect diseases before they cross our borders. To pursue this initiative, I along with Senators BINGAMAN, DODD, DURBIN, FEINSTEIN, INOUE, LEAHY, LEVIN, LIEBERMAN, MURRAY, and SARBANES sent a letter to President Bush urging his support for global health issues at the 2004 Group of Eight, G-8, Summit. Our letter underscored the need for better disease surveillance and reporting systems which are inclusive of all public health emergencies of international concern.

I am pleased that the G-8 committed to take steps to expand and initiate new biosurveillance capabilities to detect bioterror against humans, animals, and crops; improve bioterrorism prevention and response capabilities; increase protection of the global food supply; and respond to, investigate, and mitigate the effects of alleged uses of biological weapons or suspicious outbreaks of disease.

The administration followed the G-8 summit with the August release an updated draft of the 1978 Pandemic Influenza Response and Preparedness Plan for 60 days of public comment. This plan outlines the administration's proposed national strategy for preparing and responding to an influenza pandemic. Developing a strategy is good and the administration is to be commended for its concern, but far better would be committing more resources now to programs that have already been identified as critical to our preparedness.

For example, the administration's fiscal year 2005 budget request, which cuts public health preparedness for State and local governments by more than \$105 million and hospital preparedness funding at the Health Resources and Services Administration by \$39 million, seriously calls into question the administration's commitment to ensuring that U.S. citizens are protected from bioterrorist events and other public health emergencies.

I commend the President and the G-8 for expressing support for global health issues, but words and plans are not enough. We need action and we need action now. We must act together to reduce the grave threat that biological weapons and naturally occurring infectious diseases pose to the safety and security of the world.

Adoption of S. 427, the Agriculture Security Assistance Act, and S. 430, the Agriculture Security Preparedness Act, which I introduced in 2003 to help protect our Nation from an agroterror attack, would be a good first step for the United States as we strive to live up to the promises made to our G-8 partners. S. 427 would assist states and communities in responding to threats to the agriculture industry by providing funding for biosecurity grants to farmers and community planning activities. S. 430 would enable better interagency coordination within the federal government as it works to plan and respond to a threat to American agriculture.

We should also ensure that the National Security Council, and the Departments of State, Homeland Security, and Health and Human Services have the funding and support they need to fully implement the commitments made at the 2004 G-8 summit. CDC's fiscal year 2005 budget request for global disease detection shows an increase of \$27.5 million over the fiscal year 2004 budget. However, this funding increase comes at the expense of other important public health initiatives. We should not be robbing Peter to pay

Paul when it comes to the health and safety of our Nation.

We must take action to increase WHO's global disease surveillance capability, including supporting their effort to revise the International Health Regulations by expanding the scope of required disease reporting to include all public health emergencies of international concern. An April 2004 Government Accountability Office, GAO, report on emerging infectious diseases, "Asian SARS Outbreak Challenged International and National Responses," GAO-04-564, noted that the response by governments in SARS-affected countries was hindered by inadequate disease surveillance systems, poor communication, ineffective leadership, insufficient public health capacity, and limited resources.

While the International Health Regulations provide the legal framework for global infectious disease control, WHO's Global Outbreak Alert and Response Network, GOARN, is the primary mechanism by which WHO mobilizes technical resources for the investigation of and response to disease outbreaks of international importance. The SARS outbreak was the first time that the GOARN network was activated on such a large scale for an international outbreak of an unknown emerging infectious disease. During the SARS outbreak, GOARN's human resources were stretched to capacity. GOARN experienced difficulty in sustaining the response to SARS over time and getting the appropriate experts out into the field.

These difficulties in responding to and containing the SARS outbreak demonstrate the urgent need to strengthen our ability to respond to global health emergencies. For example, the CDC reported that if the United States had experienced many SARS cases during the global outbreak, CDC might not have been able to make as many of their staff available to assist GOARN. In light of this, the implications of a bioterror event or an influenza pandemic are chilling. The SARS outbreak sickened 8,089 people causing 774 deaths in 2003, and an influenza pandemic is estimated by CDC to affect 10 times as many people.

CDC's fiscal year 2005 budget request for global disease detection is \$50 million. This figure is not adequate when one considers that the SARS outbreak alone cost Asian economies \$11 billion to \$18 billion and resulted in losses of 0.5 percent to 2 percent of total output. If we multiply that by 10 for an influenza pandemic, the numbers are staggering. If we act now to increase funding for these programs, we have a chance to help prevent such a tragic situation from happening. By helping the world cope with infectious disease outbreaks we not only increase global public health, but help ensure the health and safety of the American people as well.●