

and time to make long-term investments that put our country on a path to being less dependent on oil. Those are the right investments that we ought to be making. Yes, they are hard. Yes, they are difficult. Yes, they are challenging. It is not easy to come up with compromises on them when we are all from very different parts of the Nation. But let's not just sell a bill of goods to the Nation when we are hurting.

I yield the floor. I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. TESTER). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. BIDEN. Mr. President, I ask unanimous consent the order for the quorum call be rescinded.

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

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Does the Senator yield morning business time?

Mr. BIDEN. Yes, we yield back the time in morning business.

The PRESIDING OFFICER. Morning business is closed.

TOM LANTOS AND HENRY J. HYDE UNITED STATES GLOBAL LEADERSHIP AGAINST HIV/AIDS, TUBERCULOSIS, AND MALARIA RE-AUTHORIZATION ACT OF 2008

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of S. 2731, which the clerk will report.

The legislative clerk read as follows:

A bill (S. 2731) to authorize appropriations for fiscal years 2009 through 2013 to provide assistance to foreign countries to combat HIV/AIDS, tuberculosis, and malaria, and for other purposes.

Pending:

DeMint amendment No. 5077, to reduce to \$35,000,000,000 the amount authorized to be appropriated to combat HIV/AIDS, tuberculosis, and malaria in developing countries during the next 5 years.

DeMint amendment No. 5078, to limit the countries to which Federal financial assistance may be targeted under this Act.

DeMint amendment No. 5079 (to amendment No. 5078), to prevent certain uses of the Global Fund.

Mr. BIDEN. Mr. President, I see my friend from South Carolina is here. I ask unanimous consent there be no second-degree amendments in order to the DeMint amendment, No. 5077.

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

AMENDMENT NO. 5078

Mr. BIDEN. Mr. President, I am shortly going to move to table the DeMint amendment, No. 5078, relating to abortion. Senator DEMINT and I had a very brief conversation prior to this.

I ask unanimous consent there be 2 minutes equally divided for the Senator to make his position known.

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

Mr. BIDEN. I yield to my colleague from South Carolina.

Mr. DEMINT. Mr. President, the motion to table involves two amendments. It is important my colleagues understand what is involved. The current PEPFAR Program focuses on 15 countries with epidemics of AIDS and malaria. The current authorization allows them to work in 110 countries in which they are working now, but the focus has been part of making this program successful.

My amendment would limit the focus of the current PEPFAR bill on the Senate floor to the authorized countries in the first bill so the money is not spread all over the world to countries that do not need it as much as Africa and the others.

But the other amendment, and the reason this is being tabled, is it proposes that we do not allow PEPFAR funds to be used through the U.N. Global Fund for forced abortions and forced sterilization in China and other countries. The law of the land in this country is that our taxpayer dollars are not used for forced abortion. All this does is make sure the money in PEPFAR does not end up with programs like they have in China that force abortions.

I encourage my colleagues to vote no against tabling these amendments so we would be sure that PEPFAR funds are being used where and the way that they are intended to be used.

I reserve the remainder of my time.

The PRESIDING OFFICER. The Senator from Delaware is recognized.

Mr. BIDEN. The underlying amendment, first-degree amendment, which I am moving to table would limit U.S. assistance to certain countries. Right now PEPFAR is working in 120 countries, and to limit it to 15 I think is very counterproductive.

I move to table the amendment, and I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second? There is a sufficient second. The question is on agreeing to the motion.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from Massachusetts (Mr. KENNEDY), the Senator from New Jersey (Mr. LAUTENBERG), and the Senator from Illinois (Mr. OBAMA) are necessarily absent.

Mr. KYL. The following Senators are necessarily absent: the Senator from Tennessee (Mr. ALEXANDER), the Senator from Tennessee (Mr. CORKER), and the Senator from Arizona (Mr. MCCAIN).

Further, if present and voting, the Senator from Tennessee (Mr. ALEXANDER) would have voted "nay."

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 70, nays 24, as follows:

[Rollcall Vote No. 175 Leg.]

YEAS—70

Akaka	Feingold	Nelson (FL)
Baucus	Feinstein	Nelson (NE)
Bayh	Gregg	Pryor
Bennett	Hagel	Reed
Biden	Harkin	Reid
Bingaman	Hatch	Roberts
Boxer	Hutchison	Rockefeller
Brown	Inouye	Salazar
Brownback	Johnson	Sanders
Byrd	Kerry	Schumer
Cantwell	Klobuchar	Shelby
Cardin	Kohl	Snowe
Carper	Landrieu	Specter
Casey	Leahy	Stabenow
Clinton	Levin	Stevens
Cochran	Lieberman	Sununu
Coleman	Lincoln	Tester
Collins	Lugar	Voinovich
Conrad	Martinez	Warner
Dodd	McCaskill	Webb
Dole	Menendez	Wicker
Domenici	Mikulski	Whitehouse
Dorgan	Murkowski	Wyden
Durbin	Murray	

NAYS—24

Allard	Craig	Isakson
Barrasso	Crapo	Kyl
Bond	DeMint	McConnell
Bunning	Ensign	Sessions
Burr	Enzi	Smith
Chambliss	Graham	Thune
Coburn	Grassley	Vitter
Cornyn	Inhofe	Wicker

NOT VOTING—6

Alexander	Kennedy	McCain
Corker	Lautenberg	Obama

The motion was agreed to.

Mrs. BOXER. I move to reconsider the vote.

Mr. NELSON of Florida. I move to lay that motion on the table.

The motion to lay on the table was agreed to.

Mr. DURBIN. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. STABENOW. I ask unanimous consent that the order for the quorum call be rescinded.

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

21ST CENTURY MANUFACTURING STRATEGY

Ms. STABENOW. Mr. President, I rise, in light of the news today by General Motors and certainly the ongoing news from American automakers and manufacturers, to express, again, concern about the fact that we have had no 21st century manufacturing policy for the last 8 years. As other countries are rushing to invest in new innovative technology, advanced battery technology, the next generation of vehicles, as Germany has announced the great battery alliance which will invest over \$650 million in advanced lithium ion batteries; South Korea, by 2010, will have spent \$700 million on advanced batteries and developing hybrid vehicles; China has invested over \$100 million in advanced battery research and development; over the next 5 years Japan will spend about \$230 million on advanced battery research and \$278 million a year on hydrogen research for zero-emission fuel cell vehicles; in this country, our President's budget last year called for \$22 million. We have

seen no willingness to aggressively invest in a 21st century manufacturing strategy to keep jobs in America. As a result, we have seen 3.5 million manufacturing jobs lost since this administration took office in 2001.

My home State of Michigan is proud that we make things and grow things and do it well and have, in fact, created the middle class of this country. We have lost over 250,000 manufacturing jobs—in fact, going on 300,000—since this administration took office. In fact, we now have the same number of manufacturing jobs that we had in September of 1952. I won't tell how old I was then, but I wasn't very old in 1952. Now we are back to the same number of manufacturing jobs, while every other country is rushing to invest in the future.

The Senate budget resolution included, I am proud to say, a green-collar jobs initiative which I authored to invest in battery technology. I appreciate the fact that the leader has supported that effort and the chairman of the Energy and Water Committee, Senator DORGAN, has supported the effort to increase dollars for advanced battery technology research. We also included in the Energy bill last year a retooling effort of our plans to advanced manufacturing and alternative fueled vehicles. That needs to be activated and has not yet been activated.

When I look around at what is happening in Michigan now and across the country, what is happening to the middle class, being squeezed on all sides with incomes going down and every cost conceivable going up, particularly outrageously high gas prices, then I look at our manufacturers which are impacted by those gas prices as well, impacted by unfair trade practices, where other economies, other countries close their doors to American automakers to make it more difficult to sell there while they are able to sell here, where Japan manipulates their currency, as well as China, and yet we don't see an aggressive effort to create a level playing field on trade so we can export our products, not our jobs; when I see the fact that other countries are investing in new technologies and yet our industries are expected to be doing it themselves without a partnership from their Federal Government—what we have done is placed our companies in the position of competing with other countries. My colleague from Michigan, Senator LEVIN, has said that over and over again, the fact that our companies are competing with other countries today. We need to take action now to provide a 21st century manufacturing strategy that keeps jobs here.

Part of that is also health care. When we are looking at competition coming from companies in Japan, where I am told that the cost per vehicle for health care is about \$95 and here it is \$1,500, we can do something about that, to be able to support our jobs and our industries here in America and keep jobs at home.

Right now we have an opportunity I hope we will take. I hope as we move forward with an additional discussion of an emergency supplemental, as we move forward and look at other emergency actions that need to take place, we will understand we need to be activating our retooling efforts to keep advanced manufacturing, the new vehicles, here, and we need to invest in the key component, which is advanced battery technology research, to make sure when our automakers are making hybrids and plug-ins they are not buying the battery from another country.

That is what is happening today. We had, a couple years ago, an announcement from Ford Motor Company about the Ford Escape hybrid, and we were very proud of the fact they created the first hybrid SUV. That is the good news. The bad news is, they could not find a battery in the United States. The battery had to be bought in Japan. We do not want to exchange foreign dependence on oil for foreign dependence on technology. We have to act now.

I call on the administration that has now put dollars into advanced battery efforts to do more. There is more that can be done under the Department of Energy. It needs to be done as quickly as possible. We are in a race, we are in an economic race, for the next generation of technology. Whoever gets there first will be creating the jobs as well as the marketplace for the future and, I believe, creating the middle class of the future as well.

We need to make sure the plants in America are retooled so the new generation of vehicles being made are not being made overseas for Americans, but they are being made here. We need to be retooling. It is critically important. We have lost 3.5 million manufacturing jobs since this administration took office—no 21st-century manufacturing strategy, no focusing on unfair trade practices, high health care costs, innovation, investment, retooling. Now, adding insult to injury with the price of gas on top of everything else, we find our manufacturers caught on all sides right now trying to make the investments for the next generation, for the future, to be competitive, but also to deal with the costs they have as a result of lack of action in this country, in order to be able to make sure we are competitive internationally.

Again, Germany, the Great Battery Alliance; South Korea; China; Japan—all focused on the future, all partnering with their industries because they understand what it means to their economy to be able to have that technology, to be able to be the first, to be able to partner with their industries to create new jobs.

That is what we need to be doing here and now. It makes me heartsick to see the daily headlines in the newspapers in Michigan as well as in many places across the country when it should not have to happen. If we had seen the administration being willing to work with us, to partner with us on

the future, on jobs in America, we would not be where we are today.

I am very hopeful and confident our Democratic majority understands that, and that we are going to continue to do everything we can to be able to create the kind of economic climate in this country that will allow us to create good paying jobs, great advanced alternative fuel vehicles and products we will continue to be proud of, and will allow us to keep the middle class in this country.

I think that is the biggest task we have right now in a global economy: to fight for jobs and the middle class in this country. We need a change in partnership to help us get that done.

Thank you, Mr. President.

The PRESIDING OFFICER. The assistant majority leader is recognized.

Mr. DURBIN. Mr. President, I ask unanimous consent that at 2:15 p.m., Senator MENENDEZ be recognized to speak for up to 15 minutes, to be followed by Senator DOMENICI for 15 minutes, and that following Senator DOMENICI's remarks, Senator KYL be recognized to offer an amendment.

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

DARFUR

Mr. DURBIN. Mr. President, most of us are aware of the genocide in Darfur. We have read about it for years. The best estimates are that 400,000 people have died as a result of the terrible tragedy in the Sudan. Another 2 million or more have been displaced.

Just this week, the International Criminal Court has named the President of Sudan as a person to be indicted for war crimes, crimes against humanity, and genocide. It is an indication of the severity of this crisis and the fact that the world is taking note.

What we also know is that other things are happening in this world that are just as devastating, and some of them are within our grasp to change.

A few years ago, I made my first trip to Africa in an effort to see the feeding programs available for people in some of the poorest places on Earth. I also wanted to take a look at the micro-credit programs that elevate women and give them a chance to finally raise their families properly and to have a future.

But I found that no matter where I went in Africa, the same issue commanded my attention. That was the global AIDS crisis. It was a crisis which was just starting at that point, but the numbers were so alarming that you could see trends developing that would be devastating to communities and families and even countries.

At the time, it seemed there was nothing we could do. The drugs that were being developed in the United States were few and very expensive, and the notion of bringing those antiretroviral drugs into Africa seemed beyond our grasp. So they encouraged people in Africa, in those days, to get tested. But many of them ignored it because they knew if they were tested

positive it was a simple death sentence, and they would have to resign themselves to the obvious fate.

But things have changed, thank goodness, and they have changed for the better. Under President Bush, he described and started an initiative to deal with the global AIDS crisis. As I have said on the floor many times, I have disagreed with the President on so many things, but I certainly believe this was an inspired position which he took, that the United States would lead the world in dealing with the global AIDS crisis.

We were not only going to address HIV and AIDS, but also tuberculosis and malaria. In many countries, more people are dying from the latter two than even HIV/AIDS. The President chose 15 countries that the United States would deal with directly in the President's program. Then for the rest of the world in need, we would work with other countries in what is known as the Global Fund.

Before us today on the floor of the Senate is the President's program for dealing with global AIDS. I think it is one of the most important votes we are going to cast this year. The success of this program has brought us a long way in the last 5 or 6 years.

Mr. President, 5 or 6 years ago, only 50,000 people in Sub-Saharan Africa were receiving treatment—50,000. Today, PEPFAR and the Global Fund reach nearly 2 million people, primarily in Africa.

In the 15 PEPFAR focus countries, the program has helped prevent mother-to-child HIV transmission during nearly 12.7 million pregnancies. An HIV-positive mother nursing a child, if she is not treated properly, could transmit the disease. The treatment is very inexpensive, and a mother taking this drug before she delivers the baby can protect her child through childbirth and perhaps afterwards. We have done that now for 12.7 million pregnancies.

We have provided antiretroviral prophylaxis for well over 800,000 women who were determined to be HIV positive and prevented over 150,000 new infections of newborn children just through this program.

We have cared for more than 6.6 million people, including more than 2.7 million orphans and children.

We have provided over 33 million HIV counseling and testing sessions for men, women, and children.

From fiscal year 2004 through 2007, PEPFAR, the President's program on AIDS, supported nearly 2.6 million training and continuing education encounters for health care workers.

That is a remarkable record of progress in just 5 years. This situation on the ground in Africa has been literally transformed because of the efforts of the United States—and other countries—but the efforts of the United States through PEPFAR and the Global Fund.

The bill before us authorizes \$50 billion over 5 years, including \$9 billion

for tuberculosis and malaria. It is a large sum of money, but put it in context. Each month, we spend \$12 to \$15 billion on the war in Iraq. We are talking about spending \$10 billion over the course of a year to deal with the global AIDS crisis, tuberculosis, and malaria.

The bill requires the President to develop a strategy for spending that will prevent 12 million new infections, that will treat and care for at least 14 million people, including 5 million children, make sure women have universal access to prevention of mother-to-child transmission, and will build the health care capacity of the countries that are most affected.

I went to the Congo—the Democratic Republic of the Congo—with Senator BROWNBACK of Kansas a few years ago, and we visited the city of Goma. Goma is in the northeastern section of the Democratic Republic of the Congo. It is a very poor city, and it has so many—so many—challenges: hunger, disease, war, and, on top of that, a volcano.

We visited a hospital there that was packed with people, in this case with women who were seeking a surgery for obstetric fistula. They were women, because of sexual assault or a birth at a very early age, ended up with serious internal problems that required surgery, and there was nowhere to turn. They were shunned in their villages and by their families because of the problems associated with this condition.

Many of them marched and trekked hundreds of miles to get to this hospital. It is called DOCS Hospital. It is supported by the Protestant Churches of America. We saw the women waiting outside, huddled around little fires making their food, waiting for the chance for their surgery. Sometimes they waited for months, and oftentimes they needed a repeat surgery.

After the surgery, they would go into these wards with beds, and the patients were two to a single bed. There just was no place to turn. This was their only hope. Thanks to the United Nations, they had a modern surgical suite, but clearly they did not have the health capacity to deal with this obvious problem.

I asked them: How many surgeons do you have in this area of the Congo?

They said: We have one surgeon for every 1 million people.

I am proud to represent the city of Chicago. I cannot imagine the city of Chicago with three surgeons. But that is what they face in parts of Africa. The same thing is true when it comes to other professionals: doctors and nurses. Part of the problem is just not their failure to train these medical professionals, but the fact that we in the West, with our voracious appetite for medical care, are poaching the best and brightest of the medical professionals in the developing world.

Take a look around your city, go to your local hospital. I just visited a Chicago hospital over the weekend and was introduced to a number of the

members of the staff. I asked two of the women where they were from, and they said Ghana. Ghana is in Africa, obviously. My guess is that the community they left needed their medical care as much if not more than the United States. But they were drawn to the United States for obvious reasons.

The surgeons I mentioned in the Congo are paid by the Government. If they are fortunate enough to be paid—and they are not always paid—they are paid \$600 a month. Well, a surgeon in the United States is going to do much better than that. So the United States, England, France, and Germany recruit these medical professionals from the poorest places on Earth, and those countries, then faced with HIV/AIDS, tuberculosis, malaria, and other obvious surgical needs, don't have the professionals.

What difference does it make to us? We feel content that we have that nurse at our beck and call when we are in a hospital. We want all of our family to have the very best medical care. However, we have to accept the reality that a medical crisis halfway around the world can be visited on the United States of America within a matter of days. What used to result in a trip across the ocean in a ship where the sickly would die on the way no longer occurs. People take airplanes and in a matter of hours they are here, and they bring with them not only their foreign culture but many times their foreign diseases. So a public health crisis in some other part of the world has to be a genuine concern of ours as well.

This bill we have before us recognizes that. It takes into account the need to expand the health care capacity of some of the poorest places on Earth, including training community health workers to deliver primary health care and preventive services. It includes some provisions I have worked on earlier, and I salute the committee for adding them relative to expanding the health care capacity in Africa. I had introduced a bill with five of my colleagues—S. 805—the African Health Capacity Act, and some of the provisions are included.

I might say parenthetically that we need to find a solution to our problem in the United States, because we need nurses and doctors here as well, and the answer is pretty obvious. We need homegrown talent. This year, in my State of Illinois, we turned away 2,000 qualified nursing students. We didn't have enough classrooms or teachers or clinical opportunities. Two thousand would-be nurses were told: No, you won't be given admission to an Illinois school this year. When we consider the shortage in health care professionals, we can't afford to do that. Whether it is doctors or nurses or other health professionals, we need to be actively recruiting more in the United States so we aren't reaching out to the poorest places on Earth, poaching their talent, when they desperately need it as well.

This bill goes on to expand current programs. It funds the testing, counseling, treatment and new protocols to address drug resistance in treating tuberculosis. Our colleague, Senator SHERROD BROWN of Ohio, has been a leader in the House, and now in the Senate, on the issue of tuberculosis. Most of us pay little attention to this because it is an illness and disease that affects the poor. However, we probably noted in the news not long ago when there was a person who wasn't poor who was banned from travel because he was carrying this disease—this drug-resistant, rather, form of tuberculosis. So we understand this can affect others outside of those who are impoverished. The goal is to do more work worldwide to deal with this with testing, counseling, and treatment.

Incidentally, the treatment of tuberculosis in its most common form is inexpensive. It requires a dutiful process to make sure the person takes their medicine on a regular basis. Some countries such as India have found out how to do this and are leading the way and we should follow their example.

This bill also strengthens the role of the U.S. malaria coordinator. It increases the U.S. contribution to the Global Fund with additional safeguards and oversight, and it funds research on microbicides to help prevent the spread of HIV. It is a good bill and it covers a lot of different things.

We are at a point now where we are in a battle with many forces in this world who are trying to define the United States and tell people around the world who we are. Many of those representations are false and misleading. Unfortunately, they create enemies of the United States—people who should be our friends. I think when the United States embarks on this kind of effort—a global health effort—with tangible results in countries around the world, we demonstrate our values and our caring. That is why I think this bill is so important. I am sorry it has been held up for a number of months, but the good news is it is on the floor now and we have a chance to pass it.

This bill would require that more than half of the money appropriated for addressing local HIV/AIDS be spent on antiretroviral drug treatment and care, controlling other infections that can occur. It provides nutrition and food support and other medical care essential to HIV/AIDS treatment.

The critics of this bill say it goes too far—not just in the money spent, which I disagree with—but in what they call mission creep. They argue that nutrition and safe drinking water and empowerment of women and girls bears little relation to the fight against global AIDS. They believe you should give individuals a pill and send them on their way. Well, common sense suggests otherwise. If you visit the poorest places on Earth and have time to ask only one question, I have found that the question you should ask, if you

want to know whether this country has a chance to overcome its problems, is this: How do you treat your women? If women are treated like property, slaves, or chattel, if they have no voices in decisions of the family or community, it is likely that some of the worst medical conditions and economic conditions will continue and will worsen; but if women have a role—if they are educated; if they have a voice in their communities and in their government—it makes all the difference in the world.

So in this bill, when we talk about empowering women and girls through education, training, and self-awareness, it is money well spent. These are the women who will guide that country in the future and who will be a strong voice in a family where otherwise they might be mistreated or infected without even being able to speak a word.

I also think it is obvious that handing medicine to someone who is infected isn't enough. I have been to Nairobi and Kenya. I have seen the clinic where women who are receiving these expensive antiretroviral drugs were dying before my eyes—not of HIV/AIDS, but of malnutrition. They were, with limited funds, providing for their children and not giving themselves enough to eat, so even the antiretroviral drugs weren't working.

So when this bill talks about providing basic nutrition for people around the world, particularly women, so that the drugs will work, it is common sense. The same thing for safe drinking water. If there is one thing that causes more medical problems on this Earth, it is filthy drinking water which causes people, and children especially, to get sick and die. When we talk about safe drinking water as part of this whole program in dealing with global health, it is imminently sensible; and those who argue that it goes too far, we shouldn't include it in this bill, haven't taken the time to meet the people who live under these terrible circumstances.

I hope this bill will pass and I hope it passes soon. We have been waiting for some time. Condoleezza Rice, our Secretary of State, and President Bush have asked us to move this bill forward to provide the technical and financial assistance to help countries develop their national health workforce, expand worker training and retention, build clinics and health networks.

This bill sets a target of training and retaining 140,000 professionals and paraprofessionals. If we can build that work force in the focus countries, we will have the minimum staffing levels of doctors and nurses and midwives recommended by the World Health Organization. We have to change the situation on the ground. Villages will continue to depend on donors for medicine and clinics until they develop their own health care capacity. We can start to change the situation with the technical assistance and financial aid authorized in this bill.

The best response to the global AIDS crisis is to help these countries build a more sustainable, locally driven public health system. The bill is named after two former Members of the House of Representatives: Tom Lantos of California, who recently passed away, and Henry Hyde of Illinois, both of whom supported this legislation. In their name and in their honor, we should pass it and pass it as quickly as we can.

I recall my first trip to Africa. I went to Uganda. There was a clinic there before any of the drugs had arrived where people had been diagnosed with HIV/AIDS. Some of the women at that clinic who had small children were involved in a project called the Memory Book. They would sit on the porch of this clinic while their children played on the playground. They were assembling their life story with photographs, telling about memories of their family and memories of their children when they were born and as they grew up. This memory book was going to be handed off to the child, still very young, to hold on to so that when mother was gone, having died of HIV/AIDS, there would at least be some evidence that she lived, some evidence of her love for that child.

At this same clinic in the days before antiretroviral drugs, they had a choir. It is not unusual. Almost every place you go in Africa, they sing. They sing when they greet you, they sing when you leave, they will sing in the middle of a meeting. It is beautiful. This choir at this clinic was a choir made up of men and women who had been diagnosed with HIV/AIDS and had nowhere to turn. They knew they were all doomed. They came together to sing songs they had written about their plight, and one of them—they gave me a small tape recording—is entitled "Why Me?" It was a song that broke your heart as you heard them sing it: Why her, why him, why you, why me—trying to figure out why this had happened to them, that they came down with this deadly disease and knew they would die.

It wasn't that long ago when I made that trip. Today, things have changed. It has changed because the United States and the caring people of this country are stepping forward. Millions of people are now alive today. Millions of children who would have been orphaned now have a chance. Is this an important thing for us to do? I think it is. I think it is important in moral terms, but it is important in political terms too, to make sure that all around the world, people understand who we are, what our values are, and that we are a caring and compassionate people.

Mr. President, I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DURBIN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

RECESS

Mr. DURBIN. Mr. President, I ask unanimous consent that the Senate stand in recess until 2:15.

The PRESIDING OFFICER. Under the previous order, the Senate stands in recess until 2:15 p.m.

Thereupon, at 12:26 p.m., the Senate recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. CARPER).

**TOM LANTOS AND HENRY J. HYDE
UNITED STATES GLOBAL LEADERSHIP AGAINST HIV/AIDS, TUBERCULOSIS, AND MALARIA REAUTHORIZATION ACT OF 2008—Continued**

The PRESIDING OFFICER. Under the previous order, the Senator from New Jersey, Mr. MENENDEZ, will be recognized for 15 minutes.

Following his remarks, Senator DOMENICI will be recognized for 15 minutes.

Following his remarks, Senator KYL will be recognized to offer an amendment.

The Senator from New Jersey is recognized.

OIL PRICE MYTHS

Mr. MENENDEZ. Mr. President, we are all aware of the seriousness of the oil crisis. Gas prices are more than three times what they were when President Bush took office. High prices are forcing some businesses to cut back or close and forcing some families to choose between putting a gallon of gas in the tank and putting a gallon of milk on their kitchen table.

People are demanding honest solutions to our oil crisis. But President Bush, JOHN MCCAIN, and their allies on the other side of the aisle have only decided to perpetuate myths, which is what brings me to the floor.

They have told us offshore drilling will lower gas prices tomorrow. They have told us oil companies could produce more if we hand over even more Federal land and water to them. When people spoke about the dangers of drilling, they claimed no oil was spilled after Hurricane Katrina and that drilling off the shore of one State would not affect all the other States around it.

I am here to clear up these myths before it is too late and they take a life of their own.

Myth No. 1: Drilling immediately brings down gas prices. The biggest myth, a myth that has been repeated over and over on the floor of this Chamber, is that opening our shores to drilling will somehow lower the price of gasoline. Let's get one thing straight; drilling in the Outer Continental Shelf will do nothing to bring down gas prices—not now, not ever.

While President Bush is suggesting that drilling will bring down prices at

the pump, his own Energy Information Administration admits drilling will have no effect. The reason is the amount of oil involved is a drop in the bucket compared to what we use every day.

Let me put offshore production in perspective. Since April of this year, Americans have responded to extraordinarily high gas prices by using over 800,000 barrels of oil less than we did 1 year ago. That is the most significant and sudden drop in oil demand since the 1970s. Yet what have we seen since April? We have continued to see record gas prices.

In recent weeks, in response to record oil prices, Saudi Arabia has increased its production of oil by 500,000 barrels each and every day. What has been the effect on gas prices? They continue to go up.

So how does the Bush/McCain drilling plan compare to these recent events? If we open all our shores to oil production, the first drop of oil would not be seen for over a decade. Offshore oil production would peak in the year 2030 and only at 200,000 barrels a day. To put that number another way, the amount of gas we could get from offshore drilling is equivalent to a few tablespoons per car per day.

So let's look at the totality of this. If 800,000 barrels per day in reduced demand by Americans combined with an increase of 500,000 barrels per day of Saudi production—a total shift of 1.3 million barrels a day—doesn't lower gas prices, how does 200,000 in the year 2030 lower gas prices? If we have seen a shift of both a reduction in demand and an increase in that supply by 1.3 million barrels a day, and the price still goes up, how is it that 200,000 barrels in 2030 is going to do anything? It is a myth.

The second myth we hear is that if oil companies could only lease more Federal land and water, they would produce more oil. The fact of the matter is the oil industry has already leased 68 million acres of land, where they have not produced—for the most part—a single drop of oil. The oil companies clearly think there is oil there or else why would they be leasing the land? But they are not using it.

This chart is an example of where all that oil is located. I know our Republican colleagues have these little sayings, and they are going around with patches on their lapels saying "find more, use less." This is what they should be telling the oil companies: Find more and use less. In fact, they are not even pursuing that which they already have access to.

To get an idea of the scale involved, here is a map showing how much territory the oil companies control in the Gulf of Mexico. The red part of the map represents unused acres. It is a huge portion of the gulf region, going completely undeveloped, which they already have leases and access to.

Here is an even more impressive map—a map of how much of the West-

ern United States oil companies control. The black portion shows where companies are exploring and, again, the red is where they are. As you can see, the red far exceeds the black portion of the map. These oil companies control an enormous amount of land. When you add it all up, it is an area more than 12 times the size of my home State of New Jersey.

So why are oil companies asking us to hand over more land, when they have so much land that is already unused? It seems to me there is only one explanation: Oil companies aren't actually in a rush to drill in those areas, but they are in a rush to control as much Federal land as possible before their friends in the White House leave.

Let's talk about myth No. 3. In order to convince us to let this plan go through, big oil and their supporters want us to believe a third myth, which is that offshore drilling presents no threat to our environment and to the economies of States, such as New Jersey, where tourism is the second multi-billion dollar part of our economy.

Many of my colleagues from the Republican side of the aisle, including Senator MCCONNELL and Senator MCCAIN, have repeatedly denied that oil spills could happen. They have denied repeatedly that Hurricanes Katrina and Rita caused any oil to spill.

The picture I have here was taken not by me but by the U.S. Coast Guard. It shows what happened after the hurricanes: a massive oil spill that was set on fire to assist in the cleanup effort, as indicated in this photo.

I don't know what my colleagues on the other side of the aisle would consider "significant spillage," but I know if I saw this scene on the New Jersey shore, I would consider it a disaster.

In 2005, Hurricanes Katrina and Rita caused devastation on a massive scale. The EPA, the U.S. Minerals Management Service, the National Oceanic and Atmospheric Administration, and the Coast Guard all agree that the storms caused 700,000 gallons of oil to spill into the Gulf of Mexico and over 7 million gallons of oil to leak onshore from the infrastructure that supports offshore drilling.

When oil spills in those quantities take place, it is not isolated to a small area. Some suggest certain States may want to drill and other States may not want to drill off their coast, but the devastation spreads far and wide. When the Exxon Valdez ran aground in Alaska, the spill was 600 miles wide. The IXTOC I spill in the Gulf of Mexico traveled 600 miles. That is why the decision to drill cannot be left to a single State, because the State's actions affect all the other States in proximity to it.

An oil spill off the coast of Virginia could wash up as far away as Maine. It could devastate the coastline from South Carolina to New York.