

raised at the time Prudhoe Bay and the North Slope development was being considered. Today we are much better than we were those many years ago. Most experts have acknowledged that Prudhoe Bay has been, and continues to be, a success story.

I keep going back to the same point, we can extract this vital resource while at the same time safeguarding the environment and other resources in that region. After careful consideration, the answer should be yes. Extracting oil from ANWR will have positive benefits for American consumers.

I do not dismiss the concerns in the environmental community, but many of the arguments again were made at the same time when we were doing it for North Slope. The environment has been safeguarded on North Slope. I believe with advances in drilling technology, we will be safer with ANWR.

Mr. Speaker, I hope my colleagues will join me in cosponsoring H.R. 39. It is time to move towards energy independence in our country.

NURSING SHORTAGE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mrs. CAPPs) is recognized for 5 minutes.

Mrs. CAPPs. Mr. Speaker, I rise to bring to the attention of the House the impending shortage of nurses. I am one of three nurses currently serving in Congress. Before I was elected, I served the people of Santa Barbara as a public health nurse over 20 years.

My experience gives me a distinct perspective on nursing issues. I know firsthand the challenges facing the nursing profession and the consequences if we fail to meet them. Nurses are the first line of defense in our health care system, and the importance of this role cannot be overstated.

Today the nursing community is facing a dire situation. There is currently an ongoing shortage of nurses in the work force. In the past, this type of shortage has been resolved when pay and benefits have risen enough to attract new nurses into the field. But that is not the case this time. While some compensation levels have been rising, these improvements have not attracted enough nurses back into practice.

We are also facing a looming crisis in a profession that will strain the health care system and threaten the quality of care. We have an aging nursing work force and a dwindling supply of new nurses. Right now, the average age of employed registered nurses is 43 years. By 2010, 40 percent of the RN work force will be over 50.

Unfortunately, and in contrast, the number of young nurses is decreasing. Under 30 years of age, it has now declined by 41 percent. With this combination, we are facing an incredible shortfall of well-trained, experienced nurses in all fields.

To make matters worse, this will happen just as the 78 million members

of the baby boom generation begin to retire and need an even greater amount of health care.

In my home State of California, the problem is even worse. Less than 10 percent of the RN work force back home is under the age of 30, and nearly a third are over the age of 50. California already ranks 50th among the States in RNs per capita.

Part of the problem is that the nursing work force is so homogeneous. The vast majority of nurses are white women. Fifty years ago, a smart young woman had only a handful of career options available to her, including nursing. But as our society's views on women's equality have progressed, we have not escaped the perception that nursing is women's work.

As young women have explored different careers, very few young men have entered the nursing work force to replace them. So right now less than 6 percent of the nursing work force is comprised of men.

Likewise, even though the percentage of minorities in our national work force has arisen close to 25 percent, minorities still only represent 10 percent of RNs.

In order to deal with this looming shortage, we are going to need to address a number of issues and to be very creative in our solutions. We need to draw more people into the profession, particularly the young men and women at the high school level who are just choosing their career paths. We need to reach out to minorities and disadvantaged youth. We need to retain those nurses who are already in the work force. We need to make sure we have enough nursing school faculty, mentors and preceptors to properly education and train our work force.

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I have been working with various working groups, with Senator JOHN KERRY, and other Members of Congress to develop a set of measures that can help deal with both the immediate and the long-term problems that we face. Soon I will be introducing comprehensive legislation to address these shortages.

This legislation will include proposals to improve access to nursing education, to create partnerships between health care providers and educational institutions, to support nurses as they seek more training, and to improve the collection and analysis of data about the nursing workforce.

But we will also need to look at creative new ideas to truly address this problem. In my home town, Santa Barbara, Cottage Hospital and Santa Barbara City College have joined with San Marcos High School to create a health academy. This is a perfect example of the kind of creative solution we need.

In their sophomore year, 60 students will start taking health-care courses taught by professionals from the hospital and college. When they graduate, they can be certified nursing assistants

or continue their nursing education in SBCC's 2-year nursing education RN program. For its first class in this high school, there are already 128 applicants for those 60 spaces.

This program can serve to recruit young men and women into the nursing profession as well as change misperceptions among other students and teachers about the value of a nursing career. With support, this program could be replicated in other high-need areas, or other types of public-private partnerships could be developed.

The challenges we face in the nursing and public health communities are becoming more and more evident and the need for national action on them is equally evident.

Mr. Speaker, I hope my colleagues will join me in this effort so we can achieve a bipartisan solution to these problems.

FOOD SAFETY IN THE UNITED STATES AS IT RELATES TO THE MEAT INDUSTRY

The SPEAKER pro tempore (Mr. SIMPSON). Under the Speaker's announced policy of January 3, 2001, the gentleman from Iowa (Mr. GANSKE) is recognized for 60 minutes as the designee of the majority leader.

Mr. GANSKE. Mr. Speaker, just as a courtesy to whoever may follow, I will probably take about 20 minutes on this special order.

Mr. Speaker, you cannot help but notice a myriad of headlines touting gloom and doom on the horizon for our Nation's future. Whether it is foot-and-mouth disease threatening the world's livestock, the downturn in the world's economy, or the energy crisis that is jacking up home heating costs to really high levels, many of my constituents wonder where to turn for answers. Well today, Mr. Speaker, I would propose that America take a second look at its backbone, agriculture, as agriculture relates to some of these issues.

So the first topic I would like to discuss is food safety. The United States has one of the safest food supplies in the world. Prior to coming to Congress I was a physician and I am a father and I have a very keen interest in the issue of food safety. A few years ago, I was on an overseas surgical mission; and instead of just bringing back good memories, I brought back a case of encephalitis which I may have picked up from food overseas.

When I came to Congress, I cosponsored and helped pass the Food Quality Protection Act. It established new safety standards for the use of pesticides and required the EPA to use sound science in making its decisions. We all have a great stake in helping to ensure that our food supply is safe.

There have been concerns about the safety of food with the spread of two diseases in Europe related to the livestock and meat industry: Foot-and-mouth disease and mad cow disease. Both of these diseases, believe me, are being taken very seriously by the