

on what aging Americans can do to reduce the risk of developing this devastating disease. One study found that those who consumed the most saturated fat had double the risk of those who consumed the lowest amount. Another study has found that blood pressure played an important role in the risk of developing Alzheimer's disease in those 75 or older. These and other research studies are helping to create a better understanding of why brain cells shrink and die.

Hopefully, we are on the verge of a breakthrough, and scientists deserve greater support in order to make the goal of cure a reality. That is why we must do more to accelerate the research critical to finding a cure. The Act we propose will advance our country toward the goal of doubling the future investment in Alzheimer's disease research at NIH. It authorizes \$1.5 billion for the National Institute on Aging by the year 2008, which is the lead NIH institute for this research.

The research funding authorized by the Act will add new speed in the race to prevent this illness that touches the lives of so many Americans. These funds will support the Alzheimer's Disease Prevention Initiative authorized by the act. Prevention is our best opportunity to halt the growth of Alzheimer's disease. Observational studies in large populations suggest that drugs already in wide use in middle-aged and older people may have a protective effect against the disease. Those results must now be validated in large-scale, controlled clinical trials. Among prevention initiatives, the Act authorizes trials to determine whether compounds such as estrogen, vitamin E, ginkgo biloba and aspirin can prevent the onset of the disease.

The act also authorizes cooperative clinical research at the National Institute on Aging. Clinical trials can cost millions of dollars and involve thousands of participants and years of work. This legislation will enhance these needed trials, develop new ways to design these trials, and make it easier for patients to enroll in key studies. Cooperative research is essential to launching these clinical trials and supporting productive research.

The act also supports research and programs to help millions of family caregivers who provide loved ones with care at home. Seventy percent of those with the disease live at home in which families provide at least 77 percent of their care. It is vitally important to find better ways to help families who are the backbone of our long-term care system. The support they provide is extraordinary, and often jeopardizes their own health. It is unacceptable that one in eight Alzheimer's caregivers becomes ill or injured as a direct result of caregiving. Family caregivers provide the support which prevents these patients from having to enter institutions. This issue is especially important, given the nationwide health workforce shortage in nursing homes.

The act also reauthorizes the Alzheimer's Demonstration Program in the Administration on Aging and increases funding to expand it. This program has been highly successful in pioneering new ways to fill gaps in existing state delivery systems, so that local and community-based programs can do more for underserved populations with Alzheimer's disease. In Massachusetts, the Multicultural Alzheimer's Services Project in Springfield will receive funding through this program to provide information and supportive services to those with Alzheimer's and their caregivers.

We have no time to waste in the battle against Alzheimer's disease. We must act now to accelerate scientific efforts to find a cure and halt the continuing epidemic of the disease. We can improve the lives of millions of Americans by demonstrating our commitment to enhance research, and to support programs that help patients and their families. I urge my colleagues to support this very important legislation.

THE LIFESPAN RESPITE CARE ACT OF 2003

Mr. KENNEDY. Mr. President, it is a privilege to join colleagues Senator CLINTON, WARNER, SNOWE, MIKULSKI, JEFFORDS, MURRAY, BREAU, COLLINS and SMITH in introducing the Lifespan Respite Care Act. The act will authorize grants to promote a coordinated system of accessible respite care services for 26 million Americans who care for a family member or friend who is chronically ill or disabled.

Caregivers today work tirelessly to support their loved ones and help them to maintain their quality of life as effectively as possible. Without this important care, many seniors and people with disabilities would be forced to live in institutions, reducing their quality-of-life and resulting in more costly care.

Services provided by family caregivers are estimated to be worth nearly \$200 billion annually. Even if we tried to replace these family caregivers with paid workers, we would face workforce shortages, a serious problem that will only worsen as the baby boom generation reaches retirement age.

By 2010, more than 780,000 additional caregivers must be found to fill long-term staff positions, an increase of 39 percent over the year 2000. We now rely, and we will have to continue to rely, on unpaid caregivers in order to meet the growing need and enable those who receive the care to continue to live in the least restrictive environment possible.

Many family caregivers are themselves suffering from the stress and physical strain of their work. Often, they live the caregiver life, which is frequently called the 36-hour day. They deserve more support in order to do their essential work. Sometimes, the relief they need may be a "timeout"

for just an hour or two a week to do the grocery shopping or have time to go to the doctor. Other family caregivers may need far more relief. Our bill will provide essential respite care services and ensure that respite care providers are trained appropriately, so caregivers will feel at ease when they leave their loved one with respite providers.

I urge the Senate to support this important legislation that will provide long needed support for the elderly and disabled and that will mean so much to the family caregivers of our Nation.

PROBLEMS WITH THE DEATH PENALTY

Mr. LAUTENBERG. Mr. President, I believe that the death penalty is ineffective, cruel, and unjust. Killing people convicted of criminal offenses under the color of State law is wrong; and the disproportionate execution of a certain class or race of people is utterly unconscionable.

In the United States, although African Americans make up only 12 percent of the overall population, 42 percent of the people currently on death row are Black. African Americans are also overrepresented in the number of people on death row who are later found to be innocent: 38 percent of death row inmates freed since 1973 because of new evidence were African Americans, and 35 percent of those executed and later found to be innocent were Black.

Despite these startling statistics, the State of Texas, President Bush's home State, is determined to execute Americans as fast as possible, even in light of potentially exculpatory evidence.

In today's New York Times, columnist Bob Herbert writes about an American-African man who, in about 48 hours, may become the 300th person executed by the State of Texas since the resumption of capital punishment in 1982.

As Mr. Herbert notes, this case is particularly disturbing because there is strong evidence that the accused, Mr. Delma Banks, Jr., did not commit the capital offense. But, in a blatant disregard for truth and the equitable administration of justice, Texas intends to proceed regardless.

This senseless State-sanctioned killing must stop!

I ask unanimous consent that Mr. Herbert's column in the New York Times dated March 10, 2003, be printed into the RECORD following my remarks.

Thank you, Mr. President.

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

[From The New York Times, Mar. 10, 2003]

COUNTDOWN TO EXECUTION No. 300

(By Bob Herbert)

The war trumps all other issues, so insufficient attention will be paid to the planned demise of Delma Banks, Jr., a 43-year-old man who is scheduled in about 48 hours to become the 300th person executed in Texas since the resumption of capital punishment in 1982.