

INTRODUCTION OF THE JAMES ZADROGA 9/11 HEALTH AND COMPENSATION ACT

**HON. CAROLYN B. MALONEY**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 17, 2014*

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, last week we marked the 13th anniversary of the September 11th terrorist attack. It is a day to remember and mourn those we lost, to comfort those who suffer still, and to honor those who responded on that day with courage and determination.

Whenever we talk about 9/11, we have to acknowledge the heroes and heroines of 9/11, both those who lost their lives that day and those who are still sick and dying from the injuries and illnesses related to 9/11. As a Congress, we stood together on the steps of the U.S. Capitol and vowed to never forget.

That vow of never forget comes with an obligation on the part of Congress to ensure that we as a country remember, honor, and care for those who risked their lives to save others that day and those who were caught in the devastation that occurred at Ground Zero, at the U.S. Pentagon, and at Shanksville, Pennsylvania.

A major piece of that promise to never forget was the James Zadroga 9/11 Health and Compensation Act that became law in 2011. This legislation established the World Trade Center Health Program to provide medical monitoring and treatment for 9/11-related illnesses as well as a national health program to serve those who were at the Pentagon, in Shanksville, Pennsylvania, and those who came from around the country to aid in our country's recovery. It also reopened the September 11th Victim Compensation Fund to provide for economic losses and harm incurred from the aftermath of the attacks.

Today, there are more than 60,000 responders or survivors who got sick from exposure to the deadly toxins at 9/11, mixes of fuel, glass, asbestos, and all kinds of chemicals that were in the air that day. These thousands are now receiving treatment and monitoring from the Health Program. This also includes over 2,900 people in the World Trade Center Health Program who have been diagnosed with cancer.

Since 9/11 more than 800 New York Fire Department members and more than 550 New York Police Department personnel are struggling with serious 9/11-related illnesses.

We have already lost over 70 firefighters and 60 New York Police Department officers who have died from their 9/11-related illnesses over the past 13 years. These are people who got sick while working on rescue and recovery, and they have died because of their exposure.

These individuals with 9/11-related illnesses need continued specialized medical monitoring and care. It is unfair to cut them out of medical care and economic compensation simply because they did not get sick soon enough.

As it stands, the Zadroga Act is set to expire in October 2015, yet the medical and economic crises of sick 9/11 responders and suffering survivors will not end in 2 years. They will only get worse over time. Research shows significantly higher rates of cancer among the 9/11 population, a disease with a long latency period.

That is why I have introduced, along with PETER KING and JERRY NADLER, the James Zadroga 9/11 Health and Compensation Reauthorization Act. This legislation would reauthorize the programs for 25 years and fulfill that promise to never forget.

We are joined in support by a bipartisan group of 37 Members from all over the country. First responders and volunteers came from every corner of America to help and aid in the recovery. Others who were present on 9/11 have since moved to other areas of the country. The World Trade Center Health Program includes participants from 429 of the 435 congressional districts. This means that in almost every Member's district, there are constituents who are being monitored or who are being treated under the World Trade Center Health Program.

We must continue these Zadroga Act programs that are vital to the sick and dying, those whom we said we will never forget.

SUPPORTING AFFORDABLE, QUALITY, FLEXIBLE CHILD CARE

**HON. LINDA T. SÁNCHEZ**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 17, 2014*

Ms. LINDA T. SÁNCHEZ of California. Mr. Speaker, I rise today in support of the expansion of resources for the Child Care Development Block Grant program.

As a mother of a 5-year old, I understand the need for affordable, quality, and accessible child care. The Child Care Development Block Grant of 2014 extends the program's original intent of supporting low-income working families by ensuring that children are in a setting that will keep them safe and encourage healthy development.

This reauthorization is a solid step to help families meet the expense of child care as it includes ambitious new changes that are important for a high quality child care system. However, the sweeping new requirements called for under this Act are not adequately funded. As states implement the new requirements envisioned in this legislation without additional resources, I fear the result will be that eligible children and families may lose access to child care assistance.

To successfully implement the much-needed improvements included in this legislation, we must re-double our efforts to increase mandatory and discretionary funding in order to meet the new standards set out under this program. As the federal government continues to increase expectations for child care providers and programs without new funding, I am concerned that already high turnover may be exacerbated and poverty wages for child care providers will remain the norm.

Families in poverty are spending 30% or more of their income on child care. Child care costs are simply unaffordable for many workers in low-wage jobs. With stagnant wages, this leaves many low-income working families struggling to find a safe place to care for their children. The average annual cost of full-time care for one child can be nearly \$4,000 to over \$16,000, especially in areas with high costs of living, like Los Angeles County.

A new National Women's Law Center analysis of state and national data shows that

more than half of mothers who have very young children and work in low-wage jobs are raising children on their own; half are working full time; and over one-third are poor. They are disproportionately African-American or Hispanic.

I urge the Administration, in its implementation of this Act, to balance the requirements placed on states, child care providers, and an already under-resourced and stressed child care system with a realistic assessment of the new resources made available for implementation.

Expanding access to affordable quality child care is about the safety, economic development, and services that working families everywhere in the U.S. deserve.

RECOGNIZING THE NORTHERN VIRGINIA TRANSPORTATION COMMISSION ON ITS 50TH ANNIVERSARY

**HON. GERALD E. CONNOLLY**

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 17, 2014*

Mr. CONNOLLY. Mr. Speaker, I rise to commend and congratulate my friends and colleagues at the Northern Virginia Transportation Commission (NVTC) on the occasion of the Commission's 50th anniversary. When it was first created, the Commission's primary task was to develop and manage a transportation system for Northern Virginia, but over the years, it has evolved and accomplished so much more than that.

NVTC has become a champion for commuters across the region, an advocate for sustainable transit funding, and a leading voice on transportation policy throughout the Commonwealth. One shudders to think what Northern Virginia might look like if not for the persistent efforts of the Commission to bring local, state, and federal leaders together to promote transit solutions that have made commuting more convenient and removed cars from our roads. Just as important, NVTC has become a training ground for staff and elected leaders, helping to inform policy makers and the public about the value of and urgent need for investing in transit choices. For example, the ranks of the Commission's past chairmen include our colleague, Representative JIM MORAN, who served on NVTC during his tenure as the Mayor of Alexandria, my predecessor, Tom Davis, who served as chair during his tenure on the Fairfax County Board of Supervisors, and, yes, me. I was pleased to serve on the Commission throughout my tenure on the Fairfax Board of Supervisors.

Let me take just a few moments to recount some of the major milestones that have shaped the success of the NVTC and the growth of our region. Two major actions in 1964 laid the groundwork for NVTC to flourish. First, Congress and President Lyndon Johnson passed the Urban Mass Transit Act, which pumped \$375 million over three years into public transit projects across the nation. The Virginia General Assembly followed by creating the Northern Virginia Transportation District to plan and construct a transportation network that promoted safety, convenience, and economic growth.

The Commission did not waste time, starting work on a rapid transit system that first year.