

which will enable us to have, for example, computer storage capacity on things the size of a teardrop that are bigger than supercomputers today and will, within a matter of a few years, allow us to go after cancers when they are only a few cells large. Our idea today about identifying a cancer early will seem like, within 5 years, identifying a cancer in very late stages.

All this is going to change everything for the better. But I will say again, we had to put these privacy rules out that we put out. We've got to pass this antidiscrimination legislation, and we have to make sure that we continue to invest in not only the research but then the distribution of the wonders through adequate care coverage.

It won't be long before the average young mother will come home with a little gene map of their baby. [Laughter] And some of them will have really scary things on there, and it will be a burden for some people. But they will also have a list of things that, if the mothers and fathers will do these things, the kids will dramatically increase their chances of living a long and healthy life. And it won't be long until the average mother will bring home a baby with a life expectancy of 90 years or more. Our bodies are actually built to last more than 100 years, if we didn't have all the problems that get in our way along life's way.

But that means we have to reimagine all this. And it means that the role of citizen lobbyists and citizen activists will become more and more important, because we are literally just at the beginning of building the kind of health care system that will be adequate to the 21st century.

And I'm telling you, most of it is going to be really good. But it's going to change the practice of medicine. It's going to change the way the health care delivery system is organized. It's going to provide all kinds of new challenges. And we're going to have to figure out how to get people who need to know it all this stuff that's out there without letting somebody else take advantage of them, financially or otherwise.

I can hardly think of a more exciting time in the entire history of the health sciences. And I believe that in the lifetime of people in this room, the cure rate for breast and

cervical cancer will go through the roof; the prevention rate will escalate for all kinds of major cancers; the cure rate for prostate cancer will go through the roof. And once we get the technology down, when we merge the human genome with the microtechnology necessary to identify and zap cancers when they're just in infant stages that are presently unidentifiable, the whole world will be very different.

You can all participate in that. But these decisions do not happen by accident. People who have other things to think about have to make decisions about how to allocate public funds for research. People who are under all different kinds of pressures have to make decisions about which bills will pass and which won't, in terms of extending coverage. And you have to enter this fray with the same energy that you brought to this fight. And just remember, all the best stuff is still out there. Go get it.

Thank you, and God bless you.

NOTE: The President spoke at 3:15 p.m. in the East Room at the White House. In his remarks, he referred to breast cancer survivor Tonia Conine, who introduced the President. H.R. 4386, approved October 24, 2000, was assigned Public Law No. 106-354. The transcript released by the Office of the Press Secretary also included the remarks of Senator Hillary Clinton.

Memorandum on Preventive Health Services at the Federal Workplace

January 4, 2001

Memorandum for the Heads of Executive Departments and Agencies

Subject: Preventive Health Services at the Federal Workplace

Today, as we celebrate the enactment of the Breast and Cervical Cancer Prevention and Treatment Act that I signed into law in October of last year, I am heartened by the progress being made in expanding access to preventive care for cancer and other serious diseases. We know a great deal about screening procedures that can detect diseases early, and about behaviors, such as smoking cessation and sun avoidance, that can greatly reduce a person's risk of disease. The challenge that remains is to ensure that all Americans

not only take advantage of the screening programs and other effective preventive measures that are available and appropriate, but that they make positive changes in their lifestyles before disease develops.

The workplace is a logical place to provide employees with health information and services to help them learn about preventive health. The Federal Government, the Nation's largest employer, has already developed many programs to encourage preventive health care for its employees. These measures, available to Federal employees through the Federal Employee Health Benefits Program, cover a broad range of preventive health services, including screening for prostate, cervical, colorectal, and breast cancer, and screening for sickle cell anemia, blood lead level, and blood cholesterol level. The programs also provide for all recommended childhood immunizations, well child care, and adult preventive care visits. In addition, the Federal personnel system provides employees with considerable flexibility in scheduling their hours of work and taking time off for medical needs, including routine examinations and preventive screenings. Many agencies offer creative, effective employee health programs that provide opportunities for employees to take advantage of preventive health screenings at the worksite.

There is still room for progress. Therefore, I am today directing Federal departments and agencies to review their policies and make maximum use of existing work schedule and leave flexibilities to allow Federal employees to take advantage of screening programs and other effective preventive health measures. Each department and agency should also inform its employees of the various work schedule and leave flexibilities available to them to participate in these preventive screenings and examinations. Such flexibilities include promoting alternative work schedules (flexible and compressed work schedules), which allow for a variety of working arrangements tailored to fit the needs of individual employees, granting leave under the Federal Government's sick and annual leave programs, and granting excused absence to employees to participate in agency-sponsored preventive health activi-

ties. In the case of employees with fewer than 80 hours (two weeks) of accrued sick leave, I am directing each department and agency to establish a policy that provides up to 4 hours of excused absence each year, without loss of pay or charge to leave, for participation in preventive health screenings.

I am also directing agencies to develop or expand programs offered at the worksite to help employees understand their risks for disease, obtain preventive health services, and make healthy lifestyle choices, and to share these initiatives with the Office of Personnel Management (OPM) within 120 days. The OPM will use this information to identify agency best practices. Finally, I direct the OPM to prepare guidance to assist agencies in carrying out this directive.

Agencies will carry out this policy within available appropriations, and to the extent permitted by law and consistent with the Administration's budget priorities.

I want the Federal Government to serve as a model for the rest of the country. While Federal agencies have led the way in many instances, I want to go even further in demonstrating that preventive health care for all employees is not only desirable, but also very practical and sensible.

William J. Clinton

NOTE: An original was not available for verification of the content of this memorandum.

Statement on the Report on the National Drug Control Strategy

January 4, 2001

The 2001 Annual Report on our National Drug Control Strategy issued today by National Drug Policy Director Barry McCaffrey shows that America is making real progress in the fight against illegal drugs but that we must never give up on making our children's futures safe and drug-free. The most recent National Household Survey on Drug Abuse found that drug use by youths aged 12 to 17 has declined 21 percent since 1997.

Adolescents increasingly disapprove of illegal drugs, and a growing number are using positive peer pressure to help friends stay away from drugs. We have made similar