

The following address was made on the Congress floor on June 12, 2006, recognizing AHEC and HETC contributions, and will be recorded into the Congressional Record for that date, 109th Congress of the United States. This public recognition launches the first National AHEC Week which is observed June 11-17. National AHEC Week will be observed annually.

Mr. Speaker,

Today, I want to call attention to an important event occurring in my home state and recognize the two programs giving rise to this event, which have had a tremendous impact on the healthcare of underserved populations in our country. Beginning June 10 and continuing through June 14, the Nebraska Area Health Education (AHEC) program and the University of Nebraska Medical Center are sponsoring the National Area Health Education Center Organization's (NAO) annual meeting in my district in Omaha, Nebraska. I would like to take this opportunity to provide an explanation of AHECs and Health Education Training Centers (HETCs), and illustrate their importance through the many services and programs they offer.

AHECs, established by Congress in 1971, are academic-community partnerships that train health care providers in sites and programs that are responsive to state and local needs. AHECs improve the supply, distribution, diversity and quality of the health workforce, and increase access to health care in medically underserved areas. Furthermore, AHECs facilitate coordination of the resources of health science centers with local educational and clinical resources, which in turn, establishes a network that provides multidisciplinary educational services to students, faculty, and practitioners.

Health Education Training Centers, established in 1989, provide community health education and health professions training programs in areas of the United States with severely underserved populations, such as border states. Together, AHEC and HETC programs recruit, train, and retain health professionals committed to serving underserved populations, and provide community programs for specific populations with severe unmet health needs. Across the country, there are 61 AHEC/HETC programs and 215 affiliated AHEC centers that collaborate with over 120 medical schools and 600 nursing and allied health schools to improve the health of the underserved.

As reported by the U.S. Department of Health and Human Services, in a typical year, AHECs alone will train 37,000 health professions students in community-based sites; provide health career enhancement and recruitment activities of 20 hours or more to 42,000 high school students, and provide continuing education to 315,000 health care providers. In FY 2005, nearly 10,000 physicians participated in mentoring and training activities to students in community sites. Also, AHEC/HETCs were credited with providing training in medically underserved communities to over 47,000 health professions students.

Recent studies and reports express serious concern regarding the current and predicted shortage of health care professionals across the country, which further illustrates the important work of AHEC/HETCs. In 2005, AHECs/HETCs were successful in introducing health careers to 300,000 students ranging from kindergarten through college.

It is clear that AHEC/HETC programs serve many important purposes with respect to the recruitment, retention, education and training of health professionals in underserved areas. Today, I would like to fully recognize, appreciate and honor the efforts and activities of AHEC/HETC programs and centers throughout the United States in addressing the nation's most critical health care and health care access issues. Thank you.

-- Congressman Lee Terry, (R) 2nd District, Nebraska