

then qualify for welfare benefits and Social Security benefits.

In fact, it is estimated that in one sting operation alone where there were 89 people arrested, over \$400,000 of alleged fraud was committed under the guise of utilizing the automatic citizenship clause through phony certificates. The granting of automatic citizenship to children born in the United States has led to this kind of fraud. Regardless of the parents' status, we are rewarding people for violating our laws.

We are talking about fairness here, too, Mr. Speaker, because how many people are waiting out there, 3,500,000, to immigrate legally? How many children are born to these 3,500,000 people who are playing by the rules? Do we give them automatic citizenship? No. We tell them, like we should be telling the children of illegal aliens, you have the right to apply for citizenship like anyone else, but we are not going to give you automatic citizenship.

I think it is quite unfair that we tell one group of people that your children get automatic citizenship because you broke the law and then tell another group of people, 3,500,000, that you will not get this privilege because you did not break the law. Fairness tells us we need to take care of this problem. Thousands of legal immigrants are waiting, and many, many thousands of illegal aliens are getting rewarded.

There may be those who say that H.R. 7 is unconstitutional. Mr. Speaker, the Supreme Court has never ruled on the issue of illegal aliens getting automatic citizenship for their children. They have ruled on legal aliens, and they have said that because legal aliens were allowed in this country and agreed to come to this country, they have the burdens of loyalty and obligations of service in the draft. With that obligation comes the inheritance for their children of automatic citizenship. Illegal aliens do not have that obligation, and thus cannot pass on a citizenship right to their children as legal immigrants can and U.S. citizens.

Mr. Speaker, the status of H.R. 7 is we have 51 bipartisan sponsors. The hearing was held on June 25. We are looking forward to a markup in early November, and frankly, I would encourage every citizen in the United States and every legal resident to contact their Congressman and ask them to join in the Immigration Reform Act of 1997, and bring some logic and some fairness back into our immigration policy.

Let us start rewarding people for playing by the rules and stop punishing them for obeying the laws.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina [Mr. PRICE] is recognized for 5 minutes.

[Mr. PRICE of North Carolina addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Georgia [Mr. LEWIS] is recognized for 5 minutes.

[Mr. LEWIS of Georgia addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

#### JOIN THE FIGHT AGAINST BREAST CANCER

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Massachusetts [Mr. MCGOVERN] is recognized for 5 minutes.

Mr. MCGOVERN. Mr. Speaker, breast cancer is currently the second leading cause of cancer deaths among American women. One woman in eight will develop breast cancer during her lifetime. In 1996 alone, an estimated 44,000 women died from this terrible disease.

While these statistics are sobering indeed, there is hope. If breast cancer is detected early, the probability that a woman can survive is greater than 90 percent. Certainly, we must do everything in our power to identify the signs of breast cancer early, treat the symptoms aggressively, and make continued medical attention affordable and accessible. As we celebrate Breast Cancer Awareness Month, we in Congress should recognize the obligation that we share in the national battle against this terrible illness.

I am a cosponsor of several important pieces of legislation that seek to establish high standards for quality and affordable medical treatment of breast cancer, including H.R. 164 and H.R. 135, which my colleagues, the gentlewoman from California, Ms. ANNA ESHOO, and the gentlewoman from Connecticut, Ms. ROSA DELAURO, introduced earlier this year. Both of these measures would give breast cancer patients who undergo mastectomies the health care coverage they need to fully recuperate from their illness.

When I meet the women throughout my district in Massachusetts, I hear how concerned they are that their health insurance will not adequately provide for them if they are one day diagnosed with breast cancer.

Back in January, the Massachusetts Breast Cancer Coalition wrote me to ask that I cosponsor the legislation of the gentlewoman from Connecticut [Ms. DELAURO], which requires a 48-hour minimum hospital stay for patients undergoing mastectomies, and a 24-hour stay for lymph node removal for the treatment of breast cancer.

Under the legislation drafted by my colleague from Connecticut, physicians and patients, not insurance companies, determine whether or not a shorter hospital stay is warranted. I strongly agree with their sentiment, that decisions about hospital stays following these painful and psychologically distressing surgeries should be between the health care provider and the patient. I was proud to become a cosponsor of that legislation.

The gentlewoman from Connecticut [Ms. DELAURO] and the gentlewoman

from California [Ms. ESHOO] have also worked to establish a site on the World Wide Web that allows visitors to learn more about breast cancer, read and submit personal encounters with the disease, and build support for many of the legislative initiatives that seek to improve conditions for breast cancer patients.

As I read through some of the personal stories posted on that Internet site, I noticed a number of individuals who had written from my home State of Massachusetts, and I would like to share a couple of those stories.

Lynn DeCristofaro of Massachusetts wrote, and I quote: "I am only 16 years old, and I had to watch my 24-year-old sister die from breast cancer. I watched her come home after a mastectomy when it was obvious that she should be in the hospital."

Mrs. R. Russell of Massachusetts wrote: "I am a breast cancer survivor who is doing very well. However, I never know if the day will come that I have a recurrence. I think a recurrence is enough to worry about, without additional concern that my insurance company may not adequately cover my care."

Christopher Carron of Massachusetts wrote: "Two years ago my mother was diagnosed with breast cancer. She immediately had a mastectomy and reconstructive surgery. Luckily, she lives in Connecticut, where minimum stays in the hospital are required by law, and her health insurance company was flexible in the amount of time she spent in the hospital.

"I now realize that my mom's care was the exception, not the rule. Please end the inhumane treatment of our Nation's mothers, daughters, sisters, grandmothers, and granddaughters, and vote for H.R. 135 and H.R. 164. These women need to be treated with dignity and more than ample health care. My mom is now a 2-year cancer survivor and is fighting for herself and the rights of millions of other women who have faced this horrible battle. Thank you," he wrote.

Mr. Speaker, after hearing the stories of these individuals and countless others like them, I do not see how any Member of this body could say that current law is doing an adequate job of addressing the health needs of breast cancer patients in America.

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Doctors in this country are spending far too much time fighting with insurance companies to get permission to give their patients the treatment they need. Physicians who treat women suffering from breast cancer should never be put in that position.

Our legislation will allow doctors to make decisions based on the health and long-term well-being of their patients and not the bottom line. Clearly we in Congress must do more to ensure that women suffering from this dreaded disease have access to quality, affordable,

and complete health care coverage that they need and they deserve.

Mr. Speaker, I urge my colleagues to become cosponsors of H.R. 135 and H.R. 164 and to reassert our commitment to protecting the health of American women.

#### CONGRESS SHOULD OPPOSE INCREASES IN WHALING

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Washington [Mr. METCALF] is recognized for 5 minutes.

Mr. METCALF. Mr. Speaker, for the last 3 days I have been in Monaco at my own expense to try to prevent the renewal of whaling in the continental United States.

From the beginning of this debate over whether the Makah Indian Tribe in Washington State should be allowed to resume the practice of hunting whales after a 70-year cessation, I have maintained what is being described as "aboriginal subsistence whaling" is not that at all. It will in fact lead to a tragic resumption of commercial whaling and a geometric increase in the number of whales killed worldwide.

Without now addressing whether the Makah Tribe itself is motivated by the \$1 million value of a gray whale in Japan, other powerful evidence exists that indicates that we are on the threshold of a dramatic increase in whaling. The official U.S. delegation to the IWC has been asking for a change in the definition of aboriginal subsistence whaling, the only type of whaling now legal under the International Whaling Commission, which the United States has ratified.

In their shortsighted attempt to legalize the intentions of the Makah Tribe, the United States is asking the other nations at the IWC to expand the definition of subsistence whaling to permit cultural issues to be addressed. Why? Currently aboriginal whaling is solely for the physical nutrition of the tribe in question. In other words, they need the food. It is obvious the Makah do not need to eat whales to survive.

What is the problem with expanding the definition into the cultural realm? There are villages and people all over the world who have a cultural history of whaling but who do not now qualify under the current definition of subsistence.

Saturday at the IWC hearings, the Japanese repeatedly asked the United States delegation: What is the difference between the Makah request and the desire of four villages on the Taiji Peninsula to resume whaling? It is obvious the Japanese are going to use this loophole that our own delegation is attempting to create to increase their commercial harvest of the whales. Other nations will undoubtedly follow suit if the Makah are successful.

Mr. Speaker, we cannot allow this to happen. The killing of whales around the world is on the increase. For this fraudulent cultural subsistence to be-

come a legal authorization for further killing would be a tragedy. In addition, staff members of other IWC delegations have indicated resentment at the tremendous pressure the U.S. delegation is putting on other nations to support this fraud.

However, this pressure may not be changing votes. Observers today have informed me that the United States is now attempting to set an even more dangerous precedent of lobbying to increase the Russian gray whale quota. This new tactic would allow, this under-the-table deal would allow the Russians to give the Makah five whales at no loss to themselves. More importantly, this backroom style deal would not require a vote of the IWC. In other words, when they ran into trouble they are trying to go around the system.

A new whale hunt could then occur without IWC authorization. This is dangerous and dishonorable, Mr. Speaker. Frankly the tactics of this administration have been an embarrassment. They depicted the 43 Members of Congress who signed the letter that I took there that oppose the Makah as the only opponents in Congress.

Mr. Speaker, does anyone really believe that 389 Members of this House support the killing of whales in the continental United States? When pressed, the U.S. delegation could only name two Members of Congress who support the Makah hunt.

Mr. Speaker, they are not representing the best interests of our Nation or the sentiments of the vast majority of our people. It is now time for Congress to speak in a large, loud, bipartisan voice in condemnation of this blatant attempt at the expansion of commercial whaling. The vote will be tomorrow, and this is a critical issue.

#### ADDITIONAL FUNDS FOR RESEARCH NECESSARY TO SOLVE PFIESTERIA PROBLEM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina [Mrs. CLAYTON] is recognized for 5 minutes.

Mrs. CLAYTON. Mr. Speaker, Pfiesteria has plagued North Carolina for many years and experts now think that this organism was first observed in our waters almost 20 years ago in 1978.

While the Old North State has made multiple efforts to address this pestilence through estuary studies, non-discharge rules, phosphate bans, rapid resource teams, nitrogen load reduction, nutrient limit reductions, source wetland restoration programs, and a 2-year moratorium on new and expanding swine farms, Pfiesteria is an enigma for us all as it has been found in many Atlantic waters from the Chesapeake Bay south to Florida and west to Texas.

We must work together constructively and effectively, Federal, State, and local governments and agencies,

academic researchers, concerned citizens, to attack and find rapid and workable solutions to this predicament.

Mr. Speaker, now is the time to find additional funds for Dr. Burkholder, one of the leading researchers in the area, as well as other scientists and researchers like her, in order to answer the remaining questions concerning the effects of Pfiesteria on humans, animals, and watersheds.

The waters of North Carolina have certainly felt the effects of the Pfiesteria outbreak, especially in the Neuse River, the Tar River, the Pamlico River, as well as the entire Albemarle-Pamlico Estuary, parts of which are in my congressional district. There have been more than 1 million fish killed in our State and many reports of human health problems. Given the adverse impact of such significant fish kills upon my district, North Carolina, and the mid-Atlantic, we need to seek solutions through aggressive research.

Mr. Speaker, we face a very serious threat that must be addressed immediately. We should not rush to judgment, however. Scientific inquiries are ongoing, but we should not waste time. Further research and testing should be undertaken at once. It is my hope that funding for critically needed research and testing will come as a result of recent hearings in the Committee on Resources and the Committee on Government Reform and Oversight.

Only through funding will come opportunities for a solution. Additionally, several of my mid-Atlantic colleagues and I introduced H.R. 2565 on September 26, 1997, the Pfiesteria Research Act of 1997. This bill appropriates a minimum of \$5.8 million in fiscal year 1998 and 1999 for the establishment of a research and grant program for Pfiesteria through EPA, USDA, and HHS.

All North Carolinians and others who live, work, and play in the affected waters look forward to successful results of this research, and that is because many of their lives and their livelihood depend upon it.

#### TRIBUTE TO MAJOR GENERAL FRANK WORTH ELLIOTT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois [Mr. EWING] is recognized for 5 minutes.

Mr. EWING. Mr. Speaker, I come here tonight saddened with the responsibility of informing this House of the loss of a great American, a man who served his country for many years, a man who reached the rank of Major General in the Air Force, a citizen of the 15th district of Illinois and a friend and somebody who will be missed a great deal by all who knew him.

Mr. Speaker, memorial services for U.S. Air Force Major General Frank Worth Elliott of Rantoul, Illinois, will be held at the United Methodist Church