

TRIBUTE TO PAUL LINN, EARL CANTOR JR., AND JAMES DAUGHERTY

HON. SCOTT MCINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 15, 2002

Mr. MCINNIS. Mr. Speaker, it is with great enthusiasm that I recognize Paul Linn, Earl Cantor Jr. and James Daugherty before this body of Congress and this nation. Paul, Earl, and James are all brothers who, due to unfortunate circumstances early on in their lives, have not seen one another in over sixty years. As the three brothers celebrate their reunion, I would like pay tribute to their dedication and resilience in reuniting to once again become a family.

The three brothers were born into a family along with nine other siblings in Boulder, Colorado during the 1930s. After their mother Georgia was abandoned by her husband, her children were separated and placed in foster care because she no longer had the means to support them. Paul was adopted by Arthur and Dorothy Linn, ranchers from Collbran, Colorado. James was placed with another family who owned a ranch just outside of Craig, Colorado. As the elder of the three, Earl remained in Boulder, determined to reunite with his brothers as quickly as possible.

Unfortunately, due to the confidentiality with which adoption records are held, Earl soon lost track of his brothers and did not have the resources to relocate them. Paul was able to locate Earl after finding his name in a Boulder phone book in 1955, but it took the work of Bobbi McKeivitt, a professional who tracks down this type of information, for James to locate his two older brothers. Today, the three brothers are determined to find the rest of their siblings and rejoice in yet another family reunion.

Mr. Speaker, I am delighted to recognize Paul Linn, Earl Cantor Jr., and James Daugherty before the body of Congress and this nation for their profound determination and resilience in their mission to reunite their family. Their story is one of great satisfaction and inspiration, and I wish them all the best in their mission to reunite the rest of their family.

DEPARTMENT OF LABOR'S EFFORTS TO INTEGRATE FAITH-BASED AND COMMUNITY ORGANIZATIONS INTO EMPLOYMENT AND TRAINING SERVICES

HON. ROBIN HAYES

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 15, 2002

Mr. HAYES. Mr. Speaker, I want to recognize the Department of Labor's efforts to integrate faith-based and community organizations into employment and training services and encourage the department to continue and expand this initiative.

In order to most effectively deliver services, especially in the hardest to reach communities, it is essential that the federal government partner with groups that have credibility in needy neighborhoods. Small community and faith-based organizations have a long-

term, personal investment in the community, and are known and trusted to effectively deliver results.

This approach is a necessity because for many of our most needy neighborhoods, faith-based and community organizations are frequently the strongest and most dynamic institutions available. Often, in the most distressed neighborhoods, they are not just the best partner, they may be the only partner available to us.

I want to recognize the work that has already taken place at the Department of Labor. The Department has created several pilot programs and innovative grant programs designed to better utilize the unique skills of community and faith-based organizations in its employment and training efforts. I urge the Department to continue and expand these efforts and I call on the Senate to pass H.R. 7 to ensure that the Federal government no longer ignores this critical partnership.

DR. MICHAEL W. PARKER

HON. EARL F. HILLIARD

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 15, 2002

Mr. HILLIARD. Mr. Speaker, I rise today to share with my colleagues in the United States House of Representatives a story of Dr. Michael W. Parker, Sr., a citizen of the state of Alabama who has served our country with bravery, commitment, and distinction in the armed services and continues to serve us with his work as a professor and researcher at the University of Alabama at Birmingham.

Members of our military are unique individuals who put their lives on the line to protect the very freedoms that many of us take for granted. Since September 11, 2001, we have been reminded of the perils of war and the dedication of those who fight to protect us. I want to remind the House that many of our veterans return to civilian life and do great deeds for our country in various professions.

Mr. Speaker, Dr. Parker, LTCR, DSW, BCD (Board Certified Diplomate) has been named a John A. Hartford Foundation Faculty Scholar in Geriatric Social Work and serves our community in many ways. He is a National Institute on Aging (NIA) Post Doctoral Fellow from the University of Michigan. He is currently on faculty at the University of Alabama Medical School, Center for Aging, Department of Geriatrics and Gerontology & the University of Alabama, School of Social Work. He is a research scientist with the U.S. Air War College in Montgomery, AL. Dr. Parker is the founding Chair of Aging Veterans and their Families which is part of The Gerontological Society of America, and serves as the Primary Investigator on NIA and Department of Defense funded research related to health promotion, successful aging, and spirituality.

Dr. Parker has also been recognized for his classroom abilities and is a recent recipient of the University of Alabama's Frank R. Egan Award for teaching and exemplary practice. His military honors include the Order of Military Medical Merit and the Legion of Merit. Dr. Parker is dedicating his civilian career to addressing the long-term care needs of our society.

Today, I would like to discuss the Military Parent Care Project on which Dr. Parker and

his colleagues are working. I want to describe the family care plans that the United States military uses to assist surviving family members, a modification of that plan that Dr. Parker is researching to include older and disabled loved ones, and how this may lead to better planning for caregiving for all American families.

Mr. Speaker, all military personnel with dependent family members are required to complete, prior to deployment, a family care plan that makes provision for the medical, legal, and spiritual welfare of surviving family members in the event the service member—soldier, sailor, airman, or Marine—does not return. Dr. Parker believes that the composition of the family care plan must be expanded to make it an intergenerational family care plan to assist in the care of the aging parents of military personnel who do not return from service to our country.

We know that the demographic changes in the U.S. population have significant implications for all of us, including military families. Women, the traditional caregivers, have increasingly entered the military. It is my understanding that women—wives, daughters, and daughters-in-law—provide seventy percent of home care. Forty percent of women providing care to aging relatives are also providing care to children at the same time because of delayed childbearing. In addition, nowhere are the effects of parent care more apparent than with senior military members and their families because they typically live long distances from their aging parents.

Mr. Speaker, I think most of our colleagues would agree that it is imperative that we all work with our aging and disabled loved ones to plan for future care needs. This is particularly important for at-risk military personnel. Otherwise, care might not be provided the way we would like.

Under the sponsorship of the John A. Hartford Foundation and The Gerontological Society of America, Dr. Parker and his team have developed tools to help active duty military careerists complete a family care plan that includes aging parents. They have used focus groups of military personnel and experts from the fields of medicine, law, theology, and caregiving to create and test a Parent Care Readiness Assessment Instrument. This tool assists a family in identifying and prioritizing specific tasks associated with providing care to their aging family members.

As you know, Mr. Speaker, this Congress has conducted many hearings exploring the long-term care crisis in this nation. A long-term care crisis at the family level can thrust military and civilian family members into a bureaucratic maze of trying to make successive care arrangements in a badly fragmented long-term-care system. The nation's patchwork of nursing homes, foster homes, adult day centers and home health care agencies offer a dizzying array of often-unsatisfactory options. Practical help is needed so that a formal family care plan can be developed that could be put into place even if an adult son/daughter was not present to help execute the plan. Our Parent Care Readiness Assessment Instrument can serve as the first step toward this end.

They have also developed a two-hour educational workshop covering four key aspects of preparing an intergenerational family care plan. They are medical, legal/financial, social/