TRIBUTE TO LORRAINE CEPHUS

HON. ROBERT E. ANDREWS

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 13, 2004

Mr. ANDREWS. Mr. Speaker, I rise today to honor Lorraine Cephus of Cherry Hill, New Jersey, and to celebrate her outstanding achievements as a runner.

Lorraine was an avid high school athlete, playing softball and running track. She only began running seriously in her 30s after her two children were born and while her husband Louis, an Army colonel, was stationed in Germany.

At 74 years old, the grandmother of two runs an astonishing six miles everyday. She has completed countless marathons, logging over 100,000 miles. Since 1976, she has completed 28 consecutive Marine Corp Marathons, the only women to ever accomplish this feat. While she competes in other races around the country, the Marine Corp Marathon has special significance to her, as the race passes Arlington National Cemetery where her beloved husband Louis is buried. Every year as she runs past the cemetery, Lorraine salutes and says a prayer for her late husband.

People in her community know Lorraine not only for her extraordinary athleticism but for her friendly nature and sunny disposition. May she continue to serve as an inspiration to all of us to live a healthy and active lifestyle for many years to come.

I congratulate Lorraine on her spectacular accomplishments, and wish her the best of luck as she trains to compete in her 29th Marine Corps Marathon this fall.

EXPRESSING SENSE OF THE HOUSE ON ESTABLISHING NATIONAL COMMUNITY HEALTH CENTER WEEK

SPEECH OF

HON. BOBBY L. RUSH

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Monday, July 12, 2004

Mr. RUSH. Mr. Speaker, I rise in support of H. Res. 646, a resolution expressing the sense of the House that the Congress should establish a National Community Health Centers week. I want to commend my good friend and colleague from Chicago, Congressman DANNY DAVIS, for introducing this resolution, to recognize the vitally important work that community health centers do in both urban and rural areas in this nation.

Community, migrant, and homeless health centers play an absolutely critical role in providing quality health care services to the poor and uninsured citizens in this nation. In Illinois generally, and Chicago, especially, these centers provide the only access that some of our citizens have to health care. The providers in these facilities are in the trenches each and every day and our constituents are served well by their dedication and devotion.

Mr. Speaker, it is fitting that I take a moment while we are debating this issue to commemorate the life of one of the leaders in community health care in the state of Illinois.

Mr. C. Michael Savage, 51, the Chief Executive Officer of the Access Community Health Network was killed white water rafting in Alaska while attending a conference on June 24, 2004: all in the Chicago community are mourning his loss.

Mike's dedication, drive and devotion were responsible for turning around Access Community Health Network and making it the largest community health provider in the country. Access is based in Chicago and provides health services to the residents of the First Congressional District and the metropolitan Chicago area. But Mike's work and his impact with Access has been felt all over the country. The Access network is a model for other community health centers around the nation, and much of that reality is because of Mike's unwavering commitment to the challenge of improving health care delivery in this nation.

When I introduced legislation earlier this year designed to make affordable prescription drugs available to low income residents of the First Congressional District, Mike was there. When I created a community-based task force to examine the health care challenges my constituents face everyday, Mike was there. When providers come to Washington every year to urge the Congress to increase funding for community-based health centers, Mike was always there.

Mr. Speaker, on June 24, 2004, not only did Illinois lose a caring, dedicated and supremely empathetic health care provider whose compassion for the poor was unparalled, but so did the nation. He will be sorely missed.

LUNDY FOUNDATION'S WORK WITH VULNERABLE CHILDREN IN EAST AFRICA

HON. MARK UDALL

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 13, 2004

Mr. UDALL of Colorado. Mr. Speaker, I rise today to commend the Lundy Foundation (Colorado) for its work, in partnership with Africa Bridge (Oregon), Godfrey's Children (Tanzania) and the Executive Council of Idweli (Tanzania), in building and operating a Children's Center in Idweli, Tanzania.

Idweli is similar to many rural villages in East Africa in that a significant portion of the population consists of children affected by HIV/AIDS. In fact, more than one-third of Idweli's children have been orphaned by HIV/AIDS. As their top priority, the children of Idweli identified building a children's center where orphaned and vulnerable children can feel loved and cared for. The Children's Center has now become a reality. The Center will provide temporary shelter for children infected or affected by HIV/AIDS, as well as provide adequate food, healthcare and primary education for orphans and other vulnerable children.

The Idweli Children's Center complex will consist of a small hall with a kitchen, dining room and a space for community gatherings, two dormitories that will provide housing for 48 children and four adults, two lavatories and space for recreation, health care, and education. There is also land available for cultivating vegetables and other crops. Skilled laborers in the village are building the Center by hand. All land used for this complex was donated to the Children's Center by the village of Idweli.

While $70,000 in private funds has been raised for construction and operation of the complex, $81,000 is still needed to complete the project. A matching grant of $35,000 has been pledged, if $50,000 can be raised from other sources. Additionally, grants have been submitted to the Tanzanian government and USAID for matching grants to cover ongoing costs of operating the Center.

The HIV/AIDS epidemic is particularly serious in Africa as millions of children and adults are living with the disease without adequate support or resources. I would like to commend British Airways and First Data Western Union Foundation for their support of the project and expression of social responsibility. It is vital that public and private funding from the United States continues in order to slow the spread of this epidemic in Africa, while ensuring those infected with the disease receive proper care.

I would like to praise the Lundy Foundation for its tremendous efforts in East Africa. It has not only financial resources to the project, but also project management and organizational development expertise. Through its work, the Lundy Foundation has been able to support the partnership in managing change, resolving conflict, and encouraging effective communication, as bridges are built between two different cultures.

The Lundy Foundation has achieved a great deal not only in East Africa, but throughout the African continent. I know that the Lundy Foundation will be successful as it continues in its quest to make the world a better place.

THE ACCUTANE SAFETY AND RISK MANAGEMENT ACT

HON. CHRISTOPHER H. SMITH

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 13, 2004

Mr. SMITH of New Jersey. Mr. Speaker, I rise today to join with my colleague, Congressman BART STUPAK of Michigan, to introduce legislation that will help improve the safety and health of thousands of Americans who may be using the acne medication Accutane.

Accutane has been documented as causing severe birth defects and miscarriages in pregnant women using the drug, and its side effects can result in the onset of depression, psychosis, and even suicide. Four years ago, my colleague and friend Mr. STUPAK had to endure the tragic suicide of his teenage son, who was using Accutane at the time.

Despite the fact that the significant and serious side effects associated with Accutane are well known, the Food and Drug Administration has yet to mandate a program to better monitor the use of this drug and to document its effects in patients, despite the fact that such a registry has been recommended by FDA advisory panels on two separate occasions.

The Accutane Safety and Risk Management Act is common sense legislation that will build upon a safety plan first proposed by the makers of this drug themselves. It will still permit doctors to prescribe Accutane, but will also institute several additional patient safety and protection measures and ensure patients and their families know the full risks before beginning treatment.

Mr. Speaker, the legislation we propose will permit physicians to prescribe Accutane only