

these American weapons being funneled to the militants.

By arming Pakistan, we would be arming the militants responsible for the deaths of thousands of civilians in Kashmir, and who are now contributing to the escalating tensions with India.

Mr. Speaker, there was an article in Saturday's New York Times entitled "Kashmir Militants Seek Islamic State," and it describes how Islamic militants from several different nations are working to transform Kashmir from a tolerant secular democratic state, that people from many faiths call home, into an area under strict Islamic religious rule. I wanted to quote from this article by Times reporter Steven Kinzer. He says,

The campaign is in part a legacy of the proxy war the U.S. waged against Soviet forces in Afghanistan during the 1980s.

The article describes how having succeeded in driving the Soviet forces out of Afghanistan and establishing a form of religious rule there under the Taliban, these warriors are now turning their attention to Kashmir. And quoting again from the Times article, it says that,

In Srinigar, the summer capital of Kashmir, militants from countries as far apart as Indonesia, Sudan and Bahrain have given interviews asserting that they learned the art of war from Americans and are now using their skills to fight the Indian Army. Many are evidently using not only tactics that Americans taught them, but also weapons Americans gave them.

In fact, the article notes how an Indian helicopter was shot down by an Islamic guerilla using an American made stinger missile, and that about a dozen more stingers, each capable of shooting down a plane or a helicopter, are unaccounted for in the region. The U.N. envoy in Srinigar is quoted as saying that,

Weapons provided for Afghanistan with large help from the Americans and CIA are now in the hands of the militants.

An Indian Army colonel states that, "The militants are using not only small arms that they got from the Americans, but also Stinger missiles and American anti-tank weapons. It's not only weapons, but also battle-hardened troops. It's a direct result of the American policy in Afghanistan."

Mr. Speaker, the Soviet defeat in Afghanistan was an important turning point contributing to the collapse of the Soviet Empire. Yet, one of the unintended consequences has been the creation of a radical movement of armed terrorists, mercenaries and militants who have imposed a repressive regime in Afghanistan, are trying to take over Kashmir, and who seem to have a great deal of influence within the Pakistani government and armed forces.

Mr. Speaker, I just want to say that during the Cold War our fear of Soviet expansionism led us to embrace regimes like Pakistan that do not share our values of democracy and tolerance. But in the post-Cold War era, there is

no justification for militarily propping up such a regime. Maybe we cannot completely stop the militants who threatened Democratic India as well as American and western interests, but we can at least make sure we do not give them what they want most, and that is American arms. Sending military assistance to Pakistan amounts to a guaranty that these American weapons will be funneled to the militants. And given this sad reality, we must not repeal the Pressler amendment.

#### TRIBUTE TO NUTRITION PROFESSIONALS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. BILIRAKIS) is recognized for 5 minutes.

Mr. BILIRAKIS. Mr. Speaker, I rise today to pay tribute to the dedicated nutrition professionals who work in hospitals, WIC clinics, nursing homes, school lunch and breakfast programs, and many other settings where they are striving to improve the nutritional health of our Nation's citizens.

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I would like to call special attention to one important segment of our population where nutrition services have proven to make a significant difference among our senior citizens.

In many ways, our Nation's health care system is the best in the world, partially because our free market system allows innovations to occur at a pace that is demanded by the health care consumer.

Unfortunately, too often the largest health program in the country, the Medicare program, is unresponsive and fails to keep pace with the advances that medical science demonstrates are effective.

In recent years, as science and society have uncovered more information about the critically important role of nutrition in the prevention, treatment and management of disease, more and more Americans have demanded that nutrition services be a standard part of their health care protection. In fact, by one estimate, 75 percent of all managed care health plans in America now offer some degree of coverage for nutrition therapy services.

Therefore, it is disheartening, Mr. Speaker, though perhaps not surprising, to realize that nutrition services are inadequately covered under the Medicare program. While the science of nutrition has advanced at a rapid pace over the last several decades, Medicare's coverage of nutrition services has remained largely static.

Under Medicare's conditions of participation, appropriate nutrition care is a standard part of the hospital program. However, the outpatient, or Part B, portion of the program fails to provide reliable nutrition coverage. It

makes little sense to me that Medicare beneficiaries can receive comprehensive nutrition care only after they have become so sick that they are admitted to the hospital. For many years, health care treatment has been shifting away from inpatient facilities like hospitals and more toward outpatient settings. And yet, still we find Medicare adhering to an outdated system where nutrition therapy services are available only in the acute-care setting.

This clearly is a reflection of a system that is in need of change. Our modern health care program ought to ensure the adequacy and equitability of nutrition services in both inpatient and outpatient settings. A great number of diseases can be prevented and managed throughout patient nutrition therapy. Research proves that renal disease, diabetes, cancer, heart disease, and other illnesses respond well to nutrition interventions.

Nutrition professionals have documented the ability of well-nourished individuals to better resist disease and to tolerate other therapy than those who are under-nourished. These individuals are also better equipped to recover from acute illness, surgical interventions, and trauma. As a result, they experience fewer and shorter hospital stays, need less medication, and suffer fewer medical complications. All this can save money and lives.

A constituent of mine recently visited me and explained just how effective these services can be and what a difference they can make in people's lives. The constituent is a dietician from Florida who told me about a case involving her mother-in-law who lives in a different State.

During a routine medical visit, her mother-in-law was found to have a high blood sugar level. Her physician gave her medication and a blood glucose monitor to check her blood sugar level but gave her no directions about using the monitor or changing her diet. Within 2 weeks, she was hospitalized with severe low blood sugar and heart palpitations.

After working with a dietician, she is now off the medication and able to control other blood sugar level. However with nutrition counseling from the beginning, that hospitalization could have been avoided, saving the cost of the hospitalization as well as saving that mother-in-law from a life-threatening situation.

Now, I do not know if that physician lacked knowledge about the importance of nutrition in the treatment of diabetes or, knowing that the services were not likely to be reimbursed, did not want to put his patient to that expense. But the bottom line is that our health care system must provide patients with access to this important service.

According to my constituent, there are many other diseases that can be

successfully managed with the medical nutrition therapy.

Mr. Speaker, I recently spoke with a constituent who is a dietetic intern working in the James A. Haley Veterans' Administration Hospital in Tampa, Florida. She described the rigorous educational and training requirements that she and others preparing for a career in dietetics must undergo.

With 5 years specifically devoted to the study of nutrition, registered dietitians learn to apply the principles of nutrition, biochemistry, and physiology toward the prevention and treatment of diseases. Most physicians understand that registered dietitians are the best qualified professionals to furnish nutrition therapy.

Clearly, registered dietitians are a valuable and indispensable part of the health care team, and Medicare beneficiaries ought to have reliable outpatient access to the care they deliver.

This Congress, Mr. Speaker, should carefully examine coverage for medical nutrition therapy as one important way to help strengthen Medicare for our children and grandchildren.

Mrs. JOHNSON of Connecticut. Mr. Speaker, will the gentleman yield?

Mr. BILIRAKIS. I yield to the gentleman from Connecticut.

Mrs. JOHNSON of Connecticut. Mr. Speaker, I just wanted to rise in support of the comments of the gentleman from Florida (Mr. BILIRAKIS) this evening in support of medical nutrition therapy.

It is truly a tragedy that we seem unable to reorganize Medicare in such a way that preventive health measures like nutrition therapy can be adopted. In the first few years, \$2.3 billion could be saved, which would offset the overall longer cost of \$2.7 billion. After the third year, the savings outweigh the cost. And savings for patients with diabetes alone would total \$1.6 billion over the 7 years.

Since diabetes and cardiovascular disease affect 60 percent of the Medicare population, this is just clearly a good way to both save money and improve the quality of care.

The Lewin Group recently completed a study for the Department of Defense that estimated that annual net savings could be developed of \$3.1 million if medical nutrition therapy was included in the Tricare benefit program for our military personnel.

The evidence is just growing out there. I believe it is overwhelming. I thank my colleague tonight for taking the floor in support of medical nutrition therapy as a covered benefit under Medicare, and I join him in supporting that.

Mr. BILIRAKIS. Mr. Speaker, reclaiming my time, I thank the gentleman for her comments. There are not many people, if any, in this House of Representatives that know more about health care than the gentle-

woman from Connecticut (Mrs. JOHNSON) and I appreciate her comments.

It is typical, is it not, when we talk about preventive care that today's dollars are not taken into the consideration, the ultimate savings over the long haul?

#### WE MUST PREPARE TODAY'S YOUTH FOR TOMORROW'S ECONOMY

The SPEAKER pro tempore (Mr. ISAKSON). Under a previous order of the House, the gentleman from New Jersey (Mr. HOLT) is recognized for 5 minutes.

Mr. HOLT. Mr. Speaker, last week, Microsoft's Bill Gates and other leaders of the high-tech industry came to Washington and they came to tell us, among other things, that we need to do a better job of preparing today's youth for tomorrow's jobs.

Bill Gates is not alone. I hear the same message everywhere I go in my district from CEOs of pharmaceutical companies in Hunterdon County, New Jersey, to managers of local restaurants in West Long Branch.

We literally cannot afford to wait to help our schools recruit, retain, and train qualified teachers. We cannot postpone work any longer in making sure Federal aid provides more flexibility conditioned on more accountability for results. Now is the time to work in partnership with our communities to ensure that we have a school infrastructure that we need for the 21st century.

The number of school children is growing at a record-setting pace. More than 52 million students are in school today, an all-time high. In my home State of New Jersey, we are experiencing very rapid growth. That is why New Jersey communities need assistance to help pay for the bricks and mortar required to have the smaller class sizes so our kids can learn and compete with students throughout the world.

Last week, I joined with other freshmen Democrats in writing a letter to our Speaker asking that we bring willing school construction legislation to the floor of this House for a vote. We look forward to his answer. And even more, we look forward to legislative action.

We are investing billions in new prisons. We are investing billions of dollars into our military installations. But should we not also be voting on providing the resources to help our communities build schools, as well? I think so, and so do the families of Central New Jersey.

Together with my colleague, the gentleman from North Carolina (Mr. ETHERIDGE), I am working to help New Jersey towns afford modernized and new schools by providing tax credits to the holders of school construction bonds, in effect paying the interest on those bonds.

Under this bill, the local entity will still be responsible for paying the principal. The interest-free capital will leverage the amount of money available to meet the need to modernize our educational infrastructure in fast-growing communities, as we have in Central New Jersey. But "infrastructure" does not just mean classrooms, desks, and chalk boards. It means technology.

One of the areas I am most concerned about is technology education. It is changing our lives. Today, with the touch of a key, we can send billions of dollars of capital around the globe, where the cars we drive have more computing power than the Apollo spacecraft. There are no unskilled jobs. Even entry-level jobs demand basic computer knowledge.

Yet there is a move underway here in Congress designed to rob hundreds of thousands of Americans from developing the computer skills they need to compete in an increasingly competitive technological world. The e-rate, the popular program that provides discount telecommunications and Internet technologies to elementary and secondary schools and libraries, may fall victim to politics. We simply cannot allow this to happen.

Telecommunications and computer technology are effective in helping students master complex skills that the business community sees as critical for the future workforce. According to a recent study, students who actively use the Internet for classroom projects submit more ambitious and more complete project. Other studies are also showing that on-line resources boost student interest and student motivation. Students are learning more and in greater depth because they have access to resources beyond their classroom, resources that are more current than their textbooks and sometimes more knowledgeable than even their teachers. However, we need teachers who can teach these subjects.

A recent survey published by the Department of Education tells us that only 20 percent of teachers feel qualified to use the technology that is available to them now. That is why I have joined my colleagues the gentleman from New Jersey (Mr. ROTHMAN) and the gentlewoman from New Jersey (Mrs. ROUKEMA) in cosponsoring legislation to help teachers teach technology education.

Teachers deserve to be treated like the professionals that they are so they can continue to grow in their profession. We need to ensure that they are receiving the training they need to perform the miracles we ask of them. Of all the important jobs in our society, nothing makes more of an impact on our children than a well-trained, caring, and dedicated teacher and no job is ultimately more important to our society.