

## EXTENSIONS OF REMARKS

DECLARE A NONVIOLENT AND  
DIPLOMATIC WAR TO SAVE  
KASHMIR

**HON. MAJOR R. OWENS**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 1999*

Mr. OWENS. Mr. Speaker, recent violent developments in Kashmir, the disputed territory between Pakistan and India, have highlighted a very dangerous blunder of neglect in U.S. and international diplomacy. The failure of the world community under the auspices of the United Nations to demand a self-determination referendum for Kashmir has resulted in a festering stalemate with very serious potential consequences for that region and the entire Earth which would have to absorb radioactive contamination from any full scale war between two recently declared nuclear powers.

Now, before the temperature rises any further, it is imperative that we maximize the effort to achieve a nonviolent solution to this crisis that has persisted for much too long. The honorable and civilized solution is a very simple one. Let the people of Kashmir vote to determine their own destiny. Pressure both Pakistan and India to allow for a Democratic solution, the ballot box and not the gun—or nuclear bombs.

It is a well-known fact that India refused to accept a self-determining referendum. The nation that has proclaimed itself as the world's largest democracy has doggedly refused to permit the Kashmir people to vote. To placate India it has been proposed that a referendum be held which does not offer the option for Kashmir to become a part of Pakistan. A vote would be for statehood within India or for an independent Kashmir nation.

The speculation is that Indian officials fear that the predominantly Muslim population of Kashmir will not vote to become a state within the predominantly Hindu nation of India. It would indeed be ignoble for the international community to allow India to continue with this inhumane, anti-democratic stranglehold on Kashmir because it fears the outcome of a vote for self-determination.

A studied neglect of the Kashmir question by the world powers is no longer possible. The recent outbreak of warfare demonstrates the impossibility of the two nations of India and Pakistan ever resolving the issue through bilateral negotiations. The Chinese who have borders with both countries and a direct involvement in the Kashmir dispute will also not be very helpful in resolving the conflict. The problem of Kashmir must be immediately placed on the high priority agenda of the United Nations Security Council.

Surely the Kosovo tragedy has shown the citizens of the world who are not indifferent to human suffering that the failure to pursue ag-

gressive nonviolent actions and intense diplomacy will result in an inevitable catastrophe.

IN HONOR OF JIM RUCKI

**HON. DENNIS J. KUCINICH**

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 1999*

Mr. KUCINICH. Mr. Speaker, I rise today to honor Jim Rucki, a basketball coach for 10 years and baseball coach for 13 seasons at Rocky River High School, home of the Pirates.

Rucki capped his career at Rocky River High School by coaching his players to 22 wins this season and 20 victories last season thus leading them to their second consecutive state championship. Rocky River High School is the first Cleveland-area public school to make consecutive state-title game appearances since 1979.

While a basketball coach, Rucki led his teams to 160 victories including two conference titles, two district championships, and nine sectional titles. After more than 13 wonderful years of coaching, Coach Jim Rucki has proved himself to be an outstanding coach who truly loves what he does.

Not only is Coach Rucki an exceptional coach, he is also a modest one as well. Coach Rucki is known for saying that his players are the ones responsible for all the awards that he has earned.

However, Coach Rucki also stresses hard work off the field. As part of the educational process of his players, he expects that his players earn good grades in all of their academic classes. He truly knows the importance of education in the development of a young person's character.

Although Coach Rucki is moving, he will however continue to coach boys basketball, one of the sports he loves. Both his players and a very grateful community will deeply miss him and all of his hard work and we thank Coach Rucki for all that he has done. I ask you fellow colleagues to join with me and the community of Rocky River in congratulating Coach Jim Rucki on an excellent job throughout his coaching career.

DRINKING AND DRIVING AND  
DRUG TREATMENT

**HON. BERNARD SANDERS**

OF VERMONT

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 1999*

Mr. SANDERS. Mr. Speaker, I submit for the RECORD statements by high school students from my home State of Vermont, who were speaking at my recent town meeting on issues facing young people today. I am asking

that you please insert these statements in the CONGRESSIONAL RECORD as I believe that the views of these young persons will benefit my colleagues.

DRINKING AND DRIVING

(On Behalf of Chelsea Downing and Rebekah Blaisdell)

Chelsea Downing: Drunk driving has become a major problem in the small towns of northern Vermont. Just a year ago, four teens were killed in a car accident on their way back from Canada. Alcohol was proved to be a factor in this crash. Since the drinking age above the border is 18, teenagers drive to Montreal to enjoy bar-hopping with their friends. The driving coming home from the bars can be hazardous.

How can these problems be prevented? The question has lingered in the minds of many, since the number of Vermont traffic deaths involving drunk drivers under 21 have increased. Stopping underage drinking altogether is an extremely difficult task. If we can reduce the driving while young people are under the influence, serious deaths and injuries can be prevented. We need to focus on the driving aspect, because it yields much more serious consequences than just drinking alone.

The teen curfew is one action the state legislature has discussed. The curfew will prevent drivers under 18 from being on the roads after 11 p.m. This would restrict inexperienced drivers from being on the road when the risk period is high. But it also restricts young people from doing normal things, such as going to movies or the drive-in, or simply getting together with their friends. People above 18 can still drive. These are the people who can drink legally in Montreal. This curfew will not affect these teens, who face a long drive home from the bars in Canada. We have proof that this trip can be fatal.

The state of Vermont has recognized that we have a problem. Increased numbers of police officers, strict DWI laws, and teen curfews are a few of the things they are in charge of. These measures can help solve the problem, but what really will make the difference is what these teenagers are exposed to in their everyday lives. Their school, friends, and especially their parents are all responsible for the decisions they will have to make.

Teens need to recognize the consequences of drunk driving—that death can result. Real stories of the families who have lost children to accidents best express these outcomes. Schools should be obligated to hold assemblies for students, telling them real stories about what could happen. These presentations are necessary, especially for events such as homecoming and the prom, where underage drinking and driving is apt to occur.

Parents need to be involved in their children's lives, especially during the high-risk years. Increasing awareness is the best way to teach teenagers to consider the risks before involving themselves in dangerous situations.

Rebekah Blaisdell: As everyone knows, life and death goes hand and hand, but nobody ever tells us how to deal with it. Family

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.

members die, our leaders die; but our classmates aren't supposed to. Lately my life that had more death than anyone would like to deal with. In the past month, two of my classmates have died unexpectedly. Scott was a very good friend of mine, and I have known Gary since first grade. I will remember them forever, and they have a special place in my heart.

In each of these cases, we will never know why they died, if it was an accident or if it was of their own choice. This decision is left up to those of us who are still here. We will never know for sure, but every day I wonder if there was something I could have done. I don't understand why Scott and Gary had to die at such a young age, but my life will go on. I have to come to terms with this senseless loss. But lately, it seems the school has forgotten what happened just a month ago, three days of extra counselors because of Scott's death. Is that what his life was worth? Three days?

I will never forget what happened during my senior year, but soon this school will. In four years, nobody will know Scott or Gary's name, and if they do, they won't understand what happened to them or those around them. It bothers me, because people should remember. Events like this should never be forgotten, because if they are history will repeat itself and more people will die.

Even if Scott and Gary's deaths were accidents, schools should teach about depression, and provide a way for students to get help for themselves. I know each school has guidance counselors. But who wants to talk to somebody who might not even know your name?

All my life, I've had to deal with depression. And most people don't truly understand. I'm only 17. But already I have had at least seven of my best friends attempt suicide, and a couple have succeeded. People need to know where and how to find help, and if they're finding help for a friend, they need to know that their friend is not going to hate them, and if they do, they're still alive, and that's the point.

If people don't know or don't want to admit that they may be depressed, there is a bigger chance that they will take matters into their own hands. Depression is not a dirty or a bad word, and people who are depressed aren't any different from anyone else, they just need a little more support.

When it comes down to life and death, I've always opted for life. Life may be tough, but death is so final. Once the trigger is pulled or the plunge is taken, there is no turning back. No matter how hard life is, it will always get better.

#### DRUG TREATMENT

(On behalf of Lucas Gockley and Aaron Gerhardt)

Lucas Gockley: We are here today to talk to you about the methadone maintenance treatment for heroin addicts. Heroin a highly addictive drug derived from morphine. Some of the long-term diseases stemming from heroin use are weight loss, heart disease, AIDS, and death, eventually.

In Vermont, heroin use is increasing dramatically. In 1994, 118 people in a state-run treatment center said they used heroin. In 1996, 154 people said they were addicts. There has been a 50-percent increase in heroin use in the Rutland area alone. In 1997 in the Rutland area, there have been two drug store robberies and one bank robbery by heroin addicts looking for money to fund their habit. There have also been eight deaths due to heroin overdose in just Rutland County in 1996 and 1997.

State police figures show that crime due to heroin addiction has almost tripled in this state in a period between 1996 and 1997. Here at the university, there is a federally-funded detox center run by UVM's Dr. Warren Diggle, and the figures show that 60 percent of the heroin addicts he sees are repeat visitors.

Heroin use is on the rise in Vermont, and help for addicts is virtually nonexistent. The only effective treatment is the methadone maintenance treatment.

Aaron Gerhardt: Vermont has no real treatment facilities which addicts who have a desire to get off of heroin can use.

One question to ask about methadone maintenance treatment is, Does it work? In the European Archives of Psychiatry and Clinical Neurosciences, researchers found that "MMT"—or methadone maintenance treatment—"centers have a real efficiency, not only to reduce illicit opiate abuse between 50 and 80 percent, but also to reduce criminality, HIV risk, and mortality, and also to improve social rehabilitation without introducing other alternative substance abuse." Another study published in the American Journal of Drug and Alcohol Abuse found that heroin addicts who go through methadone treatment are less likely to use cocaine, amphetamines, tranquilizers and marijuana. It is clear that MMT does work.

The reason that MMI facilities need to be government-funded is because, currently, Medicare and Medicaid do not cover methadone maintenance treatments, and, frankly, the treatment is too expensive for the average addict to pay for. So it is much easier for them to stay home, using the welfare, and continue using heroin, which just contributes to the cultural stereotype of the free-loading drug addict. Government funding can help ease the burden for the addict, and it shows a concern on the part of the government to help the individual. Instead of condemning them as criminals, it just makes them seem more that they have a problem, instead of being bad people.

Also, within these facilities, the need for confidentiality is imperative. Addicts have to have a place where they can go to and not feel threatened by the threat of prosecution, persecution, and shame. The MMT centers need to have flexible hours so that addicts who are trying to stay productive members of society can go to them. A nine-to-five day for a center being open is not that feasible for an addict who is trying to hold a day job. Simply put, the best time for the clinical centers to be open would be 24 hours a day, which, granted, would be a little bit inconvenient for people, but for the addict, it helps.

It is also very important that these centers have counseling facilities available, and counselors available. The chances of success in methadone maintenance treatment greatly increases with psychotherapy. According to a 1995 study published in The Journal of Psychiatry, addicts who underwent psychotherapy were much more likely to complete the treatment and become well-rounded, productive members of society once more, and stay off the heroin.

So, over all, the benefits to Vermont are clear: MMT helps to lower crime, HIV risk, and death. Also, through MMI, addicts are more likely to stay off drugs for the rest of their lives and become productive members of society.

Congressman Sanders: Thanks. It sounds like you did some good research.

#### A TRIBUTE TO THE LATE DR. GENO SACCOMANNO

#### HON. SCOTT McINNIS

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 13, 1999

Mr. McINNIS. Mr. Speaker, it is with a heavy and saddened heart that I now rise to honor the incomparable life of a man who gave immeasurably to his community, state, nation and all of humanity: Dr. Geno Saccomanno. During the course of his distinguished life, Dr. Saccomanno performed seemingly infinite acts of compassion, care, and kindness that impacted, very literally, many hundreds of thousands of people. Today, Mr. Speaker, as family and friends remember the remarkable life of this great American, I too would like to pay tribute to Dr. Geno Saccomanno and thank him for the remarkable life of service that he led.

Beginning in 1948 and continuing until the last days of his life, Dr. Saccomanno served with widely acclaimed distinction as a medical researcher at St. Mary's Hospital in Grand Junction, Colorado. In his time there, he would quickly become a driving force behind the transformation of St. Mary's from a small rural hospital to a regional hub of medical service. Ultimately, the rise of St. Mary's Hospital to the position of stature it now enjoys is irrevocably tied to the extraordinary work that Dr. Saccomanno did on its behalf.

Beyond bringing great renown to St. Mary's Hospital, Dr. Saccomanno's tireless efforts in the field of lung cancer research—the cause to which he devoted his life, also earned him great personal acclaim as a leading figure within his profession. His exhaustive research of cancer within uranium miners, which witnessed his testing of nearly 18,000 uranium miners, was internationally lauded for the medical breakthroughs it produced. Dr. Saccomanno's sputum cytology method for lung cancer screening, one of the many offshoots of his research in this area, is still used by hospitals both in the United States and Japan.

In addition to these professional achievements, Dr. Saccomanno also published a medical textbook, 80 research papers and invented medical instruments—including a brush to take cervical samples for Pap smears and a tube used in lung cancer screening.

While medical history will long remember him for his research prowess, the Grand Junction community will always proudly recall Dr. Saccomanno as a philanthropist of unmatched generosity. A statement offered by Dr. Saccomanno several years ago embodies this notion: "To help people, in our opinion, is a privilege. There is no endeavor that gives more pleasure than helping those in need." More than a superficial credo, his statement appears to be the foundation upon which he led his life. In all, Dr. Saccomanno gave beyond measure to causes too many to list. Most notably, Dr. Saccomanno and his family established the Saccomanno Higher Education Foundation, a \$2.5 million endowment supporting high school graduates in need of financial support for college.

It is with this humble gesture, Mr. Speaker, that I say thank you and good-bye to a man