The amendments printed in House Report 106–263 may be offered only by a Member designated in the report and only at the point in the reading of the bill, shall be considered read, debatable for the time specified in the report, equally divided and controlled by the proponent and an opponent, and shall not be subject to amendment.

During consideration of the bill for amendment, the Chair may accord priority in recognition to a Member offering an amendment that he has printed in the designated place in the Congressional Record. Those amendments will be considered read.

The Speaker pro tempore shall be recognized to a Member offering an amendment that he has printed in the Congressional Record. The Clerk reads as follows:

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the following sums expressed in dollars and cents, shall be appropriated out of any money in the Treasury, namely:

**TITLE I—FISCAL YEAR 2000 APPROPRIATIONS**

**FEDERAL FUNDS**

**FEDERAL PAYMENT FOR RESIDENT TUITION SUPPORT**

For a Federal payment to the District of Columbia for a program to be administered by the Mayor for District of Columbia resident tuition support, subject to the enactment of authorizing legislation for such program by Congress, $17,000,000, to remain available until expended: Provided, That such funds shall be used on behalf of eligible District of Columbia residents to pay an amount based upon the difference between in-State and out-of-State tuition at public institutions of higher education, usable at both public and private institutions of higher education anywhere within the United States: Provided further, That the awarding of such funds shall be prioritized on the basis of a resident’s academic merit and such other factors as may be authorized.

**FEDERAL PAYMENT FOR INCENTIVES FOR ADOPTION OF CHILDREN**

For a Federal payment to the District of Columbia to create incentives to promote the adoption of children in the District of Columbia foster care system, $8,500,000: Provided, That such funds shall remain available until September 30, 2001 and shall be used in accordance with a program established by the Mayor and the Council of the District of Columbia and approved by the Committees on Appropriations of the House of Representatives and the Senate.

Mr. BILBRAY. Mr. Chairman, I ask unanimous consent to consider my amendment out of order.

The CHAIRMAN. Is there objection to the request of the gentleman from California?
There was no objection.

AMENDMENT No. 3 OFFERED by Mr. BILBRAY
Mr. BILBRAY. Mr. Chairman, I offer an amendment...

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 3 printed in House Report 106-263 offered by Mr. BILBRAY: Page 63, insert at line 24 the following:

banning possession of tobacco products by minors

SEC. 167. (a) In General.—It shall be unlawful for any individual under 18 years of age to possess any cigarette or other tobacco product in the District of Columbia.

(b) EXCEPTIONS.—
(1) Possession in Course of Employment.—Subsection (a) shall not apply with respect to an individual making a delivery of cigarettes or tobacco products in pursuance of employment.

(2) Participation in Law Enforcement Operation.—Subsection (a) shall not apply with respect to an individual possessing products in the course of a valid, supervised law enforcement operation.

(c) PENALTIES.—Any individual who violates subsection (a) shall be subject to the following penalties:
(1) For any violation, the individual may be required to perform community service or attend a tobacco cessation program.
(2) Upon the first violation, the individual shall be subject to a civil penalty not to exceed $50.
(3) Upon the second and each subsequent violation, the individual shall be subject to a civil penalty not to exceed $100.
(4) Upon the third and each subsequent violation, the individual may have his or her driving privileges in the District of Columbia suspended for a period of 5 consecutive days.

(d) EFFECTIVE DATE.—This section shall apply during fiscal year 2000 and each succeeding fiscal year.

The CHAIRMAN. Pursuant to House Resolution 260, the gentleman from California (Mr. BILBRAY) and a Member opposed each will control 10 minutes.

The Chair recognizes the gentleman from California (Mr. BILBRAY).

Mr. BILBRAY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this year, I reintroduced an amendment to the D.C. bill to specifically address the issue that Washington, D.C. has been and continues to be a sanctuary for underaged consumption and possession of tobacco.

While Washington, D.C. has endeavored to reform and transform itself as quickly as possible on many fronts, it has not addressed the issue that it continues to be the only jurisdiction within hundreds of miles of the Capitol still allowing underaged individuals to consume and possess tobacco products.

I was intending, Mr. Chairman, to ask for a vote on this amendment. The amendment passed overwhelmingly last year and I think sent a clear message not only to Washington, D.C. that this is wrong and inappropriate but to every jurisdiction in the United States and especially to the children of this city and to the children of America, that minor’s possession and use of tobacco is not acceptable to this Congress.

Mr. Chairman, I intend to withdraw this motion, and I intend to withdraw it because I have received, on July 27, a letter from Mayor Williams specifically committing to introducing legislation that seeks to prohibit teen tobacco use.

I talked last night with the mayor, Mr. Chairman, and he personally committed to me that he will aggressively pursue this issue. He has stated that he thinks it is an outrage that Congress and Washington has not addressed this issue in the past and overlooked this issue, something that all of us could have done a long time ago.

The mayor agrees with me that, if we are going to stand up and point fingers at businesses and individuals who continue to encourage individuals to smoke, then we have an obligation to point a finger at ourselves and say even those of us in Congress and those of us in Washington have not done our fair share of addressing this hideous problem.

So, Mr. Chairman, I would ask that we give the new mayor of Washington, D.C. a chance to initiate this legislation locally and that we hold this amendment in abeyance for this year and give them the chance to do the right thing that should have been done a long time ago.

I make a personal commitment that I will work with the mayor and the city council, but I also make the personal commitment that if Washington, D.C.’s local government agencies will not do right by the children of this city and by the children that come and visit the city, then I, along with the majority of this body, will take action to alleviate the problem.

I think Mayor Williams has made a sincere request. As an ex-mayor myself, I cannot deny him this chance to make his contribution to eliminating smoking and tobacco use by children.

I do want to thank the gentleman from California (Mr. BILBRAY), though, for the way in which he pursued this and to indicate to other Members that he went at this matter in a way that was satisfactory to him and to us in the way I most prefer, by simply working with me until we got it right. I appreciate the way in which he worked with me and with the city.

I want to assure other Members that I always stand ready to work, to reach a similar accommodation when they have problems that they want solved in the city.

Mr. BILBRAY. Mr. Chairman, I offer the gentleman from California (Ms. NORTON) for working with me and with the city.

Ms. NORTON. I yield to the gentleman.

Mr. BILBRAY. Mr. Chairman, I thank the gentleman from California (Ms. NORTON) for yielding to me.

Ms. NORTON. I would like to begin as I did in the Appropriations Committee by thanking Chairman ISTOOK for the way he has chaired this committee and close to $20 million to help the District of Columbia by walking the city’s streets, meeting with Mayor Williams and the City Council on several occasions, and touring the District’s schools, its low income housing, the courts and the administrative offices.

I know he shares my observation that many of the challenges and issues confronting the District are identical to those confronting most older urban communities.

At the same time, there are a number of circumstances that make the District unique: it’s a creation by Congress under Article I of the U.S. Constitution and the seat of the federal government; it has a large amount of federal property within its boundaries, and its local laws and budget may be subject to congressional review and approval.

The fact that we are considering the District of Columbia Appropriations Act for fiscal Year 2000 reflects the District’s unique status.

In reviewing this legislation, let me begin by highlighting some of its positive aspects: it fully funds the consensus budget both the spending priorities and the tax cuts; it provides the federal funding level requested by the administration; in fact, it brings additional federal money to the District’s aid, providing $8.5 million for adoption incentives for foster children; $20 million for severance pay for the Mayor’s management initiative; more than $13 million for expanded drug treatment programs; $17 million to fund the in-state tuition benefits initiative and close to $30 million to help the Office of Offender Supervision tackle the very
serious crime problems caused by repeat offenders; and it helps address a number of city concerns from the operation of the District’s courts to staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.

Mr. Chairman, I am speaking from a position as coming from a local government agency; but I think anyone in this House who would realize no State, no jurisdiction is more anti-smoking than the State of California. Some of us call it zealos. Even restaurants and bars do not allow smoking in California. We are told quite clearly that they are going to be held responsible for staying away from tobacco products as much as possible.
example; and, hopefully today, while we are discussing this, there are mayors, council members and legislators out there who will ask, is it illegal in our jurisdiction; have we done as much to send a clear message to children as Washington, D.C. is committed to doing today?

Mr. Chairman, I hope all of us will look at ourselves and ask what have we done to keep our children away from tobacco; and I think this amendment, when it is passed by the city of D.C., will send that message.

Mr. Chairman, the letters referred to above follow herewith:


Hon. Brian Bilbray,
U.S. House of Representatives,
Washington, DC.

Dear Speaker Bilbray: Thank you for your July 8th letter regarding your continued efforts to fight the damaging effects of teen smoking and your continuing contact with me. I appreciate and respect your concern on this issue, and indeed share your goal of greatly reducing the consumption of tobacco by minors. I believe an amendment to the FY 1999 District of Columbia Appropriations bill would not be the appropriate vehicle. I am asking you to withdraw the proposed amendment and allow elected District officials to pursue the issues.

As our offices have discussed we share a common goal of reducing teen tobacco consumption. In fact, I have often stated that the care and safety of the District’s children is my top priority. To this end, I have spoken with Councilmember Sandy Allen, the Chair of the Human Services Committee, and she has agreed to hold a public hearing on the issue of teen smoking as soon as the Council convenes after its recess. In addition, I will introduce legislation that seeks to ban the sale of tobacco products to minors.

We firmly believe that children who become addicted to tobacco are victims of an industry whose own stated goal is to find “replacement smokers” for the hundreds of thousands of people who die each year from using their products. By targeting children with billions in marketing and advertising dollars, the tobacco industry has been very successful in maintaining a customer base, in spite of the 439,000 American deaths from tobacco use each year. Adults in the tobacco industry and retail establishments that facilitate underage marketing of tobacco products—nearly all of these are the ones who need to be penalized. Unfortunately, the United States Congress has not yet cleared the hook.

Because the repercussions of tobacco use are not always immediately apparent to young people, recognizing the motive to provide immediate gratification to children who are caught with tobacco. We are not opposed to finding ways to educate children on the dangers and consequences of tobacco use and we would willingly work with you in the future to accomplish this. However, unless this amendment is part of a comprehensive approach, which includes restricting access to tobacco products that is my top priority. To this end, I have spoken with Councilmember Sandy Allen, the Chair of the Human Services Committee, and she has agreed to hold a public hearing on the issue of teen smoking as soon as the Council convenes after its recess. In addition, I will introduce legislation that seeks to ban the sale of tobacco products to minors.

I look forward to your continued support and good wishes. I appreciate your willingness to work with local officials on this issue.

Sincerely,

Anthony A. Williams, Mayor

American Heart Association, Office of Communications and Advocacy

Washington, DC.

Dear Representative Bilbray: I am writing to express the concerns of the American Heart Association regarding your possible amendment to the District of Columbia Appropriations bill (H.R. 2987), that would penalize D.C. children who are caught with cigarettes or other tobacco products.

We firmly believe that children who become addicted to tobacco are victims of an industry whose own stated goal is to find “replacement smokers” for the hundreds of thousands of people who die each year from using their products. By targeting children with billions in marketing and advertising dollars, the tobacco industry has been very successful in maintaining a customer base, in spite of the 439,000 American deaths from tobacco use each year. Adults in the tobacco industry and retail establishments that facilitate underage marketing of tobacco products—nearly all of these are the ones who need to be penalized. Unfortunately, the United States Congress has not yet cleared the hook.

Because the repercussions of tobacco use are not always immediately apparent to young people, recognizing the motive to provide immediate gratification to children who are caught with tobacco. We are not opposed to finding ways to educate children on the dangers and consequences of tobacco use and we would willingly work with you in the future to accomplish this. However, unless this amendment is part of a comprehensive approach, which includes restricting access to tobacco products that is my top priority. To this end, I have spoken with Councilmember Sandy Allen, the Chair of the Human Services Committee, and she has agreed to hold a public hearing on the issue of teen smoking as soon as the Council convenes after its recess. In addition, I will introduce legislation that seeks to ban the sale of tobacco products to minors.

I look forward to your continued support and good wishes. I appreciate your willingness to work with local officials on this issue.

Sincerely,

Anthony A. Williams, Mayor

American Heart Association, Office of Communications and Advocacy

Washington, DC.

Dear Representative Bilbray: I am writing to express the concerns of the American Heart Association regarding your possible amendment to the District of Columbia Appropriations bill (H.R. 2987), that would penalize D.C. children who are caught with cigarettes or other tobacco products.

We firmly believe that children who become addicted to tobacco are victims of an industry whose own stated goal is to find “replacement smokers” for the hundreds of thousands of people who die each year from using their products. By targeting children with billions in marketing and advertising dollars, the tobacco industry has been very successful in maintaining a customer base, in spite of the 439,000 American deaths from tobacco use each year. Adults in the tobacco industry and retail establishments that facilitate underage marketing of tobacco products—nearly all of these are the ones who need to be penalized. Unfortunately, the United States Congress has not yet cleared the hook.

Because the repercussions of tobacco use are not always immediately apparent to young people, recognizing the motive to provide immediate gratification to children who are caught with tobacco. We are not opposed to finding ways to educate children on the dangers and consequences of tobacco use and we would willingly work with you in the future to accomplish this. However, unless this amendment is part of a comprehensive approach, which includes restricting access to tobacco products that is my top priority. To this end, I have spoken with Councilmember Sandy Allen, the Chair of the Human Services Committee, and she has agreed to hold a public hearing on the issue of teen smoking as soon as the Council convenes after its recess. In addition, I will introduce legislation that seeks to ban the sale of tobacco products to minors.

I look forward to your continued support and good wishes. I appreciate your willingness to work with local officials on this issue.

Sincerely,

Anthony A. Williams, Mayor

American Heart Association, Office of Communications and Advocacy

Washington, DC.
CONGRESSIONAL RECORD—HOUSE
July 29, 1999

18620

(H.R. 3380) that prohibited individuals under the age of 18 from purchasing consuming tobacco products in the District of Columbia. This amendment received strong bipartisan support and passed through the House by a 238-138 vote on August 6, 1999. The amendment would have added the District of Columbia to this growing list of states. My amendment was very straightforward and easy to understand. It contained a provision to exempt from this prohibition a minor individual “making a delivery of cigarettes or tobacco products in his or her employment” while on the job.

My amendment also contained a penalty section, which was modeled after the state of Virginia’s penalty section for minors found in violation of tobacco possession. For the first violation, the minor would, at the discretion of the judge, be subject to a civil penalty not to exceed $50. For the second violation, the minor would be subject to a civil penalty not to exceed $100. For a third or subsequent violation, the minor would have his or her driver’s license suspended for a period of 90 consecutive days. The 90 day suspension is consistent with penalties for minor possession of alcohol in the District of Columbia. Any minor found to be in possession of tobacco may also be required to perform community service or attend a tobacco cessation program. Each of these penalties are at the judge’s discretion.

I understand that the District of Columbia already has tough laws on the books to address the issue of sales of tobacco to minors. My amendment focused specifically on the possession of tobacco products by minors in order to put minor possession of tobacco with minor possession of alcohol. All three cities in my district have passed anti-possession laws, so I am not asking the District to do anything my own communities have not already done.

I was an original cosponsor of the strongest anti-tobacco bill in the 106th Congress, the Bipartisan Tobacco Bill (H.R. 3868). The intention of my amendment was to encourage youth to take responsibility for their actions. If individuals under the age of 18 know they will face a penalty for possession of tobacco, they might be deterred from ever starting to smoke in the first place.

As we move forward in the 106th Congress, I would like to know whether you plan to address this issue at the local level. I think it is important that all levels of government work together to help stop children from smoking. I also believe we should send the right message to our children, and the first step in this process would be for the District of Columbia to join Virginia, Maryland, and the twenty other states who have passed youth possession and consumption laws. I would appreciate knowing of your intentions, and to work with you and Members on both sides of the aisle in 1998 to make sure this important piece of legislation becomes law.

Again, congratulations on your new position as Mayor and I look forward to working with you in the future.

Sincerely,
BRIAN P. BILBRAY,
Member of Congress.


HON. BRIAN BILBRAY, U.S. House of Representatives, Washington, DC.

DEAR CONGRESSMAN BILBRAY: Thank you for your letter sharing your concern about youth smoking in the District and your congratulations on my November election to the Office of Mayor.

In response to your inquiry, the District of Columbia is addressing the issue of youth smoking through several means. DC Public Schools has two programs—The Great American Smoke-out and “2 Smart 2 Smoke”—to raise children’s awareness of the dangers of smoking. Additionally, the Department of Health supports the efforts of local and community-based initiatives like “Ad-Up, Word-Up and Speak-Out,” which encourages school age children to perform their own research on the effects of advertising directed at children.

Finally, the school system recently elevated possession of tobacco to a “level one” infraction—which means violators could incur the most severe disciplinary measures, including possible suspension. To assess our progress in the fight to discourage our youth from engaging in this terrible habit of smoking is very important in the fight to curtail tobacco’s tragic and inevitable long-term effects.

Sincerely,
ANTONY A. WILLIAMS, Mayor, District of Columbia, Washington, DC.

DEAR MAYOR WILLIAMS: I would like to thank you for your response to my letter regarding youth consumption amendment and the tobacco strategies in the District of Columbia. I appreciate the information you provided regarding the programs the D.C. public schools are implementing to combat youth smoking.

Again thank you for bringing this issue to the forefront of my attention. I agree that discouraging our youth from engaging in this terrible habit of smoking is very important in the fight to curtail tobacco’s tragic and inevitable long-term effects.

Sincerely,
ANTONY A. WILLIAMS, Mayor, District of Columbia, Washington, DC.

Mr. BILBRAY. Mr. Chairman, I ask unanimous consent to withdraw my amendment.


HON. ANTHONY WILLIAMS, Mayor, District of Columbia, Washington, DC.

DEAR MAYOR WILLIAMS: I would like to thank you for responding to my letter regarding youth consumption amendment and the tobacco strategies in the District of Columbia. I appreciate the information you provided regarding the programs the D.C. public schools are implementing to combat youth smoking.

As I mentioned in my first letter, in the 106th Congress I introduced an amendment to H.R. 3380, FY 1999 District of Columbia Appropriations bill that sought to prohibit individuals under the age of 18 from possessing and consuming tobacco products in the District of Columbia. This amendment received strong bipartisan support and passed through the House by a 238-138 vote on August 6, 1998.

I intend to reintroduce this amendment to the FY 2000 D.C. Appropriations Bill later in the year when Congress takes up this legislation. I believe at the same time we are educating youths about the dangers of tobacco and curtailing advertisements by the tobacco industry, we need to strive for new and innovative ways to reduce tobacco use along with sending a clear message that we will not tolerate the consumption of tobacco. This is what a youth consumption law in the District will accomplish.

My amendment contains a penalty section, which is modeled after the state of Virginia’s penalty section for minors found in violation of tobacco possession. For the first violation, the minor would, at the discretion of the judge, be subject to a civil penalty not to exceed $50. For the second violation, the minor would be subject to a civil penalty not to exceed $100. For a third or subsequent violation, the minor would have his or her driver’s license suspended for a period of 90 consecutive days. The 90 day suspension is consistent with penalties for minor possession of alcohol in the District of Columbia. Any minor found to be in possession of tobacco may also be required to perform community service or attend a tobacco cessation program. Each of these penalties are at the judge’s discretion (I have attached a draft of my amendment for your convenience).

Again, thank you for responding to my original letter and I look forward to working with you on this important issue. Please feel free to contact me if you have any additional questions.

Sincerely,
BRIAN P. BILBRAY, Member of Congress.

Mr. BILBRAY. Mr. Chairman, I ask unanimous consent to withdraw my amendment.

The CHAIRMAN. Is there objection to the request of the gentleman from California?

There was no objection.

The CHAIRMAN. The amendment is withdrawn.

Mr. TIAHRT. Mr. Chairman, I move to strike the last word.

Mr. CHAIRMAN. Mr. Chairman, I rise today to enter into a colloquy with the distinguished chairman of the Subcommittee on the District of Columbia of the Committee on Appropriations, the gentleman from Oklahoma (Mr. ISTOOK).

Mr. CHAIRMAN. Mr. Chairman, I want to thank the gentleman from Oklahoma for his support in providing $250,000 in the bill to continue the mentoring program for at-risk children and the resource hotline for low-income individuals in the District.

Last year, Congress appropriated $250,000 to the International Youth Service and Development and Corporation to provide these worthwhile and much-needed services to the District. The program has had the privilege to visit the southeast White House in Anacostia, where some of these services are provided to low-income citizens and at-risk children. I am pleased to report to the Congress that this minor allocation of $250,000 is making a real difference in the lives of many families who were struggling to survive and protect their children who are at risk in their community.

Mr. CHAIRMAN. The amendment is withdrawn.
Is it the chairman's intention that this appropriation of $250,000 be used by the city to entertain the good work which is currently being accomplished by the International Youth Service Development Corporation?

Mr. ISTOOK. Mr. Chairman, will the gentleman yield?

Mr. TIAHRT. I yield to the gentleman from Oklahoma.

Mr. ISTOOK. Mr. Chairman, I want to first thank the gentleman from Kansas (Mr. TIAHRT) for his hard work in this area. I know personally how active and vocal he has been as an advocate for the families and their children in the District that are most at risk.

The gentleman is correct that we have worked with the District and provided funding for them, which they are using to carry on this program that the gentleman has been discussing, and we are happy to be able to do that so that this work might continue and that the District might be able to work with him to do so.

Mr. TIAHRT. Mr. Chairman, I thank the gentleman for his comments.

Mr. ISTOOK. Mr. Chairman, I ask unanimous consent that the bill through page 25, line 12 be considered as read, printed in the RECORD, and open to amendment at any point.

The CHAIRMAN. Is there objection to the request of the gentleman from Oklahoma?

There was no objection.

The text of the bill from page 3, line 7, through page 25, line 12 is as follows:

FEDERAL PAYMENT TO THE CITIZEN COMPLAINT REVIEW BOARD

For a Federal payment to the District of Columbia for administrative expenses of the Citizens' Complaint Review Board, not to exceed $250,000, to remain available until September 30, 2001.

FEDERAL PAYMENT TO THE DEPARTMENT OF HUMAN SERVICES

For a Federal payment to the Department of Human Services for a mentoring program and for Head Start, not to exceed $250,000.

FEDERAL PAYMENT TO THE DISTRICT OF COLUMBIA CORRECTIONS TRUSTEE OPERATIONS

For salaries and expenses of the District of Columbia Corrections Trustee, $183,000,000 for the administration and operation of correctional facilities and for the administrative operating costs of the Office of the Corrections Trustee, as authorized by section 11292 of the National Capital Revitalization and Self-Government Improvement Act of 1997 (Public Law 105–33, approved August 5, 1997; 111 Stat. 712): Provided, That notwithstanding any other provision of law, this appropriation shall be apportioned quarterly by the Office of Management and Budget and obligated and expended in the same manner as funds appropriated for salaries and expenses of other Federal agencies, with payroll and financial services to be provided on a contractual basis with the General Services Administration, said services to include the preparation of monthly financial reports, copies of which shall be submitted directly by GSA to the President and to the Committees on Appropriations of the House of Representatives and the Senate: Provided further, That notwithstanding any other provision of law, and in this heading, that all employees permanently assigned to the District of Columbia shall be paid from funds allocated to the Office of the Mayor: Provided further, That the District of Columbia shall identify the sources of funding for Admission to Statehood from its own locally-generated revenues: Provided further, That all employees permanently assigned to work in the Office of the Administration shall be paid from funds allocated to the Office of the Mayor.

FEDERAL PAYMENT TO THE COURT SERVICES AND OFFENDER SUPERVISION AGENCY FOR THE DISTRICT OF COLUMBIA

For salaries and expenses of the Court Services and Offender Supervision Agency for the District of Columbia, as authorized by the National Capital Revitalization and Self-Government Improvement Act of 1997, as amended (Public Law 108–53, approved August 8, 1997; 111 Stat. 712); $135,500,000, of which $69,400,000 shall be for necessary expenses of Parole Revocation, Adult Probation and Offender Supervision, to include expenses relating to offenders subject to protection orders or provision of services for or related to such persons; $17,400,000 shall be available to the Public Defender Services and Pretrial Services Agency: Provided, That notwithstanding any other provision of law, all amounts under this heading shall be apportioned quarterly by the Office of Management and Budget and obligated and expended in the same manner as funds appropriated for salaries and expenses of other Federal agencies, with payroll and financial services to be provided on a contractual basis with the General Services Administration, said services to include the preparation of monthly financial reports, copies of which shall be submitted directly by GSA to the President and to the Committees on Appropriations of the House of Representatives and the Senate: Provided further, That notwithstanding any other provision of law, and in this heading, that all employees permanently assigned to work in the Office of the Mayor shall be paid from funds allocated to the Office of the Mayor: Provided further, That the District of Columbia shall identify the sources of funding for Admission to Statehood from its own locally-generated revenues: Provided further, That all employees permanently assigned to work in the Office of the Administration shall be paid from funds allocated to the Office of the Mayor.

ECONOMIC DEVELOPMENT AND REGULATION

Economic development and regulation, $190,335,000 (including $52,911,000 from local funds, $13,552,000 from other funds): Provided, That such funds shall be available for the payment of expenses of the debt management program of the District of Columbia: Provided further, That no revenues from Federal sources shall be used for the payment of expenses of the debt management program of the District of Columbia in the form of BID tax revenue shall be paid to the respective BIDs pursuant to the Business Improvement Districts Act of 1996 (D.C. Law 11–134; D.C. Code, sec. 1–2271 et seq.), and the Business Improvement Districts Temporary Amendment Act of 1997 (D.C. Law 12–23; D.C. Code, sec. 1–2271 et seq.), that such funds are available for acquiring services provided by the National Capital Revitalization and Self-Government Improvement Act of 1997 (D.C. Law 11–134; D.C. Code, sec. 1–2271 et seq.), and the Business Improvement Districts Temporary Amendment Act of 1997 (D.C. Law 12–23; D.C. Code, sec. 1–2271 et seq.).
of Fire and Emergency Medical Services of the District of Columbia is authorized and directed to place not to exceed five passenger-carrying vehicles annually whenever the cost of repair to any damaged vehicle exceeds three-fourths of the replacement value: Provided further, That not to exceed $500,000 shall be available from this appropriation for the Chief of Police for the prevention and detection of police corruption: Provided further, That the Metropolitan Police Department shall provide quarterly reports to the Committees on Appropriations of the House and Senate on efforts to improve the professionalism in the department: Provided further, That notwithstanding any other provision of law, or Mayor’s Order 86-45, issued March 18, 1986, the Metropolitan Police Department’s delegated small purchase authority shall be $500,000: Provided further, That the Mayor of the District of Columbia government may not require the Metropolitan Police Department to submit to any other procurement review process, or to obtain the approval of or be restricted in any manner by any official or employee of the District of Columbia government, for purchases that do not exceed $500,000: Provided further, That the Mayor of the District of Columbia National Guard for expenses incurred in connection with services that are performed in emergencies by the National Guard in a militia status and are requested by the Mayor, in amounts that shall be jointly determined and certified as due and payable for these services by the Mayor and the Commanding General of the District of Columbia National Guard: Provided further, That such sums as may be necessary for reimbursement to the District of Columbia National Guard under section 235 of the District of Columbia Financial Responsibility and Management Assistance Act of 1985, approved June 30, 1985 (109 Stat. 485; Public Law 99–198; 42 U.S.C. 11301 et seq.), and the District of Columbia government under court ordered receivership, in the amount of $3,099,000 from Federal funds, and $5,855,000 from other funds): Provided, That none of the funds contained in this Act may be made available to pay the salaries of any District of Columbia Public School teacher, principal, administrator, official, or employee who knowingly provides false enrollment or attendance information: Provided further, That the Metropolitan Police Department is authorized to accept not to exceed 31 motor vehicles for exclusive use in the driver training program: Provided further, That not to exceed $2,500 for the Superintendent of Schools, $2,500 for the President of the University of the District of Columbia, and the Chancellor of the University of the District of Columbia; $24,171,000 (including $23,128,000 from local funds, $798,000 from Federal funds and $240,800 other funds) for the Public Library; $2,111,000 (including $1,707,000 from local funds and $404,000 from Federal funds) for the Commission on the Arts and Humanities; Provided further, That the public schools of the District of Columbia are authorized to accept not to exceed $72,885,000 from local funds for police protection: Provided further, That not to exceed $72,885,000 from local funds for police protection: Provided further, That none of the Federal funds contained in this Act may be made available to pay the salaries of any District of Columbia employee’s disability compensation: Provided further, That a peer review committee shall be established by the District of Columbia government under court ordered receivership, to recommend a list of sums as may be necessary for reimbursement pursuant to such Act (101 Stat. 485; Public Law 100–77; 42 U.S.C. 11301 et seq.).

PUBLIC WORKS

Public works, including rental of one passenger-carrying vehicle for use by the Mayor and three passenger-carrying vehicles for use by the Council of the District of Columbia and leasing of passenger-carrying vehicles, $271,395,000 (including $258,341,000 from local funds, $3,099,000 from Federal funds, and $5,855,000 from other funds): Provided, That the Metropolitan Police Department shall provide quarterly reports to the Committees on Appropriations of the House and Senate on efforts to improve the professionalism in the department: Provided further, That the District of Columbia government may not require the Metropolitan Police Department to submit to any other procurement review process, or to obtain the approval of or be restricted in any manner by any official or employee of the District of Columbia government, for purchases that do not exceed $500,000: Provided further, That the Mayor of the District of Columbia National Guard for expenses incurred in connection with services that are performed in emergencies by the National Guard in a militia status and are requested by the Mayor, in amounts that shall be jointly determined and certified as due and payable for these services by the Mayor and the Commanding General of the District of Columbia National Guard: Provided further, That such sums as may be necessary for reimbursement to the District of Columbia National Guard under section 235 of the District of Columbia Financial Responsibility and Management Assistance Act of 1985, approved June 30, 1985 (109 Stat. 485; Public Law 99–198; 42 U.S.C. 11301 et seq.), and the District of Columbia government under court ordered receivership, in the amount of $3,099,000 from Federal funds, and $5,855,000 from other funds): Provided, That none of the funds contained in this Act may be made available to pay the salaries of any District of Columbia Public School teacher, principal, administrator, official, or employee who knowingly provides false enrollment or attendance information: Provided further, That the Metropolitan Police Department is authorized to accept not to exceed 31 motor vehicles for exclusive use in the driver training program: Provided further, That not to exceed $2,500 for the Superintendent of Schools, $2,500 for the President of the University of the District of Columbia, and the Chancellor of the University of the District of Columbia; $24,171,000 (including $23,128,000 from local funds, $798,000 from Federal funds and $240,800 other funds) for the Public Library; $2,111,000 (including $1,707,000 from local funds and $404,000 from Federal funds) for the Commission on the Arts and Humanities; Provided further, That the public schools of the District of Columbia are authorized to accept not to exceed $72,885,000 from local funds for police protection: Provided further, That not to exceed $72,885,000 from local funds for police protection: Provided further, That none of the Federal funds contained in this Act may be made available to pay the salaries of any District of Columbia employee’s disability compensation: Provided further, That a peer review committee shall be established by the District of Columbia government under court ordered receivership, to recommend a list of
be allocated for expenses associated with the Wilson Building, $52,617,000 from local funds: Provided, That for equipment leases, the Mayor may finance $27,527,000 of equipment cost, plus cost of issuance not to exceed two percent of the par amount being financed, on a lease-purchase basis with a maturity not to exceed five years: Provided further, That $5,300,000 is allocated for expenses associated with the Fire and Emergency Medical Services Department, $350,000 for the Department of Corrections, $15,949,000 for the Department of Public Works and $2,728,000 for the Public Benefit Corporation.

REPAYMENT OF GENERAL FUND RECOVERY DEBT
For the purpose of eliminating the $331,589,000 general fund cumulative deficit as of September 30, 1990, $38,286,000 from local funds, as authorized by section 461(a) of the District of Columbia Home Rule Act, approved December 24, 1973, as amended (105 Stat. 54; Public Law 102-106; D.C. Code, sec. 47-321(a)(1)).

PAYMENT OF INTEREST ON SHORT-TERM BORROWING
For payment of interest on short-term borrowing of $10,000,000 from local funds.

CERTIFICATES OF PARTICIPATION
For lease payments in accordance with the Certificates of Participation involving the land site underlying the building located at One Judiciary Square, $7,850,000 from local funds.

OPTICAL AND DENTAL PAYMENTS
For optical and dental payments, $1,295,000 from local funds.

PRODUCTIVITY BANK
The Chief Financial Officer of the District of Columbia, under the direction of the Mayor and the District of Columbia Financial Responsibility and Management Assistance Authority, shall finance projects totaling $20,000,000 in local funds that result in cost savings or additional revenues, by an amount equal to such financing: Provided, That the Chief Financial Officer shall provide quarterly reports to the Committees on Appropriations of the House of Representatives and the Senate by the 15th calendar day after the end of each quarter beginning December 31, 1999, on the status of the projects financed under this heading.

PRODUCTIVITY BANK SAVINGS
The Chief Financial Officer of the District of Columbia, under the direction of the Mayor and the District of Columbia Financial Responsibility and Management Assistance Authority, shall make reductions of not to exceed two percent of the par amount being financed on a lease-purchase basis with a maturity not to exceed five years: Provided further, That $5,300,000 is allocated to the Metropolitan Police Department, $3,200,000 for the Fire and Emergency Medical Services Department, $350,000 for the Department of Corrections, $15,949,000 for the Department of Public Works and $2,728,000 for the Public Benefit Corporation.

ENTERPRISE AND OTHER FUNDS

WATER AND SEWER AUTHORITY AND THE WASHINGTON AQUEDUCT
For operation of the Water and Sewer Authority and the Washington Aqueduct, $279,608,000.

For construction projects, $197,169,000, as authorized by An Act authorizing the laying of watermains and service sewers in the District of Columbia, the levying of assessments therefor, and for other purposes, approved April 22, 1904 (31 Stat. 234; Public Law 58-140; D.C. Code, sec. 4-1512 et seq.): Provided, That the requirements and restrictions that are applicable to general purpose improvements projects and set forth in this Act under the Capital Outlay appropriation title shall apply to projects approved under this appropriation title.

LOTTERY AND CHARITABLE GAMES ENTERPRISE FUND
For the Lottery and Charitable Games Enterprise Fund, established by the District of Columbia Appropriation Act for the fiscal year ending September 30, 1982, approved December 4, 1981 (95 Stat. 1174, 1175; Public Law 97-91), as amended, for the purpose of implementing the law to Legalize Lotteries, Daily Numbers Games, and Bingo and Raftles for Charitable Purposes in the District of Columbia, effective March 10, 1981 (D.C. Law 3-172; D.C. Code, sec. 3-1721 et seq.), $234,400,000: Provided, That the Mayor shall apply to projects approved under this appropriation title.

WASHINGTON CONVENTION CENTER ENTERPRISE FUND
For the Washington Convention Center Enterprise Fund, $50,226,000 from other funds.

D.C. RETIREMENT BOARD
For the D.C. Retirement Board, established by section 121 of the District of Columbia Retirement Reform Act of 1979, approved November 17, 1979 (82 Stat. 1711; D.C. Code, sec. 1-111), $9,892,000 from the earnings of the applicable retirement funds to pay legal, management, investment, and other fees and administrative expenses of the District of Columbia Retirement Board: Provided, That the District of Columbia Retirement Board shall provide to the Congress and to the Council of the District of Columbia the report of the allocations of charges by fund and of expenditures of all funds: Provided further, That the District of Columbia Retirement Board shall provide the Mayor, for transmittal to the Council of the District of Columbia, an itemized accounting of the planned use of appropriated funds in time for the preparation of the District's annual budget and actual use of such funds in time for each annual audited financial report: Provided further, That section 121(c)(1) of the District of Columbia Retirement Reform Act (D.C. Code, sec. 1-711(c)(1)) is amended by striking "the total amount to which a member may be entitled'' and all that follows and inserting the following: "the total amount to which a member may be entitled under this subsection during a year (beginning with 1998) may not exceed $5,000, except that in the case of the Chairman of the Board and the Chairman of the Investment Committee of the Board, such amount may not exceed $10,000 (beginning with 2001)."

CORRECTIONAL INDUSTRIES FUND
For the Correctional Industries Fund, established by the District of Columbia Correctional Industries Establishment Act, approved October 3, 1964 (78 Stat. 1000; Public Law 88-622), $1,810,000 from other funds.

CAPITAL OUTLAY (INCLUDING RESCISSIONS)
For construction projects, $1,260,524,000 of which $54,050,000 is from the highway trust fund, and $277,921,000 is from Federal funds, and a recission of $41,886,300 from local funds appropriated under this heading for fiscal years, for a net amount of $1,218,637,500 to remain available until expended: Provided, That funds used for each capital project implementing agency shall be managed and controlled in accordance with all procedures and limitations established under the Financial Management System: Provided further, That all funds provided by this appropriation title shall be available only for the specific projects and purposes intended: Provided further, That notwithstanding the foregoing, all authorizations for capital outlay projects, except those projects covered by the first sentence of section 23(a) of the Federal-Aid Highway Act of 1968, approved August 25, 1968 (62 Stat. 627; Public Law 90-494; D.C. Code, sec. 7-134, note), for which funds are provided by this appropriation title, shall expire on September 30, 2001, except authorizations for capital outlay projects as to which obligations have been obligated in whole or in part prior to September 30, 2001: Provided further, That upon expiration of any such project authorization, the funds provided herein for the project shall lapse.

The CHAIRMAN. Are there amendments to that portion of the bill?

SEC. 117. None of the Federal funds provided under this Act shall be expended to provide a personal cook, chauffeur, or other personal servants to any officer or employee of the District of Columbia.

SEC. 118. None of the Federal funds provided under this Act shall be made available to pay the salary of any employee of the District of Columbia government whose title, grade, salary, past work experience, and salary history are not available for inspection by the designated certifying official, the designated disbursing official, and the vouchers as approved shall be paid by checks issued by the designated disbursing official.

SEC. 119. (a) CITY ADMINISTRATOR.—The last sentence of section 422(j) of the District of Columbia Home Rule Act (D.C. Code, sec. 1–242.01) is amended by striking ‘‘, not to exceed’’ and all that follows and inserting a period.

(b) BOARD OF DIRECTORS OF REDEVELOPMENT LAND AGENCY.—Section 110(c)(2)(F) of the District of Columbia Government Comprehensive Merit Personnel Act of 1978 (D.C. Code, sec. 1–612.11(c)(2)(F)) is amended to read as follows:

‘‘(F) Redevelopment Land Agency board members shall be paid per diem compensation at rates established for allowances for privately owned automobiles and motorcycles used for the performance of official duties at rates established by the Mayor: Provided, That such rates shall not exceed the maximum prevailing rates for such vehicles as prescribed in the Federal Travel Regulations.’’


SEC. 121. No later than 30 days after the end of each fiscal year, the Mayor of the District of Columbia shall submit to the Council of the District of Columbia the new fiscal year revenue estimate and budget plan for the first quarter of fiscal year 2000. These estimates shall be used in the budget request for the fiscal year ending September 30, 2001. The officially revised estimates at midyear shall be used for the midyear report.

SEC. 122. No sole source contract with the District of Columbia government or any agency thereof may be renewed or extended without opening that contract to the competitive bidding process as set forth in section 303 of the District of Columbia Procurement Practices Act of 1980, as amended (D.C. Law 2–139; D.C. Code, sec. 1–1134.1, 1–1134.3, 1–1134.5), except that the District of Columbia government or any agency thereof may renew or extend sole source contracts for which competition is not feasible or practical: Provided, That the determination as to whether to invite the competitive bidding process has been made in accordance with duly promulgated rules and procedures and said determination has been reviewed and approved by the District of Columbia Financial Authority and the Senate and House of Representatives are notified in writing 30 days in advance of any ‘‘reprogramming’’ as set forth in this section.

SEC. 123. For purposes of the Balanced Budget and Emergency Deficit Control Act of 1985, the amount set forth in the Appropriations Act for the fiscal year ending September 30, 1985 (100 Stat. 1037; Public Law 99–177), as amended, the term ‘‘program, project, and activity’’ shall mean —
be synonymous with and refer specifically to each account appropriating Federal funds in this Act. Any sequestration order shall be applied to each of the accounts rather than to the aggregate total of those accounts: Provided, That sequestration orders shall not be applied to any account that is specifically exempted from sequestration by the Balanced Budget and Emergency Deficit Control Act of 1985.

Sec. 124. In the event a sequestration order is issued pursuant to the Balanced Budget and Emergency Deficit Control Act of 1985, approved December 12, 1985 (99 Stat. 1037: Public Law 99-177), as amended, after the amounts appropriated to the District of Columbia for the fiscal year involved have been paid to the District of Columbia, the Mayor of the District of Columbia shall pay to the Secretary of the Treasury, within 15 days after receipt of a request therefor from the Secretary of the Treasury, such amounts as are sequestered by the order: Provided, That the sequestration percentage specified in the order shall be applied proportionately to each of the appropriation accounts set forth in this Act that are not specifically exempted from sequestration by such Act.

Sec. 125. (a) An entity of the District of Columbia shall accept and use a gift or donation during fiscal year 2000 if—

1. the Mayor approves the acceptance and use of the gift or donation: Provided, That the Council of the District of Columbia may accept and use gifts without prior approval by the Mayor; and

2. the entity uses the gift or donation to carry out its authorized functions or duties.

(b) Each entity of the District of Columbia government shall keep accurate and detailed records of the acceptance and use of any gift or donation under section (a) of this section, include the name of the staff member supervising each gift or donation, and shall make such records available for audit and public inspection.

(c) For the purposes of this section, the term ‘entity of the District of Columbia government’ includes an independent agency of the District of Columbia.

(d) This section shall not apply to the District of Columbia Public Schools and the University of the District of Columbia, displaying previous and current organizational structure, and total expenditures and obligations, and total fiscal year expenditure projections versus budget, broken out on the basis of control center, responsibility center, and agency reporting code, and object class, and for all funds, non-appropriated funds, and capital financing:

1. current quarter expenditures and obligations, year-to-date expenditures and obligations, and total fiscal year expenditure projections versus budget, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funds, non-appropriated funds, and capital financing;

2. a list of each account for which spending is frozen and the amount of funds frozen, broken out by control center, responsibility center, detailed object, and for all funding sources;

3. a list of all active contracts in excess of $10,000 annually, which contains the name of each contractor; the budget to which the contract is charged, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funding sources;

4. reprogramming requests and reports that have been made by the University of the District of Columbia within the last quarter in compliance with applicable law; and

5. changes made in the last quarter to the organizational structure of the University of the District of Columbia, displaying previous and current control centers and responsibility centers, the names of the organizational entities that have been changed, the name of the person supervising each entity affected, and the reasons for the structural change.

(b) The Mayor, the Authority, and the Council shall provide the Congress by February 1, 2001, a summary, analysis, and recommendations on the information provided in the quarterly reports.

Sec. 126. None of the Federal funds provided in this Act may be used to pay the fees of an attorney who represents a party who prevails in an action, including an administrative proceeding, brought against the District of Columbia Public Schools under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.) if—

1. the hourly rate of compensation of the attorney exceeds the hourly rate of compensation under section 11-260(a)(3), District of Columbia Code; or

2. the maximum amount of compensation of the attorney exceeds the maximum amount of compensation under section 11-260(b)(4), District of Columbia Code, except that the maximum amount of compensation, in excess of such maximum may be approved for extended or complex representation in accordance with section 11-260(c), District of Columbia Code.

ABORTION FUNDS RESTRICTION

Sec. 129. None of the funds appropriated under this Act shall be expended for any abortion except where the life of the mother would be endangered if the fetus were carried to term or where the pregnancy is the result of an act of rape or incest.

DOMESTIC PARTNERS FUNDS RESTRICTION

Sec. 130. None of the funds made available in this Act may be used to implement or enforce this Health Care Benefits Expansion Act of 1992 (D.C. Law 9-114; D.C. Code, secs. 36-1401 et seq.) or to otherwise implement or enforce any system of registration of unmarried, cohabiting couples (whether homosexual, heterosexual, or lesbian), including, but not limited to registration for the purpose of extending employment, health, or any other benefit, on the same or a super-same basis that such benefits are extended to legally married couples.

Sec. 131. The Superintendent of the District of Columbia Public Schools shall submit to the Congress, the Mayor, the District of Columbia Financial Responsibility and Management Assistance Authority, and the Council of the District of Columbia no later than 15 calendar days after the end of each quarter a report that sets forth—

1. the number of validated schedule A positions in the District of Columbia public schools and the University of the District of Columbia for fiscal year 1999, fiscal year 2000, and thereafter on full-time equivalent basis, broken out by control center, responsibility center, funding source, position type, position title, pay plan, grade, and annual salary; and

2. a compilation of the employees in the District of Columbia public schools and the University of the District of Columbia as of the preceding December 31, verified as to its accuracy in accordance with the functions that each employee actually performs, by control center, responsibility center, funding source, position type, position title, pay plan, grade, and classification, annual salary, and position control number.

(b) SUBMISSION.—The annual report required by subsection (a) of this section shall be submitted to the Congress, the Mayor, the District of Columbia Council, the Consensus Commission, and the Authority, not later than February 15 of each year.

Sec. 132. (a) No later than October 1, 1999, or within 30 calendar days after the date of the enactment of this Act, which ever occurs later, the Superintendent of the District of Columbia Public Schools and the University of the District of Columbia shall submit to the appropriate congressional committees, the Mayor, the District of Columbia Council, the Consensus Commission, and the Authority, a detailed operating budget for the District of Columbia public schools and the University of the District of Columbia within the last quarter, in compliance with applicable law; and

1. current quarter expenditures and obligations, year-to-date expenditures and obligations, and total fiscal year expenditure projections versus budget, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funds, non-appropriated funds, and capital financing;

2. a list of each account for which spending is frozen and the amount of funds frozen, broken out by control center, responsibility center, detailed object, and for all funding sources;

3. a list of all active contracts in excess of $10,000 annually, which contains the name of each contractor; the budget to which the contract is charged, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funding sources;

4. reprogramming requests and reports that have been made by the University of the District of Columbia within the last quarter, in compliance with applicable law; and

5. changes made in the last quarter to the organizational structure of the University of the District of Columbia, displaying previous and current control centers and responsibility centers, the names of the organizational entities that have been changed, the name of the person supervising each entity affected, and the reasons for the structural change.

(b) SUBMISSION.—The annual report required by subsection (a) of this section shall be submitted to the Congress, the Mayor, the District of Columbia Council, the Consensus Commission, and the Authority, not later than February 15 of each year.

Sec. 133. (a) No later than October 1, 1999, or within 30 calendar days after the date of the enactment of this Act, which ever occurs later, the Superintendent of the District of Columbia Public Schools shall submit to the appropriate congressional committees, the Mayor, the District of Columbia Council, the Consensus Commission, and the Authority, a detailed operating budget for the public school system and the University of the District of Columbia within the last quarter, in compliance with applicable law; and

1. current quarter expenditures and obligations, year-to-date expenditures and obligations, and total fiscal year expenditure projections versus budget, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funds, non-appropriated funds, and capital financing;

2. a list of each account for which spending is frozen and the amount of funds frozen, broken out by control center, responsibility center, detailed object, and for all funding sources;

3. a list of all active contracts in excess of $10,000 annually, which contains the name of each contractor; the budget to which the contract is charged, broken out on the basis of control center, responsibility center, agency reporting code, and object class, and for all funding sources;

4. reprogramming requests and reports that have been made by the University of the District of Columbia within the last quarter, in compliance with applicable law; and

5. changes made in the last quarter to the organizational structure of the University of the District of Columbia, displaying previous and current control centers and responsibility centers, the names of the organizational entities that have been changed, the name of the person supervising each entity affected, and the reasons for the structural change.
Columbia for such fiscal year that is in the total amount of the appropriated appropriation and that authorizes District operating or other funds existing for personal and other-than-personal services, respectively, with anticipated actual expenditures.

(b) The revised budget required by subsection (a) of this section shall be submitted in the format of the budget that the Superintendent of District of Columbia Public Schools and the University of the District of Columbia to the Mayor of the District of Columbia for inclusion in the Mayor's budget submission to the Council of the District of Columbia pursuant to section 442 of the District of Columbia Home Rule Act, Public Law 93–198, as amended (D.C. Code, sec. 47–301).

SEC. 134. The District of Columbia Financial Responsibility and Management Assistance Act, as amended (D.C. Code, sec. 47–301), or before the expiration of the Mayor's submission to the Mayor of the District of Columbia in accordance with section 442 of the District of Columbia Home Rule Act, Public Law 93–198, as amended (D.C. Code, sec. 47–301), or before submitting their respective budgets directly to the Council, shall vote on and approve their respective annual or revised budgets before submission to the Mayor of the District of Columbia for inclusion in the Mayor's budget submission to the Council of the District of Columbia in accordance with section 442 of the District of Columbia Home Rule Act, Public Law 93–198, as amended (D.C. Code, sec. 47–301), or before submitting their respective budgets directly to the Council.

CEILING ON TOTAL OPERATING EXPENSES. SEC. 135. (a) Ceiling on Total Operating Expenses.—

(1) In general.—Notwithstanding any other provision of law, the total amount appropriated in this Act for operating expenses for the District of Columbia for fiscal year 2000 under the caption “Division of Expenses” shall not exceed the lesser of—

(A) the sum of the total revenues of the District of Columbia for such fiscal year; or

(B) $5,522,779,000 (of which $152,753,000 shall be from local funds).

(2) Financial Officer.—The Chief Financial Officer of the District of Columbia shall prepare a quarterly report setting forth detailed information regarding such grant and, in any year in which the amount of the grant shall have exceeded the lesser of—

(A) the sum of the total revenues of the District of Columbia for such fiscal year; or

(B) $5,522,779,000 (of which $152,753,000 shall be from local funds), which amount may be increased by the following:

(i) proceeds of one-time transactions, which proceeds are intended to support operating or capital needs approved by the District of Columbia Financial Responsibility and Management Assistance Authority; or

(ii) after notification to the Council, additional expenditures which the Chief Financial Officer of the District of Columbia certifies will produce additional revenues during such fiscal year at least equal to 200 percent of such additional expenditures, and that are approved by the Authority.

(b) Requirement.—The Chief Financial Officer of the District of Columbia and the Authority shall take such steps as are necessary to assure that the District of Columbia meets the requirements of this section, including the reporting by the Chief Financial Officer of the appropriations and funds made available to the District during fiscal year 2000 under the caption “Division of Expenses” to the Mayor of the District of Columbia and the Senate, the Committee on Government Reform of the House of Representatives, the Committees on Appropriations of the Senate and the House of Representatives, the Committee on Government Reform of the House, and the Comptroller of the Currency.

(c) Report on Expenditures.—The Chief Financial Officer of the District of Columbia shall prepare a report at the end of each fiscal quarter starting October 1, 1999, and make such report available to the Mayor of the District of Columbia and the Senate, the Committee on Government Reform of the House, and the Comptroller of the Currency, as of September 30, 1999, of all vehicles owned, leased or operated by the District of Columbia, the general condition of the vehicle; the acquisition date and cost; the general condition of the vehicle; annual operating and maintenance costs; current mileage; and whether the vehicle is used for personal purposes.

(d) Acquisition of Excess Revenues.—Local revenues collected in excess of amounts required to support appropriations in this Act for operating expenses for the District of Columbia for fiscal year 2000 under the caption “Division of Expenses” shall be applied first to a reserve account not to exceed $250,000,000 to be used to finance seasonal cash needs (in lieu of short-term borrowings); second to accelerate repayment of cash borrowed from the Water and Sewer Control Authority; and third to reduce the outstanding long-term bonded indebtedness.

SEC. 136. If a department or agency of the government of the District of Columbia is not operating within a court-appointed receiver or other court-appointed official during fiscal year 2000 or any succeeding fiscal year, the receiver or official shall be appointed by the Mayor. For purposes of this section, the inclusion in the annual budget of the District of Columbia for the year, annual estimates of the expenditures and appropriations for such department or agency shall be included in the format of the budget that the Superintendent of District of Columbia Public Schools and the University of the District of Columbia to the Mayor of the District of Columbia for inclusion in the Mayor's budget submission to the Council of the District of Columbia.

SEC. 137. The District of Columbia Financial Responsibility and Management Assistance Act, as amended (D.C. Code, sec. 47–301), or before

SEC. 138. (a) Restriction on Use of Official Vehicles.—In the exercise of their duties and responsibilities, all persons employed by the District of Columbia Public Schools open on time to begin the academic year for such fiscal year that is in the format of the budget that the Superintendent of District of Columbia Public Schools and the University of the District of Columbia to the Mayor of the District of Columbia for inclusion in the Mayor's budget submission to the Council of the District of Columbia.
CONGRESSIONAL RECORD—HOUSE 18627

Sect. 140. (a) SOURCE OF PAYMENT FOR EM-
PLOYEES DETAILED WITHIN GOVERNMENT.—
For purposes of determining the amount of funds expended by any entity within the Dis-
trict of Columbia government during fiscal year 2000 and each succeeding fiscal year, any expenditure of the District government to any per-
tiable to any officer or employee of the District government who provides serv-
ces which are within the authority and ju-
risdiction of the entity (including any por-
tion of the compensation paid to the officer or employee attributable to the time spent in providing such services) shall be treated as expenditures made from the entity’s budget, with regard to whether the officer or employee is assigned to the entity or other-
wise treated as an officer or employee of the entity.

(b) MODIFICATION OF REDUCTION IN FORCE PROCEDURES.—The District of Columbia Gov-
ernment Comprehensive Merit Personnel Act of 1978 (D.C. Code, sec. 1–601.1 et seq.), as
amended, is further amended in subsection 2408(a) by deleting “1999” and inserting, “2000”; and in subsection (i), by deleting “1999” and inserting “2000”; in subsection (b), by deleting “1999” and inserting “2000”; in subsection 2408(a) by deleting “1999” and inserting, “2000”; in subsection (i), by de-
leting “2000”; in subsection (b), by deleting “1999” and inserting “2000”; in subsection (k), by deleting “1999” and inserting “2000”.

Sect. 141. Notwithstanding any other provi-
sion of law, not later than 120 days after the date that a District of Columbia Public Schools (DCPS) student is referred for eval-
uation or assessment—
(1) the District of Columbia Board of Edu-
cation (referred to in this section as the “Board”), or its successor, and DCPS shall
evaluate or student, a student who may have a disabil-
ty and who may require special edu-
cation services; and
(2) if the student is classified as having a disabil-
ity, as defined in section 101(a)(1) of the
Individuals with Disabilities Education Act (20 U.S.C. 1401(a)(1) or in section 7(6) of the Rehabilitation Act of 1973 (24 Stat. 359; 29 U.S.C. 706(8)), the Board and DCPS shall
place that student in an appropriate program of special education services.

Sect. 142. THE DISTRICT OF COLUMBIA AMERICAN ACT.—None of the funds made available in this Act may be expended for programs or functions conditioned only on the approval by the Authority of the re-
quired reorganization plan.

Sect. 143. Notwithstanding any other provi-
sion of law, rule, or regulation, the evalua-
tion process and instruments for evaluating District of Columbia Public School employ-
ees shall be a non-negotiable item for collec-
tive bargaining purposes.

Sect. 146. None of the funds contained in this Act may be used for the purposes of the
District of Columbia Corporation Counsel or any other officer or entity of the District government to provide assistance for any petition drive or
civil action which seeks to require Congress to provide for voting representation in Con-
gress for the District of Columbia.

Sect. 147. None of the funds contained in this Act may be used to transfer or confine
inmates classified above the medium secu-

rity level, as defined by the Federal Bureau of Prisons, to the North-
theast Ohio Correctional Center located in Youngstown, Ohio.

Sect. 148. Section 202(i) of the District of
Columbia Financial Responsibility and Man-
agement Assistance Act of 1995 (D.C. Code, sec. 1–1382.80(a)(4)) and
(2) the audit includes a comparison of au-
dited actual year-end results with the reve-
ues submitted in the budget document for
such year and the appropriations enacted into law for such year.

Sect. 144. Nothing in this Act shall be con-
strued to authorize any office, agency or en-
tity to expend funds for experi-
cements for which a reorganization plan is re-
quired but has not been approved by the Dis-

sert County Financial Responsibility and Management Assistance Authority.

Appropriations made by this Act for such pro-
grams or functions are conditioned only on
the approval by the Authority of the re-
quired reorganization plan.

Sect. 145. Notwithstanding any other provi-
sion of law, rule, or regulation, the evalua-
tion process and instruments for evaluating District of Columbia Public School employ-

Sect. 146. None of the funds contained in this Act may be used for the purposes of the
District of Columbia Corporation Counsel or any other officer or entity of the District government to provide assistance for any petition drive or
civil action which seeks to require Congress to provide for voting representation in Con-
gress for the District of Columbia.

Sect. 147. None of the funds contained in this Act may be used to transfer or confine
inmates classified above the medium secu-

rity level, as defined by the Federal Bureau of Prisons, to the North-
theast Ohio Correctional Center located in Youngstown, Ohio.

Sect. 148. Section 202(i) of the District of
Columbia Financial Responsibility and Man-
agement Assistance Act of 1995 (D.C. Code, sec. 1–1382.80(a)(4)) and
(2) the audit includes a comparison of au-
dited actual year-end results with the reve-
ues submitted in the budget document for
such year and the appropriations enacted into law for such year.

Sect. 144. Nothing in this Act shall be con-
strued to authorize any office, agency or en-
tity to expend funds for experi-
cements for which a reorganization plan is re-
quired but has not been approved by the Dis-

manage real property for the use of the District of Columbia (including any independent agency of the District) unless:

(1) the Mayor certifies to the Committees on Appropriations of the House of Representatives that the disposition of the land or property included in the District is for the purposes intended;

(2) notwithstanding any other provisions of law, there is made available for sale or lease all property of the District of Columbia which the Mayor from time to time determines is surplus to the needs of the District of Columbia;

(3) the Mayor implements a program for the periodic survey of all District property to determine if it is surplus to the needs of the District; and

(4) the Mayor within 60 days of the date of enactment of this Act has filed a report with the appropriations and authorizing committees of the House and Senate providing a comprehensive plan for the management of the District of Columbia real property assets and is proceeding with the implementation of the plan.

CHARTER SCHOOL CONSTRUCTION AND REPAIR FUNDS

SEC. 154. Section 605(e)(2)(B) of the Student Loan Marketing Association Reorganization Act of 1996 (Public Law 104–206; 110 Stat. 2909–293) is amended by inserting "and public charter" after "public".

DISPOSAL OF EXCESS SCHOOL PROPERTY

SEC. 155. The Mayor, District of Columbia Financial Responsibility and Management Assistance Authority, and the Superintendent of Schools shall implement a process to dispose of excess public school real property within 90 days of the enactment of this Act.

SEC. 156. Section 2003 of the District of Columbia School Reform Act of 1996 (Public Law 104–191; D.C. Code, sec. 31–2851) is amended by striking "during the period" and "and ending 5 years after such date.".

CHARTER SCHOOL SHARING PREFERENCE

SEC. 157. Section 2206(c) of the District of Columbia Financial Responsibility and Management Assistance Authority Act of 1996 (Public Law 104–134; D.C. Code, sec. 31–2853.16(c)) is amended by adding at the end of the section: "(f) The amount used may not exceed $7,500,000."

BUYOUTS AND OTHER MANAGEMENT REFORMS

TRANSFER OF FUNDS

SEC. 158. (a) Transfer of Funds.—There is hereby transferred from the District of Columbia Financial Responsibility and Management Assistance Authority (hereafter referred to as the "Authority") to the District of Columbia the sum of $20,000,000 for severance payments to individuals separated from employment during fiscal year 2000 (under such terms and conditions as the Mayor considers appropriate), expanded contracting authority of the Mayor, and the implementation of a system of managed competition among public and private providers of goods and services by and on behalf of the District of Columbia: Provided, That such funds shall be used only in accordance with a plan agreed to by the Mayor and the Council and approved by the Committees on Appropriations of the House of Representatives and the Senate.

(b) SOURCES OF FUNDS.—The amount transferred under subsection (a) shall be derived from interest earned on accounts held by the Authority on behalf of the District of Columbia.

FOURTEENTH STREET BRIDGE

SEC. 159. (a) In General.—The District of Columbia Financial Responsibility and Management Assistance Authority (hereafter referred to as the "Authority"), working with the Commonwealth of Virginia and the Director of the National Park Service, shall carry out a project to complete all design requirements and for compliance with the National Environmental Policy Act for the construction of expanded lane capacity for the Fourteenth Street Bridge.

(b) Source of Funds.—Carrying out the project under subsection (a), the Authority shall use funds contained in the escrow account held by the Authority pursuant to section 134 of division A of the Omnibus Consolidated and Emergency Supplemental Appropriations Act, 1996 (Public Law 105–277; 112 Stat. 2881–552), for infrastructure needs of the District of Columbia, except that the amount used may not exceed $7,500,000.

ANACOSTIA RIVER ENVIRONMENTAL CLEANUP

TRANSFER OF FUNDS

SEC. 160. (a) In General.—The Mayor of the District shall carry out through the Army Corps of Engineers, an Anacostia River environmental cleanup program.

(b) SOURCE OF FUNDS.—There are hereby transferred to the Mayor from the escrow account held by the District of Columbia Financial Responsibility and Management Assistance Authority pursuant to section 134 of division A of the Omnibus Consolidated and Emergency Supplemental Appropriations Act, 1996 (Public Law 105–277; 112 Stat. 2881–552), for infrastructure needs of the District of Columbia, $5,000,000.

CRIME VICTIMS COMPENSATION FUND

SEC. 161. (a) Prohibiting Payment of Administrative Costs From Fund.—Section 16(e) of the Victims of Violent Crime Compensation Act of 1996 (D.C. Code, sec. 3–435(e)) is amended—

(1) by striking "and administrative costs necessary to carry out this chapter";

(2) by inserting after subsection (e) the following new subsection:

"(f) Any unobligated balance existing in the Fund as of the end of each fiscal year (beginning with fiscal year 2000) shall be transferred to the Treasury of the United States.";

(b) Annual Transfer of Unobligated Balances to Treasury.—Section 16 of such Act (D.C. Code, sec. 3–435) is amended—

(1) by redesignating subsection (f) as subsection (g); and

(2) by inserting after subsection (e) the following new subsection:

"(f) Any unobligated balance existing in the Fund as of the end of each fiscal year (beginning with fiscal year 2000) shall be transferred to the Treasury of the United States.".

DUTIES OF CHIEF FINANCIAL OFFICERS TO FOLLOW ACT

SEC. 162. (a) Certification.—None of the funds contained in this Act may be used after the expiration of the 60-day period that begins on the date of the enactment of this Act to pay the salary of any chief financial officer of any office of the District of Columbia (including any independent agency of the District) who has not filed a certification with the Mayor and the Chief Financial Officer of the District of Columbia that the officer understands the duties and restrictions applicable to the officer and their agency as a result of this Act and the amendments made by this title.

(b) Proposed Budget of the Government of the District of Columbia for fiscal year 2001 that is submitted by the District of Columbia shall be adjusted to reflect any modifications in the project cost estimates as a result of the management savings achieved by the District during the year of which the District is projecting the amount used may not exceed $7,500,000.

SEC. 163. It is the sense of Congress that the District of Columbia should not impose or take into consideration any height, square footage, set-back, or other construction requirements with respect to the issuance of industrial revenue bonds for a project of the American National Red Cross at 2025 E Street Northwest, Washington, D.C., in as much as such project is subject to approval of the National Capital Planning Commission and the Commission of Fine Arts pursuant to section 11 of the joint resolution entitled "Joint resolution to grant authority for the erection of a permanent building for the American National Red Cross, District of Columbia Chapter, Washington, District of Columbia," approved July 1, 1947 (Public Law 100–637; 36 U.S.C. 300108 note).

This title may be cited as the "District of Columbia Appropriations Act, 2000".

TITLE II—TAX REDUCTION

SEC. 201. COMPELLING REDUCTION OF TAXES

BY THE DISTRICT OF COLUMBIA

Congress commends the District of Columbia for its action to reduce taxes, and ratifies D.C. Act 13–111 (commonly known as the Service Improvement and Fiscal Year 2000 Budget Support Act of 1999).

SEC. 202. RULE OF CONSTRUCTION

Nothing in this title may be construed to impair the ability of the District of Columbia to amend or repeal any provision of law described in this title.
Mr. ISTOOK. Mr. Chairman, I ask unanimous consent that the bill through page 65, line 13 be considered as read, printed in the RECORD, and open to amendment at any point.

The CHAIRMAN. Is there objection to the request of the gentleman from Oklahoma?

There was no objection.

The CHAIRMAN. Are there amendments to this portion of the bill?

AMENDMENT OFFERED BY MR. ISTOOK

Mr. ISTOOK. Mr. Chairman, I offer an amendment.

The Clerk reads as follows:

Amendment offered by Mr. Istook:

Page 65, insert after line 24 the following:

SIX OFFENDER REGISTRATION

SEC. 167. (a) PERMITTING COURT SERVICES AND OFFENDER SUPERVISION AGENCY TO CARRY OUT OFFENDER REGISTRATION.—Section 11233(c) of the National Capital Revitalization and Self-Government Improvement Act of 1997 (DC Code, sec. 24-1233(c)) is amended by striking at the end the following new paragraph:

"(5) SIX OFFENDER REGISTRATION.—The Agency shall carry out sex offender registration functions in the District of Columbia, and shall have the authority to exercise all powers and functions relating to sex offender registration that are granted to the Agency under any District of Columbia law.

(b) AUTHORITY DURING TRANSITION TO FULL OPERATION OF AGENCY.—

(1) AUTHORITY OF PRETRIAL SERVICES, PAROLE, AND OFFENDER SUPERVISION TRUSTEE.—Notwithstanding section 11233(b)(1) of the National Capital Revitalization and Self-Government Improvement Act of 1997 (DC Code, sec. 24-1233(b)(1)), the Pretrial Services, Parole, Adult Probation and Offender Supervision Trustee appointed under section 11233(a) of such Act (hereafter referred to as the "Trustee") shall, in accordance with section 11232 of such Act, exercise all powers and functions of the Court Services and Offender Supervision Agency for the District of Columbia (hereafter referred to as the "Agency") relating to sex offender registration (as granted to the Agency by any other District of Columbia law) only upon the appointment of a Trustee who is able to assume said powers and functions.

(2) AUTHORITY OF METROPOLITAN POLICE DEPARTMENT.—During the period that begins on the date of the enactment of the Sex Offender Registration Emergency Act of 1999 and ends on the date the Trustee makes the certification described in paragraph (1), the Metropolitan Police Department of the District of Columbia shall have the authority to carry out any powers and functions relating to sex offender registration that are granted to the Agency or to the Trustee under any District of Columbia law.

Mr. ISTOOK (during the reading). Mr. Chairman, I ask unanimous consent that the amendment be considered as read and printed in the RECORD, and open to amendment at any point.

The CHAIRMAN. Is there objection to the request of the gentleman from Oklahoma?

There was no objection.

Mr. ISTOOK. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this is an amendment that we have received a request for from the District of Columbia, and in particular Linda Cropp, the council member who serves as the chairman of the city council.

Mr. Chairman, this is to permit the Federally run Office of Offender Supervision, the Court Services and Offender Service Agency, to administer the sex offender registration pursuant to local ordinances recently adopted by the District of Columbia City Council.

The City Council, on July 13, unanimously enacted their Sex Offender Registration Emergency Act of 1999 and the Sex Offender Registration Temporary Act of 1999. This establishes an effective sex offender registration and community notification system within the District.

Because the Federal agency, the Court Services and Offender Supervision Agency, is now involved with the supervision of persons on pretrial release, parole and probation, it is necessary that they be authorized to administer the sex offender registration program. This legislation permits them to do that. That also permits the District to enter into an agreement with the Federal agency requiring these registries to qualify for different Federal funding.

The community notification portion, I understand, will be conducted by official of the District Government, whereas the registration portion will be conducted under this amendment by the Federal agency that is involved with those that are being supervised while they are free on pretrial release, probation, parole, and so forth.

Mr. Chairman, we have worked with the ranking member, and I understand we have the consent of the gentlewoman from the District of Columbia as well, and I believe this amendment should pass without objection from anyone and urge it be adopted.

Mr. Chairman, I submit for the RECORD a letter and supporting documentation with regard to this particular issue:

COUNCIL OF THE DISTRICT OF COLUMBIA,

Re Federal legislation to effectuate D.C. sex offender registry.

Hon. Eleanor Holmes Norton,
Longworth House Office Building,
Washington, DC.

Dear Congresswoman Norton: We write to request that you attach the enclosed draft legislation to the next available vehicle in Congress which may present itself this week during the budget discussions.

At the Council’s legislative session on July 13, 1999, we voted unanimously to enact the Sex Offender Registration Emergency Act of 1999 and the Sex Offender Registration Temporary Act of 1999. The purpose of this legislation was to establish an effective sex offender registration and community notification system in the District of Columbia and to bring the District into compliance with the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act of 1996. The District of Columbia needs to comply with national criteria for such programs. A copy of the emergency act is enclosed.

The Council vested the Metropolitan Police Department ("MPD") with community notification duties regarding sex offenders, as we have section 12 at pp. 10-11. The Court Services and Offender Supervision Agency ("Agency") established pursuant to section 11232, the National Capital Revitalization and Self-Government Improvement Act of 1997, will be charged with the task of registering sex offenders in the District. (See sections 8, 9, and 10.) The registration functions included obtaining the initial registration information of sex offenders and informing them of registration requirements, periodically verifying address information and other registration information, reporting changes in address, notifying other jurisdiction when sex offenders leave the District, entering information on D.C. offenders in the National Sex Offender Registry and providing information on sex offenders to the MPD. Since the Agency is already responsible for tracking and supervising released sex offenders under the Revitalization Act, it is efficient and cost-effective to have this entity perform registration functions.

The U.S. Attorney’s Office has informed us that federal legislation, in the form enclosed, is needed to clarify the ability of the Agency to carry out its registration functions. In view of the sensitive nature of monitoring sex offenders, it is important that each affected governmental entity be clearly empowered to perform its functions and that the transition of registration duties from the MPD to the Agency be as seamless and prompt as possible.

Thank you for your assistance. Should you have any questions, we are available to discuss this matter with you at any time.

Sincerely,

Linda W. Cropp,
Chairman.

Harold Brazil,
Chairman, Judiciary Committee.

Enclosures: Draft federal legislation; Sex Offender Registration Emergency Act of 1999.
The District of Columbia government has recently approved emergency legislation—the Sex Offender Registration Emergency Act of 1999—which assigns sex offender registration obligations (other than community notification functions) to the Court Services and Offender Supervision Agency for the District of Columbia. This section validates this assignment of responsibility, and ensures an uninterrupted transition of sex offender registration functions from the D.C. Metropolitan Police Department to the Offender Supervision Agency. The enactment of this section is necessary to implement an effective sex offender registration program in the District and to enable the District to comply with the federal law standards for such programs.

The Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act (42 U.S.C. 14071) establishes minimum national standards for state sex offender registration and notification programs. See 42 U.S.C. 14071 (Wetterling Act); 64 FR 5728–37, 3959 (Wetterling Act guidelines). At the present time, all 50 states and the District of Columbia have established sex offender registration programs, and are attempting to bring their programs into compliance with the Wetterling Act standards. States (including D.C.) which fail to comply with the Wetterling Act standards within the applicable statutory time frames are subject to a mandatory 10% reduction of federal funding—a reduction which would cost D.C. about $200,000 a year at current funding levels.

The sex offender registration provisions initially enacted in the District of Columbia (D.C. Code §§24–1101 through 1117) did not achieve full compliance with the Wetterling Act standards, and have proven to be largely dysfunctional, for a number of reasons: (1) The D.C. registration provisions did not reflect new requirements that Congress added to the federal law that authorize the Agency to carry out the Agency's functions under the new D.C. sex offender registration laws.

Since the Agency is responsible in any event for ensuring that released sex offenders in the District as part of its supervision responsibilities, it is sensible and efficient to vest responsibility for sex offender registration functions in the same agency. The contemplated functions of the Agency under the new D.C. legislation include (inter alia) obtaining the initial registration information on sex offenders and informing them of registration requirements, periodically verifying address information and other registration information; adopting procedures for reporting of change of address or other changes in registration information by sex offenders; notifying registration authorities in other jurisdictions when necessary; maintaining and operating the sex offender registry for D.C.; entering information on D.C. sex offenders in the National Sex Offender Registry; and providing information on sex offenders to the Metropolitan Police Department and other law enforcement and governmental agencies as appropriate.

Because of the federal character of the Agency, complementary federal legislation is needed for the Agency to actually assume this role. The new D.C. sex offender registration legislation (Sex Offender Registration Emergency Act of 1999) recognizes this need, providing in §18 that the Metropolitan Police Department shall have the authority to carry out the Agency’s functions under the act, "[p]ending the enactment of a federal law that authorizes the Agency to carry out sex offender registration functions in the District of Columbia." The proposal in this section provides the necessary federal legislation. Subsection (a) in the section amends the specification of functions of the Agency in §11233(c) of the Revitalization Act to include carrying out sex offender registration functions in D.C., and provides for the Agency’s exercise of all powers and functions authorized for the Agency by the D.C. sex offender registration laws.

Subsection (b) in the section addresses some more immediate issues. The Agency in its current form is the office of the Trustee established by section 11232 of the Revitalization Act. Subsection (b) provides that the Local Police Department shall have the authority to exercise all powers and functions authorized for the Agency or the Trustee by the D.C. emergency legislation or federal law relating to sex offender registration, as indicated above, this includes (under the emergency legislation) such measures as adopting and implementing emergency rules and regulations, periodically verifying, and keeping current sex offender registration information; maintaining the sex offender registry for the District of Columbia; participating in the National Sex Offender Registry on behalf of the District; and providing information on sex offenders to the Metropolitan Police Department and other law enforcement and governmental agencies. The subsection refers to other D.C. laws relating to sex offender registration, as well as to the current emergency legislation. When this emergency legislation lapses after 90 days, and will be succeeded by temporary and permanent D.C. sex offender registration acts of similar character that the Trustee will need to implement.

Since any gap between the end of the Metropolitan Police Department’s exercise of these functions and the start of the Trustee’s exercise of these functions could bring about an abrupt cessation of all sex offender registration in the District, it is important to ensure that the transition will be effectuated in no interruption of sex offender registration.

Subsection (b) accordingly provides that the transition of functions will occur when the Metropolitan Police Department is able to assume the pertinent powers and functions. This will enable the Trustee to make necessary institutional arrangements prior to the transition, such as training of personnel in sex offender registration requirements and procedures. Upon the Trustee’s certification, the Trustee will be authorized to immediately vest these powers and functions. Pending the Trustee’s certification, the Metropolitan Police Department will retain the authority to carry out all functions relating to sex offender registration.

Mr. Moran of Virginia. Mr. Chairman, I rise in support of the amendment, and would simply say that we are happy that it is in the bill.

The CHAIRMAN. The Chair recognizes the gentleman from Oklahoma.

Mr. Moran of Virginia. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 1 offered by Mr. Tiahrt

Mr. TAHRI. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The amendment was agreed to.
CONGRESSIONAL RECORD—HOUSE

July 29, 1999

funds or tax dollars to provide needles for injection drug abusers to inject illegal drugs into their veins. In other words, they will be Except to enable injection drug abusers to continue a destructive behavior.

Mr. Chairman, that was the will of the House last year, it was passed by the Senate, and it was signed by the President. The President’s appointed drug czar, General Barry McCaffrey, supports this language, which publicly opposes publicly funded needle exchange programs. Let me give the highlights of his letter to me, which is shown on this chart here.

He says basically that the public health risks outweigh the benefits; that in needle exchange programs treatment should be our priority; that this sends the wrong message; and that this puts two charged neighborhoods at a greater risk.

These are very good reasons why public funds should not be used to enable people to continue their destructive behavior. As General McCaffrey also says in his letter, science is uncertain. The supporters of needle exchange programs cite successful studies. I have read many of these studies and they are very inconclusive. For example, the study that supports the Baltimore needle exchange program simply measures the amount of returned needles that are positive with HIV. It does not account for those needles which are not returned, it does not account for those needles which are shared by drug abusers, but it does say that the needle exchange program is a success.

The needle exchange program is not a success, Mr. Chairman. As the Associated Press reported on July 5, this year, the Johns Hopkins University School of Public Health in Baltimore found in their study that in Baltimore, after 5 years of a needle exchange program, that 9 out of 10 needle-using addicts are infected with Hepatitis C, a blood-borne virus transmitted by needles. Nine out of 10 are infected with the deadly virus. If this is a success, then how do we define failure?

There have been more complete long-term studies in Montreal and Vancouver. These studies of needle exchange programs, which have been going on for more than a decade, reveal that the death rate among illegal drug users has skyrocketed; that injection drug abusers are twice as likely to become HIV positive if they are involved in a needle exchange program than if they were not involved in the programs. They also say the crime rate around the needle exchange program increases.

There has been a lot of confusing information around. For example, there is a letter by Surgeon General C. Everett Koop saying he supports the needle program. He does say it is not a panacea for all settings, but there was a conversation between the gentleman from Oklahoma (Mr. Coburn), who is also a physician; and I would like the gentleman from Oklahoma to discuss with me his conversations with C. Everett Koop yesterday.

[Killing Them Softly
(By Joe Loconte)]

The Clinton administration says giving clean needles to drug users will slow the spread of AIDS and save lives. But former addicts—and the specialists who treat them—say their greatest threats come from the soul-destroying culture of addiction.

In a midrise office building on Manhattan’s West 39th Street, about two blocks south of the Port Authority bus terminal, sits the Positive Health Project, one of 11 needle-exchange outlets in New York City. This particular neighborhood, dotted by X-rated video stores, peep shows, and a grumpy hot dog stand, could probably tolerate some positive health. But it’s not clear that’s what the program’s patrons are getting.

The clients are intravenous (IV) drug users. They swap their used needles for clean ones and, it is hoped, avoid the AIDS virus, at least until their next visit. There’s no charge, no hassles, no meddlesome questions. That’s just the way Walter, a veteran heroin user; likes it. “Just put me on an island and don’t mess with me,” he says, lighting up a cigarette.

A tall, thinnish man, Walter seems weary for his 40-some years. Like many of the estimated 200,000 IV users in this city, he has spent years shooting up and has bounced in and out of detoxification programs. “Don’t get the idea in your mind you’re going to control it,” he says. “I thought I could control it. But dope’s a different thing. You just want it.” Can he imagine his life without drugs? “I’m past that,” he says, his face tightening. “The only good thing I do is getting high.

[Heroin First, Then Breathing
Supporters of needle-exchange programs (NEPs), from AIDS activists to Secretary of Health and Human Services Donna Shalala, seem to have reached the same verdict on Walter’s life. They take his drug addiction as a given, but want to keep him free of HIV by making sure he isn’t borrowing dirty syringes. Says Shalala, “This is another life-saving intervention.” That message is gaining currency, thanks in part to at least 112 programs in 29 states, distributing millions of syringes each year.

Critics say free needles just make it easier for addicts to go about their business; abusing drugs. Renn Constable, a Brooklynite who used heroin and cocaine for nearly 20 years, says he would have welcomed the needle-exchange program—for saving him money. “An addict doesn’t want to spend a dollar on anything else but his drugs,” he says.

Do needle exchanges, then, save lives or fuel addiction?

The issue flared up earlier this year when Shalala indicated the Clinton administration would lift the ban on federal funding. Barry McCaffrey, the national drug policy chief, denounced the move, saying it would sanction drug use. Fearing a political debacle, the White House upheld the federal ban but compelled the effectiveness of NEPs. Meanwhile, Representative Gerald Solomon and Senator Paul Coverdale are pushing legislation in Congress to extend the prohibition by 1 year.

There is more than politics at work here. The debate reveals a deepening philosophical rift between the medical and moral approaches to coping with drug addiction.

Joined by much of the scientific community, the Clinton administration has tacitly embraced a profoundly misguided notion: that drug users are twice as likely to be infected with HIV as other drug users. Over the last decade, NEPs have secured federal funding from local departments of public health to establish outlets in 71 cities. But that may be as far as their political argument will take them: Federal law prohibits federal money from flowing to the programs until it can be proved they prevent AIDS without encouraging drug use.

It’s no surprise, then, that advocates are trying to enlist science as an ally. They claim that numerous studies of NEPs prove they are effective. Says Sandra Thurman, the director of the Office of National AIDS Policy, “There is very little doubt that these programs reduce HIV transmission.” In arguing for federal funding, a White House panel on AIDS recently cited “clear scientific evidence of the efficacy of needle-exchange programs and the reduction in the transmission of disease.” The studies, though suggestive, prove no such thing. Activists tout the results of a New Haven study, published in the American Journal of Public Health, that shows needle-exchange programs reduce HIV among participants by a third. Not exactly. Researchers tested needles from anonymous users—not the addicts themselves to see if they were used. They never measured “seroconversion rates,” the portion of participants who became HIV positive.
positive during the study. Even Peter Lurie, a medical research scientist at the University of California, Berkeley, a leading critic of NEP advocate, admits that "the validity of testing of syringes is limited." A likely explanation for the decreased presence of HIV in syringes, according to scientists, is sampling error.

Another significant report was published in 1993 by the University of California and funded by the U.S. Centers for Disease Control. A panel reviewed 21 studies on the impact of NEPs on HIV infection rates. The best authors could say for the programs was that they had increased the prevalence of HIV among program clients. Even those results don’t mean much. Panel members rated the scientific quality of the studies on a five-point scale: one meant "not valid," three "acceptable," and five "excellent." Only two of the studies earned ratings of three or higher. Of those, neither showed a reduction in HIV levels. No wonder the authors concluded that the data simply do not, and for methodological reasons probably cannot, provide clear evidence that needle exchanges decrease HIV infection rates.

THE MISSING LINK

The most extensive review of needle-exchange studies was commissioned in 1995 by the U.S. Department of Health and Human Services and directed by the Academy of Sciences (NAS) to oversee the project. Their report, "Preventing HIV Transmission: The Role of Sterile Needles and Bleach," was issued in 1996 and set off a political firestorm.

"Well-implemented needle-exchange programs can be effective in preventing the spread of HIV and do not increase the use of illegal drugs," a 15-member panel concluded. It recommended lifting the ban on federal funding for NEPs, along with laws against possession of injection paraphernalia. The NAS report has emerged as the bible for true believers of needle exchange. It is not likely to stand the test of time. A truly scientific trial testing the ability of NEPs to reduce needle-sharing and HIV transmission would set up two similar, randomly selected populations of drug users. One group would be given access to the needle exchanges, the other would not. Researchers would follow them for at least a year, taking periodic blood samples.

None of the studies reviewed by NAS researchers, however, were designed in this way. Their methodological problems are legion: Sample sizes are often too small to be statistically meaningful. Participants are self-selected, so that the more health-conscious could be skewing the results. As many as 60 percent of study participants drop out. And researchers rely on self-reporting, a notoriously untrustworthy tool.

"Nobody has done the basic science yet," says David Murray, the research director of the Statistical Assessment Service, a watchdog group in Washington, D.C., "if this were the FDA applying the standard for a new drug, they would [block] it right there." The NAS panel admitted its conclusions were not based on reviews of well-designed trials. Such studies, the authors agreed, simply do not exist.

The limitations of individual studies do not necessarily preclude us from being able to reach scientifically valid conclusions." When all of the studies are considered together, they argued, the results are compelling.

That’s like tossing a bunch of broken Christmas ornaments in a box and claiming you have a present and maybe even a gift," Murray says. "What you have is a lot of broken ornaments." Two of the three physicians on the NAS panel, Lawrence Brown and Stephen Rantanen, were the only ones who said they are convinced that the meta-analysis provided any evidence that NEPs may, in theory, be effective, but the data doesn’t prove that they are." When some of the study authors acknowledge the dearth of hard science, Don Des Jarlais, a researcher at New York’s Beth Israel Medical Center, writes in a 1996 report that "we believe that participation is associated with a lower risk" of HIV infection. Lurie, writing in the American Journal of Epidemiology, says "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

MIXED RESULTS

That argument might make sense if all the best studies created a happy, coherent picture. They don’t. In fact, more-recent and better-controlled studies cast serious doubt on the ability of NEPs to reduce HIV infection.

In 1996, Vancouver researchers followed 2,000 needle exchanges and heroin users who visited needle exchanges, conducting periodic blood tests and interviews. The results, published in the British Journal of Addiction, found that "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

Much has changed since. The political firestorm that once threatened to put an end to needle exchanges has subsided. The most extensive review of needle-exchange programs can be effective in preventing the spread of HIV and do not increase the use of illegal drugs," a 15-member panel concluded. It recommended lifting the ban on federal funding for NEPs, along with laws against possession of injection paraphernalia. The NAS report has emerged as the bible for true believers of needle exchange. It is not likely to stand the test of time. A truly scientific trial testing the ability of NEPs to reduce needle-sharing and HIV transmission would set up two similar, randomly selected populations of drug users. One group would be given access to the needle exchanges, the other would not. Researchers would follow them for at least a year, taking periodic blood samples.

None of the studies reviewed by NAS researchers, however, were designed in this way. Their methodological problems are legion: Sample sizes are often too small to be statistically meaningful. Participants are self-selected, so that the more health-conscious could be skewing the results. As many as 60 percent of study participants drop out. And researchers rely on self-reporting, a notoriously untrustworthy tool.

"Nobody has done the basic science yet," says David Murray, the research director of the Statistical Assessment Service, a watchdog group in Washington, D.C., "if this were the FDA applying the standard for a new drug, they would [block] it right there." The NAS panel admitted its conclusions were not based on reviews of well-designed trials. Such studies, the authors agreed, simply do not exist.

The limitations of individual studies do not necessarily preclude us from being able to reach scientifically valid conclusions." When all of the studies are considered together, they argued, the results are compelling.

That’s like tossing a bunch of broken Christmas ornaments in a box and claiming you have a present and maybe even a gift," Murray says. "What you have is a lot of broken ornaments." Two of the three physicians on the NAS panel, Lawrence Brown and Stephen Rantanen, were the only ones who said they are convinced that the meta-analysis provided any evidence that NEPs may, in theory, be effective, but the data doesn’t prove that they are." When some of the study authors acknowledge the dearth of hard science, Don Des Jarlais, a researcher at New York’s Beth Israel Medical Center, writes in a 1996 report that "we believe that participation is associated with a lower risk" of HIV infection. Lurie, writing in the American Journal of Epidemiology, says "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

MIXED RESULTS

That argument might make sense if all the best studies created a happy, coherent picture. They don’t. In fact, more-recent and better-controlled studies cast serious doubt on the ability of NEPs to reduce HIV infection.

In 1996, Vancouver researchers followed 2,000 needle exchanges and heroin users who visited needle exchanges, conducting periodic blood tests and interviews. The results, published in the British Journal of Addiction, found that "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

Blood samples don’t lie. Attending an NEP was "a strong predictor" of the risk of contracting HIV, according to Julie Bruneau of the University of Montreal, the lead researcher. Bruneau’s team then issued a warning: "We believe that participation is associated with a lower risk" of HIV infection. Lurie, writing in the American Journal of Epidemiology, says "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

MIXED RESULTS

That argument might make sense if all the best studies created a happy, coherent picture. They don’t. In fact, more-recent and better-controlled studies cast serious doubt on the ability of NEPs to reduce HIV infection.

In 1996, Vancouver researchers followed 2,000 needle exchanges and heroin users who visited needle exchanges, conducting periodic blood tests and interviews. The results, published in the British Journal of Addiction, found that "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

Blood samples don’t lie. Attending an NEP was "a strong predictor" of the risk of contracting HIV, according to Julie Bruneau of the University of Montreal, the lead researcher. Bruneau’s team then issued a warning: "We believe that participation is associated with a lower risk" of HIV infection. Lurie, writing in the American Journal of Epidemiology, says "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.

MIXED RESULTS

That argument might make sense if all the best studies created a happy, coherent picture. They don’t. In fact, more-recent and better-controlled studies cast serious doubt on the ability of NEPs to reduce HIV infection.

In 1996, Vancouver researchers followed 2,000 needle exchanges and heroin users who visited needle exchanges, conducting periodic blood tests and interviews. The results, published in the British Journal of Addiction, found that "no one study, on its own, should be used to declare the programs effective." Nevertheless, supporters insist, the "pattern of evidence" is sufficient to march ahead with the programs.
Margarro opened a fire hydrant on him. "When he passed, the firemen asked him where he got that dope from," he says. "We needed to know, because if it made him feel like that, we were going to take just as much as he did."

This is typical of the hard-core user: The newest, most potent batch of heroin on the streets, the one causing the most deaths, is in greatest demand. "How do you find out who the dead person copied from," says Scott, a drug-treatment specialist with 30 years' experience. "The more deaths, the more pot, the more heroin."

"That's the essence of the addict," says Easterlin, who works a van for needle-exchange programs. Naomi Fatt, ADAPT, one of New York City's largest needle-exchange programs, explains. "Needle-exchange programs are doing brisk business all over the country: San Diego, Seattle, Milwaukee, Boston and beyond. San Francisco alone hands out 2.2 million needles a year. If most addicts really weren't worried about HIV, then why do they do it?"

In most states, it is difficult to buy drug paraphernalia without a prescription. That makes it hard, some claim, to find syringes. But drug users can get them easily enough on the streets. The main reason they go to NEPs, it seems, is that the outlets are a free source of needles, cookers, cotton, and bleach. They're also convenient. They are run from storefronts or out of vans, and they operate several days a week at regular hours. And they are hassle-free. Users are issued ID cards that entitle them to carry drug paraphernalia wherever they go. Police are asked to keep their distance lest they scare off clients.

Most programs require that users swap their old needles for new equipment, but people aren't denied if they "forget" to bring in the good needles. If that's the only way they can save lives. But there just isn't much evidence, scientific or otherwise, that free drug paraphernalia is protecting users.

The reason is addiction. Addicts attending NEPs continue to swap needles and engage in risky sexual behavior. All the studies that claim otherwise are based on self-reporting, an unreliable gauge.

By not talking much about drug abuse, NEP activists effectively sidestep the desperation created by addiction. When drug users run out of money for their habit, for example, they often turn to prostitution—no matter how many clean needles are in the cupboard. And the most common way of connecting HIV is, of course, sexual intercourse. "Sex is a currency in the drug world," says Horton of Phoenix House. "It is a major mode of HIV infection. And you don't address the exchange of sex?"

At least a third of the women in treatment at the Brooklyn Teen Challenge had been lured into prostitution. About 15 percent of the female clients in Manhattan's Phoenix House contracted HIV by exchanging sex for drugs. In trying to explain the high HIV rates in Vancouver, researchers admitted "it may be that sexual transmission plays an important role."

Kleber, a psychiatrist and a leading addiction specialist, has been treating drug abusers for 30 years. He says NEPs, even those that offer education and health services, aren't likely to become beacons of behavior modification. "Addiction erodes your ability to change your behavior," he says. "And NEPs have no track record of changing risky sexual behavior."

Or discouraging other reckless choices, for that matter. James Curtis, the director of addiction services at the Harlem Hospital Center, says addicts are not careful about venereal disease and infections. They often develop serious infections, such as septicemia, around injection areas. "It is false, misleading, and unethical," he says, "to give addicts the idea that they can be intravenous drug abusers without suffering serious self-injury."

A recent University of Pennsylvania study followed 415 IV drug users in Philadelphia over four years. Twenty-eight died during the study. Only five died from causes associated with HIV. Most died for other reasons: overdoses, homicide, heart disease, kidney failure, liver disease, and suicide. Writing in the New England Journal of Medicine, medical professors George Woody and David Kleber said to the risk of HIV infection, the threat of death to drug abusers from other causes is "more imminent."

That proved tragically correct for John Watters and Brian Weil, two prominent founders of needle exchanges who died of apparent heroin overdoses. Indeed, deaths from drug dependency are not seen as an urgent need. Needle-exchange programs have been on an upward trajectory for years. In New York City hospitals, the number has jumped from 413 in 1990 to 909 in 1996.

GOOD AND READY

Keeping drug users free of AIDS is a noble—but narrow—goal. Surely the best hope of keeping them alive is to get them off drugs and into treatment. Research from the National Institute for Drug Abuse (NIDA) shows that untreated opiate addicts die at a rate seven to eight times higher than similar patients in methadone-based treatment programs. Needle suppliers claim they introduce addicts to rehab services, and Shalala wants local officials to include treatment referral in the needle-exchange programs. But program staffers are not instructed to confront addicts about their drug habit. The assumption: Unless drug abusers are ready to quit on their own, it won't work.

This explains why NIDA advocates smoothly assert they support drug treatment, yet gladly supply users with all the drug-injection equipment they need. "The idea that they will choose on their own when they're ready is nonsense," says Voth, who says he's treated perhaps 5,000 abusers of cocaine, heroin, and crack. "Judgment is one of the things that disappears with addiction. The worst addicts are the ones least likely to stop, and they need help."

According to health officials, most addicts do not seek treatment voluntarily, but enter through the criminal-justice system. Even those who volunteer do so because of intense pressure from spouses or employers or raw physical pain from deteriorating health. In other words, they begin one of the most unpleasant consequences of their drug habit.

The only way a drug addict is going to consider stopping is by experiencing pain," says Robert Dupont, a clinical professor of psychiatry at Georgetown University Medical School. "Pain is what helps to break their delusion," says David Batty, the director of Teen Challenge in Brooklyn. "The faster they realize they're on a dead-end street, the faster they see the need to change."

JUSTICE FOR JUNKIES

Better law enforcement, linked to drug courts and alternative sentencing for offenders, could be the best way to help them see the road signs up ahead. "It is common for an addict to say that jail saved his life," says Dr. Janet Lapey, the president of Drug War Watch and a professor at New York University. "But it is moralistic and flatly irresponsible to warehouse nonviolent drug addicts."

Since 1996, Hynes has helped reshape the city's drug-court system to offer nonviolent addicts a choice: two to four years in prison or a shot at rehabilitation and job training. Many treatment specialists believe drug therapies will fail unless they're backed up by law enforcement. And addicts need "socially imposed consequences" at the earliest possible stage—and the simplest way is through the criminal-justice system. Ditto for Dupont, the director of NIDA. Sally Satel, a psychiatrist specializing in addiction, says "coercion can be the clinician's best friend."

Justing is not true of all addicts, but it took stiff medicine to finally get the attention of Cananda Edmonds, a heroin user for...
27 years. ‘I was in love with heroin. I took it into the bathroom and locked the door.’

And she was living in Washington, D.C., which she had left as a 12-year-old with her parents a year earlier. A month before that, he had become an addict.

The program uses an unapologetically Christian model of education and counseling. Moral and spiritual problems are assumed to be at the root of drug addiction. Explains one former addict, who was gang-raped when she was 13. ‘I didn’t want to feel what I was feeling about the rape—the anger, the hate—as I’m dependent on it.’

The program uses a curriculum that includes the 12 steps of Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), the latter of which was founded by a former heroin addict in 1984. NA offers no professional therapists, no residential facilities, no clinics, yet its 12-step philosophy, adapted from AA, is perhaps the most common treatment in the world.

The Clinton administration already knows these approaches are working. NIDA recently completed a study of 10,010 drug abusers in 11 cities. Researchers found that 86 percent of the program’s graduates usually undergo 24 months of treatment and must find housing and employment, otherwise isolated drug users. Some, under the rubric of AIDS education, have been removed from the culture.

Narcotics Anonymous (NA), like Alcoholics Anonymous (AA), is a community-based association of recovering addicts. Since its formation in the 1950s, NA has fought the therapeutic value of addicts helping other addicts. Its tradition is weekly group meetings, run out of homes, churches, and community centers.

‘You get the benefit of hearing how others stayed clean and things like that from you,’ says Tim, a 20-year heroin user and NA member since 1995. NA offers no professional therapists, no residential facilities, no clinics. Yet its 12-step philosophy, adapted from AA, is perhaps the first common treatment strategy in the world.

The 12-step model includes admitting there is a power greater than oneself—God, the higher power of one’s own—will to change, and making amends where harm has been done. The only requirement for NA membership is a desire to stop using. ‘Committed to sharing all the NA has to offer, the NA program provides the best foundation for recovery and personal growth,’ according to NA literature.

As in AA, members must admit they cannot end their addiction on their own. The philosophy’s second step is the belief that ‘a power greater than ourselves can restore us to sanity.’ NA considers itself nonreligious, but urges members to seek religious enlightenment—‘spiritual awakening’—however they choose to define it—to help them stay clean.

Teen Challenge, founded in 1958 by Pentecostal minister David Wilkerson, is a pioneer in therapeutic communities and has achieved some remarkable results in getting addicts off drugs permanently. One federal study found that 96 percent of the program’s graduates were drug-free seven years after completing the regimen. On any given day, about 2,500 men and women are in its 125 residential facilities.

The program uses an unabashedly Christian model of education and counseling. Moral and spiritual problems are assumed to be at the root of drug addiction. Explains one former addict, who was gang-raped when she was 13. ‘I didn’t want to feel what I was feeling about the rape—the anger, the hate—as I’m dependent on it.’

Though acknowledging that the reasons for drug use are complex, counselors make Christian conversion the linchpin of the program. Phoenix Challenge, a former rehab program, failed to change his basic motivation until he turned to faith in Christ. He has been steadily employed and free of drugs for 11 years.

‘Sin is the fuel behind addiction,’ Constablesay, ‘but the Lord says he will not let me be tempted beyond what I can bear.’

And he was living in Washington, D.C., which he had left as a 12-year-old with his parents a year earlier. A month before that, he had become an addict.

The program uses an unapologetically Christian model of education and counseling. Moral and spiritual problems are assumed to be at the root of drug addiction. Explains one former addict, who was gang-raped when she was 13. ‘I didn’t want to feel what I was feeling about the rape—the anger, the hate—as I’m dependent on it.’

Though acknowledging that the reasons for drug use are complex, counselors make Christian conversion the linchpin of the program. Phoenix Challenge, a former rehab program, failed to change his basic motivation until he turned to faith in Christ. He has been steadily employed and free of drugs for 11 years.

‘Sin is the fuel behind addiction,’ Constable says, ‘but the Lord says he will not let me be tempted beyond what I can bear.’

And he was living in Washington, D.C., which he had left as a 12-year-old with his parents a year earlier. A month before that, he had become an addict.

The program uses an unapologetically Christian model of education and counseling. Moral and spiritual problems are assumed to be at the root of drug addiction. Explains one former addict, who was gang-raped when she was 13. ‘I didn’t want to feel what I was feeling about the rape—the anger, the hate—as I’m dependent on it.’

Though acknowledging that the reasons for drug use are complex, counselors make Christian conversion the linchpin of the program. Phoenix Challenge, a former rehab program, failed to change his basic motivation until he turned to faith in Christ. He has been steadily employed and free of drugs for 11 years.

‘Sin is the fuel behind addiction,’ Constable says, ‘but the Lord says he will not let me be tempted beyond what I can bear.’

And he was living in Washington, D.C., which he had left as a 12-year-old with his parents a year earlier. A month before that, he had become an addict.

The program uses an unapologetically Christian model of education and counseling. Moral and spiritual problems are assumed to be at the root of drug addiction. Explains one former addict, who was gang-raped when she was 13. ‘I didn’t want to feel what I was feeling about the rape—the anger, the hate—as I’m dependent on it.’

Though acknowledging that the reasons for drug use are complex, counselors make Christian conversion the linchpin of the program. Phoenix Challenge, a former rehab program, failed to change his basic motivation until he turned to faith in Christ. He has been steadily employed and free of drugs for 11 years.

‘Sin is the fuel behind addiction,’ Constable says, ‘but the Lord says he will not let me be tempted beyond what I can bear.’
Mr. Chairman, I asked him the following four questions. I said, “Dr. Koop, have you read these studies?” What was his answer? No. “Dr. Koop, do you think needle exchange programs, as presently designed in the United States, will work?” The answer was no. “Dr. Koop, why did you write the letter?” The answer: “Because in the area in public health where I have seen these programs work, where every needle is actually accounted for, there is some hope that they work.”

He then went on to offer the fact that he knew that in communities where there is some drug abuse, and he mentioned specifically Harlem, that a needle exchange program would never work because the culture of the addicts in our society is they will not account for the needle. They have no idea where they left them.

So, as we consider his letter and his conversation with me, it falls prey to the same as we have seen on this debate, and that is the people who believe it is good have never read the studies.

The science there undoubtedly shows that we have an increase in Hepatitis B, Hepatitis C, and HIV. With every study that has been done thus far, if we account for those that are in the study at the beginning and at the end and because we want to help people, we are about to do something very, very wrong.

I hope to be able to speak on the subject again.

Mr. Chairman, I include for the RECORD the following letter from Everett Koop:

C. EVERETT KOOP, M.D., Sc.D., SURGEON GENERAL, U.S. PUBLIC HEALTH SERVICE.

I hope to be able to speak on the subject again.

Mr. Chairman, I include for the RECORD the following letter from C. Everett Koop:

C. EVERETT KOOP, M.D., Sc.D., SURGEON GENERAL (RET.), U.S. PUBLIC HEALTH SERVICE.

Hon. DENNIS HASTERT, Speaker, U.S. House of Representatives, The Capitol, Washington, DC.

DEAR MR. SPEAKER: Having worked on the HIV/AIDS epidemic since its emergence in the U.S., I am now writing to express my strong belief that local programs of clean needle exchange can be an effective means of preventing the spread of the disease without increasing the use of illicit drugs. While I do not believe that clean needle programs are a panacea for all settings, it is clear from careful and well-documented public health studies that such programs have worked in many areas and have great potential for making further reductions in the incidence of new infections.

Consequently, it would be counterproductive for the Congress to enact a Federal measure that would limit the ability of local and State public health agencies and voluntary organizations to carry out needle exchange programs. Such action by the Congress would undoubtedly result in HIV infections that could have been prevented and would unnecessarily enlarge and prolong the epidemic. If local authorities or organizations determine that needle exchange programs are appropriate to the epidemic as it affects their communities, the Congress should allow them to use all possible measures and funding sources to stem the spread of this deadly disease.

I urge you to oppose any effort to limit the public health response to the AIDS epidemic. Sincerely,

C. EVERETT KOOP, M.D., Sc.D.

Mr. TIAHHT, Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I rise in opposition to the amendment.

Mr. Chairman, I ask unanimous consent to extend the debate by 10 minutes on each side. I believe that the proponents of the amendment will find that this agreeable.

The CHAIRMAN. Is there objection to the request of the gentleman from Virginia?

There was no objection.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, first of all, some studies have been cited by the gentleman from Kansas (Mr. TIAHHT) and the gentleman from Oklahoma (Mr. COBURN).

We have a response from General McCaffrey. General McCaffrey does not make it clear that he supports the language that is in this bill. The language in this bill was put in in full committee by a vote of 32-23, a bipartisan vote, to say no Federal funds can be used for free needle exchange programs.

All we are asking, Mr. Chairman, is that this body agree to that restriction. We ask for two reasons. The principal reason is that we are our only jurisdiction, the use of Federal funds, for which we are responsible.

The second is that we will show very compelling evidence that the District of Columbia knew what it was doing when it started up a program which is one of the most effective in the country.

Now, General McCaffrey supports the language in this bill. But he also makes it clear that he has never supported a prohibition on local jurisdictions’ efforts to implement a needle exchange program.

There are 113 local needle exchange programs in this country. They are working with various levels of success, but all of them successful. In fact, in the District of Columbia, two-thirds of the people that had been exposed to HIV through dirty needles are no longer being exposed as a result of the effectiveness of the program in the District of Columbia.

Here we have a few hundred pages. They are not numbered. But these are the summaries of dozens of exhaustive studies by all of the organizations that we would want to look into this issue. They have all concluded that the needle exchange program works. They run the gamut from the National Institutes of Health, the Centers for Disease Control, the Department of Health and Human Services, the National Association of Mental Health and Substance Abuse.

This program is endorsed by the American Medical Association, any number of organizations that are prestigious and serious in the epidemic. I groaned. I did not want to do this. Because on the face of it, my initial reaction was, my gosh, why would we ever give free needles to drug addicts?

Well, the fact is, Mr. Chairman, that the facts are compelling. The District of Columbia knew exactly what it was doing when it started this program. Let me share with my colleagues some of these facts.

The District of Columbia has an HIV-AIDS epidemic, one of the worst in the country. They have the highest rate of new HIV infections in any jurisdiction in the entire country, the worst.

Intravenous drug use is the second leading cause of death for all city residents between the ages of 30 and 44, the leading cause of death. African-Americans are the hardest hit by intravenous transmission from dirty needles of the HIV virus. Ninety-six percent of those infected with HIV as a result of intravenous drug use in the District of Columbia are African-Americans.

Women and children are also disproportionately affected. Drug use is the highest mode of transmission of HIV for women in D.C. Women are getting AIDS at the fastest rate. This is the most serious and critical AIDS epidemic in D.C., which is the worst in the country. And the principal way they get AIDS is through dirty needles.

Seventy-five percent of the babies born with HIV, and what could be more disturbing to us, what could break our hearts worse than to have a baby born with AIDS, 75 percent of the babies born with HIV are infected as a result of dirty needles.

The District of Columbia, my colleagues, has the worst problem with HIV transmission from dirty needles, the worst in the country. And yet it is the only jurisdiction in the entire country that is prohibited from implementing this program.

113 jurisdictions throughout the country have this program. All of the experts say it is effective. D.C. has the worst problem but, because of this Congress, they cannot use the one program that has been proven to be effective. That is why we oppose this amendment.

We are not even suggesting that we use Federal funds. All we are asking is...
we stick with the language that says no Federal funds can be used for a needle exchange program.

But let the residents of the District of Columbia and particularly its elected leaders, elected directly by the citizens of the District of Columbia, let them be able to use their local funds and let private donations be used for this program. It is a small program. It is very inexpensive. It is run by the Whitman-Walker Clinic, a very credible organization. They do wonderful work.

The reason why these programs are so effective is because, when people come in to get free needles, they then have to get registered, that way we know who are the drug addicts. They then go into counseling. They then go into treatment. They will be exposed to the whole will of program to treat their drug addiction and to make them healthy and to protect their babies.

This is the gateway; this is the way we get access to people who desperately need help. To prevent the District of Columbia from using this gateway to cure people, to get them off their addiction, to save these babies, we need this program.

Again, let me just remind my colleagues, we are not even asking for Federal funds. We are asking them to support language that says no Federal funds can be used for this program.

Mr. Chairman, I yield the balance of my time.

Mr. TIAHRT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I want to remind the Members that under current law there is a program that does distribute needles here in the District of Columbia. It is called the Prevention Works.

There is nothing in current law that I am trying to preserve that would prevent that from continuing.

Mr. Chairman. I yield 2½ minutes to the gentleman from Virginia (Mr. Goodlatte).

Mr. GOODLATTE. Mr. Chairman, I thank the gentleman for yielding me the time.

Mr. Chairman, I rise today in strong support of the amendment offered by the gentleman from Kansas (Mr. Tiahrt) which will reinforce the Federal Government’s commitment to the war on drugs by prohibiting Federal and District funds from being used to conduct needle exchange programs. These programs are harmful to communities and undermine our Nation’s drug control efforts.

Drug abuse continues to ravage our community, our schools, and our children. Heroin use is again on the rise. Thousands of children will inject hard-core drugs, like heroin and cocaine, for the first time this year and many will die.

To deal with this problem, we must have a firm commitment by the Federal Government to end the cycle of addiction and abuse that destroys so many lives.

Providing free hypodermic needles to addicts so they can continue to inject illegal drugs sends a terrible message to our children that Congress has given up on the fight to stop illegal drug use and that the Federal Government implicitly condones this illegal activity.

As lawmakers, we have a responsibility to rise up and fight against the use and spread of drugs everywhere we can. We should start by making it harder, not easier, to practice this deadly habit. We should not tell our children do not do drugs, on the one hand, while giving them free needles to shoot up with in the other.

We need a national drug control policy which emphasizes education, intervention, prevention, and treatment, not subsidies for addicts.

The results of community-based needle exchange programs have been disastrous. Needle exchange programs result in towns with higher crime, schools that are littered with drug paraphernalia, and neighborhoods that are the gateway to the communities involved. To argue that the District of Columbia has the right to use Federal funds is absurd on the face of it. The District of Columbia has the right to use its own money, not Federal money.

The reason why these programs are dangerous is because of the very nature of how they work. Needle exchanges protected against blood-borne infections. In fact, the study concluded “there was no indication of a protective effect of syringe exchange on HIV or other blood-borne viruses.”

A recent study published by the American Journal of Epidemiology concluded that there was no indication that needle exchanges protected against blood-borne infections. In fact, the study concluded “there was no indication of a protective effect of syringe exchange against HBV or HCV infection.”

The medical evidence behind these dangerous programs is inconclusive at best. Studies have shown that addicts who use needle exchange programs are more likely to contract HIV or other blood-borne viruses.

Here in the District of Columbia, the problem persists. It has been noted by the National Institutes of Health that needle exchanges protected against blood-borne infections. In fact, the study concluded “there was no indication of a protective effect of syringe exchange against HBV or HCV infection.”

I ask Members to defeat this amendment. It is just hard for me to understand what kind of debate we are having here. This would be, I am trying to think of equivalents, of trying to battle cigarettes by giving kids free low-tar cigarettes; or trying to battle breast cancer by giving people things that cause heart disease.

Perhaps a better example would be to say that we are really worried about some kind of material that theoretically, let us say asbestos that is in the cigarette package, so we are going to give kids packages of cigarettes to smoke while we are going to make sure that the packaging does not damage them.

The fact is that heroin is a terrible scourge not only to the individual but to the communities involved. To argue that by facilitating this habit by giving them clean needles to fight another disease is absurd on the face of it. The fact is that studies, quite frankly, have been done more methodologically correct, as such as the Montreal and the Vancouver studies, whereas other statistical studies have been assessed by...
the Statistical Assessment Service as not meeting those standards.

I would point out, for example, Montreal: "We have yet to hear a cogent argument that would allay our concerns that needle exchange programs may facilitate the formation of new sharing groups gathering isolated IDUs, a scenario that is consistent with our findings."

Vancouver now has the highest heroin death rate in North America and is referred to as Canada's "drugs and crime capital," from the Washington Post in the spring of 1997. UPI had a story last July 29, "Chief: Vancouver Has Lost Drug War," British Columbia's police chief claims the city has lost the war on drugs and now the city is proposing to give heroin addicts free heroin in addition to the free needles.

The ONDCP's visit, some of the observations on facts are, for example, that the Vancouver needle exchange program is one of the largest in the world. It has distributed over 1 million needles annually. B. HIV rates among participants in the needle exchange program are higher than the HIV rate among drug users who do not participate. So in the same heroin drug users, it is higher if you participate in the clean needles program. However, which is a statistically accurate study, not a random sample picked up to justify something.

The death rate due to illegal drugs in Vancouver has skyrocketed since the needle exchange program was introduced. In 1988, 18 deaths were attributed to drugs; in 1993, 200 were attributed to drugs. The Provin-

cial Health Officer estimated that they were averaging more than 10 deaths due to drugs per week, and were on pace for 600 deaths province-wide in 1998—mostly in Vancouver.
was probably not deliberate. It may have resulted from bureaucratic politics, or the shuffling of responsibilities among ministries. Nevertheless, it has evolved and is allowed to persist.

1. Instead of a mandate for drug treatment, NEPs will focus on what they can afford and do—exchange needles.

2. Once the NEP was instituted, there seemed to be no imperative for the establishment or expansion of drug treatment. All interviewees stated that NEP was not a "silver bullet," but reality suggests that it is treated as such.

B. In the absence of treatment, the potential benefits of needle exchange programs are marginalized for the most at-risk. The single most common explanation given for the prevalence of HIV among NEP participants is that the NEP participants were at a greater risk than non-NEP participants. Harm reduction believes that by giving addicts the means and knowledge to safely use drugs (i.e. needles), most of the negative effects of drug abuse can be alleviated. Yet this approach still requires that the addict responsibly use the needles he is given; the HIV statistics show that he does not. For an at-risk population, paternal approaches which—in the reliable words of the responsible behavior will probably be more effective. With an at-risk population, without access to drug treatment, needle exchange appears to be nothing more than a facilitator for drug abuse.

C. High-purity cocaine and heroin is becoming increasingly prevalent and will pose challenges across the board. Vancouver is literally swamped with drugs. Large seizures appear to have no effect at the street level. The influx of high-purity heroin and cocaine is a major cause of both the high HIV rates in Vancouver as well as the high death rate. We should examine high-purity drugs as a separate threat, and consider a national initiative along the lines of our methamphetamine initiative.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Maryland (Mr. WYNN) who represents the District of Columbia.

Mr. WYNN. Mr. Chairman, I thank the gentleman for yielding me this time. I rise in strong opposition to this amendment. It is both arrogant and misguided. It is arrogant because it attempts to impose the will of this Congress on citizens of the District of Columbia. The gentleman is from Kansas and I submit that we would never attempt to impose the will of this Congress on the citizens of Kansas and the citizens of Wichita, Kansas. We would let them spend their money the way they want to.

This amendment would say that the citizens of the District of Columbia could not spend local money the way they want to. The District of Columbia has experience with this issue. In fact, through the Whitman-Walker Clinic and using local funds, they implemented a program and the program was successful. It reduced needle sharing by two-thirds.

Mr. Chairman, that is the issue, needle sharing. Where we reduce needle sharing, we reduce the transmission of AIDS.

Now, who says this approach works? Well, the National Institute of Health has already said this approach works. The Center for Disease Control says this approach works. The American Medical Association says needle sharing works. The National Academy of Sciences says needle sharing works. The body of scientific evidence in America suggests this is a proper approach.

Let us not be arrogant and misguided. Let us oppose this amendment.

Mr. TIAHRT. Mr. Chairman, I yield 2 minutes to the gentleman from Georgia (Mr. BARR).

Mr. BARR of Georgia. Mr. Chairman, I thank the distinguished gentleman from Kansas for yielding me this time and rise in strong support of this amendment.

Let me get this straight, if I just heard the previous speaker criticize the Congress for trying to set some standards against the provision of needles with which the people of the District of Columbia inject deadly substances into their veins based on the argument that we would never tell the people of Kansas what it can or cannot do. I would remind the gentleman that there are all sorts of, thousands upon thousands upon thousands of Federal regulatory mandates that tell the people of Kansas precisely what they can and cannot do. For heaven’s sake, it is this Congress that just a few years ago told the people of Kansas what size toilets they can build and what size toilets they can use and where they can build homes and where they can build roads.

Very frankly, Mr. Chairman, I would much rather see the Congress of this United States step in and save lives by telling people, no, we are not going to pass the law; we are not going to permit the District of Columbia to inject deadly mind-altering substances into your veins than it would be for the Congress to continue to tell people what they might do productively with their lives.

I would also remind our colleagues of a very basic principle. If you give people the means to do something and encourage them to do it, well, for heaven’s sake, no surprise, they will do it.

Now, I know people on the other side, the gentlemen from Maryland, both of whom will be speaking on this, speak very eloquently, very passionately and very sincerely about helping people in their community. But I would simply say that we think on this side that there is a better way of addressing the problem of drug use in our communities, wherever those communities might be, in the Seventh District of Georgia or the Third District of Maryland or wherever, than to give people the means to continue to inject mind-altering, dangerous substances into their veins.

I think this is a very appropriate and limited exercise, the will of the people of this country, that at least in our Nation’s capital, subject in large part to the jurisdiction as the Nation’s capital to the will of the American people through their representative in this Congress that we tell the people of D.C., “We do want to help people, but we are not going to do it by furnishing you the means to inject mind-altering substances into your veins.”

I rise in support of this amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself such time as I may consume. I trust that the gentleman from Georgia (Mr. BARR) would tell the people of Kansas that they cannot have a needle exchange program and we do not tell Georgia that they cannot have such a needle exchange program.

Mr. Chairman, I yield 1 minute and 40 seconds to the gentlewoman from Maryland (Mrs. MORELLA).

Mrs. MORELLA. Mr. Chairman, I thank the gentleman from Virginia for yielding me this time, and I rise in opposition to the Tiahrt amendment. We would provide not only for drug abuse. We do want to help people, but we are not going to do it by furnishing you the means to inject mind-altering substances into your veins.

I want to point out, also, this amendment had been rejected by the Committee on Appropriations. Trying to micromanage D.C. would be counterproductive for the Congress and it encroaches on the legitimate roles of the City Council and the Control Board. We in Congress have worked hard to give back local control to our communities, and these provisions would run contrary to that objective.

As has been mentioned, the District of Columbia has the highest mode of transmission and it accounts for over 37 percent of all new AIDS cases. Incidentally, AIDS is the third leading cause of death of all people in the District of Columbia. And for women, where the rate of infection is growing faster than among men, it is the highest mode of transmission.

Scientific evidence supports the fact that needle exchange programs reduce HIV infection and do not contribute to illegal drug use. And since Johns Hopkins from Maryland had been mentioned earlier, I have an article from the newspaper which says: 'And for drug users, needle exchange program neither promotes crime nor encourages children to take up drugs as critics fear, two Johns Hopkins researchers said.'

The nation’s scientific community is united in ruling that giving clean needles to HIV-infected addicts is good public health policy.

AMA, ABA, the pediatrics, the Mayors, Dr. Koop has been mentioned. Let us let public health experts make those decisions and vote against the amendment.
Mr. TIAHRT. Mr. Chairman, I yield 1 minute to the gentleman from California (Mr. CUMMINGS),

Mr. CUMMINGS. Mr. Chairman, the opponents of this issue say that everyone is united in the scientific world. That is just absolutely not true. It may be their opinion but it is not fact.

Secondly, have any of my colleagues ever gone on drug ride-Along? You go through these houses. You would not walk in there with combat boots. There is trash, there are needles all over the place. In several of these I found mattresses where the prostitutes are asking for sex for drugs, and in one I even found a teddy bear where the prostitute had their child. The child is playing around all of these needles.

The San Diego police then took me into a park and said, "DUKE, look at all the needles in this park." Would you want your child around where they dump these needles? These addicts are not responsible people. They are going to take these extra needles, they are going to put them anywhere they want. We walked down the street. They are in the gutter. They are in the park. How would you like your child to walk along and stub one of those needles in their boot or in their sandal or in their foot? I think you would panic automatically on these things.

It is not a good thing, needle exchange, and it is actually a negative effect.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself such time as I may consume. I would remind my friend from California that there are 19 such needle exchange programs in California, but also, most importantly, this is a needle exchange program. There are no extra needles as the gentleman is a needle exchange program. There are needle exchanges as the gentleman referred to. You do not get a clean needle unless you give up a dirty needle. That is what this is all about, trying to get rid of these dirty needles.

Mr. Chairman, I yield 1 minute to the gentleman from Baltimore, MD (Mr. CUMMINGS) that has a particularly effective needle exchange program.

Mr. CUMMINGS. Mr. Chairman, I stand in strong opposition to this amendment.

A lot has been said about the Baltimore program, but the fact still remains that the Baltimore program lowers the rate of crime. In those areas where needle exchange takes place, it has lowered the crime rate. Second, it lowers the rate of the spread of AIDS. It has been very, very clear, and it has been studied by Johns Hopkins Hospital and University, the number one university and hospital in the country.

Number three, it has reduced the use of drugs. I live in a drug-infested neighborhood that for years made does not even make sense. The fact is that in the areas where needle exchange takes place, they have discovered that there are less needles on the streets so that people can stub their toes and whatever.

This is a very, very, very bad amendment. We were last year and I talked about people dying. The fact is that many have died because we did not do the right thing last year, and now we have an opportunity to save some more lives. This is our opportunity. It is a chance. I beg the House to vote against this Tiahrt amendment.

Mr. TIAHRT. Mr. Chairman, I yield the Members that nine out of 10 injection drug users in Baltimore are infected with hepatitis C. It is not a successful program.

Mr. Chairman, I yield 2 minutes to the gentleman from Florida (Mr. WELDON).

Mr. WELDON of Florida. Mr. Chairman, I rise in support of the Tiahrt amendment to the D.C. appropriations bill. This amendment will prohibit Federal and District funds from being spent on any program to distribute hypodermic needles for the purpose of illegal drug injection.

When we had this debate several years ago, I did take the time to read the bulk of the studies on this issue. The studies in my opinion in no way make it clear that these programs work. There are studies that show that these programs are actually bad. Each side can pull out the respective studies and quote from their studies to make these kinds of assertions.

The District of Columbia is not some hamlet in Maryland that we are talking about. We are talking about the capital of the United States of America. I consider this town to be as much the possession of every person in the United States as it is the people who live here year round, and I believe it is very, very appropriate for us to set some standards.

This is a good amendment. The needle exchange programs, I believe, encourage the use and they send a very, very bad signal to our youth. There are studies that show obviously it plays a role in the passage of infectious diseases.

I strongly encourage my colleagues on both sides of the aisle to vote in support of the Tiahrt amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield 30 seconds to the gentleman from Baltimore, Maryland (Mr. CUMMINGS).

Mr. CUMMINGS. Mr. Chairman, I thank the gentleman for yielding this time to me.

The Johns Hopkins University just concluded a study in which they found that neighborhoods in Baltimore with needle exchange programs had a drop in economically-motivated crimes even though those same categories of crime rose over the same 4-year period. That needle exchange program did not significantly increase the willingness of teens to use drugs and the communities with needle exchange programs did not experience the number of discarded drug vials and needles found in the streets.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from the Virgin Islands (Mrs. CHRISTENSEN) who is a physician, a family practitioner, throughout her career.

Mrs. CHRISTENSEN. Mr. Chairman, I yield 1 minute to the gentleman from the other side of the aisle say that needle exchange sends a negative message, but needle exchange sends a good message that we will implement and support policies that save lives.

Our colleagues who support that amendment use the statistics and deliberately twist them to support a position that flies in the face of overwhelming scientific evidence and is contrary to public health policy. The needle exchange programs take place in those communities where there is high drug use, so of course the statistics show high drug use. But they have been proven over and over again, that drug use is reduced in those communities where needle exchange programs exist. Yes, I am a physician. I know from experience what HIV can do to end lives that have otherwise gotten back on track and are productive after leaving drugs behind. What we are doing here does not even give people, good people who have had the illness of drug addiction, a chance.

But do not take my word for it. My colleagues have heard of all of the other organizations that support needle exchange, and take what Dr. Koop says, that it can save lives and reduce crime.

This is a terrible amendment. It jeopardizes the District's effort to address what is a serious epidemic here. Let us not write off lives, let us save them.

Mr. TIAHRT. Mr. Chairman, I yield 1 minute to the gentleman from Pennsylvania (Mr. PITTS).

Mr. PITTS. Mr. Chairman, I rise in support of the amendment offered by the gentleman from Kansas (Mr. TIAHRT). If all else fails, look to the evidence in a place where such a policy has already been attempted. Let us look at the Vancouver experiment.

The Vancouver needle exchange program is one of the largest in the world, distributing 2% million needles in the last year alone. Well, instead of decreasing the rate of HIV and AIDS in Vancouver, the HIV rate among needle exchange users is 27% lower than the general population.
exchange participants is even higher than the rate among injecting drug users who do not participate. How can that be called an improvement? And we want to emulate that here?

The death rate due to illegal drugs in Vancouver has also skyrocketed since the program began, and the highest rates of poverty crime in Vancouver are within two blocks of the needle exchange.

At the very least, the available scientific studies in no way conclude that the opposite is true. In fact, it looks as though destructive habit and help them to stop shooting up. In fact, there is overwhelming evidence that they actually help reduce drug abuse by encouraging injection drug abusers to enter treatment.

As a former prosecutor and a member of the Judiciary Committee, I take very seriously the epidemic of drug addiction in our society. But we cannot make responsible public policy based on fear and ignorance.

It is bad enough for legislators to overrule local decision makers in matters of this kind. But it is the worst kind of irresponsibility for us to make sure that Members and the people of the District from using their own money for this purpose, money obtained through local taxation that is widely supported by citizens of the District, programs that have proven to be effective, according to the National Institutes for Health, the Centers for Disease Control and practically every respected public health agency in America, programs, by the way, that are saving millions of taxpayer dollars every year in health care costs.

The overwhelming evidence is that they prevent HIV infection, that they do not encourage or increase drug abuse, that actually help reduce drug abuse by encouraging injection drug users to enter treatment.

It is bad enough for legislators to overrule local decision makers in matters of this kind, but it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community to say in effect, “our minds are made up. Don’t confuse us with facts.”

I have seen what needle exchange programs have accomplished in Massachusetts, Mr. Chairman, and I know that they have saved lives.

If this amendment becomes law, more people in Washington, DC will become infected with the AIDS virus. More people will die of it. And their blood will be on our hands, Mr. Chairman.

I urge my colleagues to vote “no” on the amendment.

Mr. TIAHRT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would like to remind the gentleman from Massachusetts (Mr. DELAHUNT), other speakers have indicated that the underlying bill already bars the use of Federal funds for needle exchange programs in the District of Columbia, but the gentleman is not satisfied with that. He wants to prevent the people of the District from using their own money for this purpose, money obtained through local taxation that is widely supported by citizens of the District, programs that have proven to be effective, according to the National Institutes for Health, the Centers for Disease Control and practically every respected public health agency in America, programs, by the way, that are saving millions of taxpayer dollars every year in health care costs.

The overwhelming evidence is that they prevent HIV infection, that they do not encourage or increase drug abuse, that actually help reduce drug abuse by encouraging injection drug users to enter treatment.

It is bad enough for legislators to overrule local decision makers in matters of this kind, but it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community to say in effect, “our minds are made up. Don’t confuse us with facts.”

I have seen what needle exchange programs have accomplished in Massachusetts, Mr. Chairman, and I know that they have saved lives.

If this amendment becomes law, more people in Washington, DC will become infected with the AIDS virus. More people will die of it. And their blood will be on our hands, Mr. Chairman.

I urge my colleagues to vote “no” on the amendment.

Mr. TIAHRT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would like to remind the gentleman from Oklahoma (Mr. ISTOOK), the chairman of the Subcommittee on the District of Columbia of the Committee on Appropriations.

Mr. ISTOOK. Mr. Chairman, what are the goals we have? To save lives, to reduce crime, to reduce illegal drug usage which helps to reduce the great epidemic of drug addiction in our society.

The amendment which is widely supported by the local citizenry.

This is unfair to DC residents, who find themselves subject to the whims of representative administrators. But, it is also a terrible precedent for the country as a whole. Because despite the squawkishness of some Members of Congress at the mere sight of a needle, the truth is that these programs work. They prevent HIV infection. They do not encourage or increase drug abuse. In fact, there is overwhelming evidence that they actually help reduce drug abuse by encouraging injection drug abusers to enter treatment.

As a former prosecutor and a member of the Judiciary Committee, I take very seriously the epidemic of drug addiction in our society. But we cannot make responsible public policy based on fear and ignorance.

It is bad enough for legislators to overrule local decision makers in matters of this kind. But it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community. To say, in effect, “our minds are made up. Don’t confuse us with facts.”

I have seen what needle exchange programs have accomplished in Massachusetts, Mr. Chairman, and I know that they have saved lives.

If this amendment becomes law, more people in Washington, DC will become infected with the AIDS virus. More people will die of it. And their blood will be on our hands, Mr. Chairman.

I urge my colleagues to vote “no” on the amendment.

Mr. TIAHRT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would like to remind the gentleman from Oklahoma (Mr. ISTOOK), the chairman of the Subcommittee on the District of Columbia of the Committee on Appropriations.

Mr. ISTOOK. Mr. Chairman, what are the goals we have? To save lives, to reduce crime, to reduce illegal drug usage which helps to reduce the great amount of crime that is associated with it.

It is a real problem which this bill does great things to correct, and I want public health community to say in effect, we have already made up our minds, do not confuse us with the facts. Let us save some lives and vote no on the amendment.

Mr. Chairman, I rise in opposition to the amendment by the gentleman from Kansas.

The bill before us already bars the use of Federal funds for needle exchange programs in the District of Columbia. But the gentleman is not satisfied with this restriction. He wants to prohibit the people of the District from using their own money for this purpose—money obtained through local taxation for programs that are widely supported by the local citizenry.

This is unfair to DC residents, who find themselves subject to the whims of representative administrators. But, it is also a terrible precedent for the country as a whole. Because despite the squawkishness of some Members of Congress at the mere sight of a needle, the truth is that these programs work. They prevent HIV infection. They do not encourage or increase drug abuse. In fact, there is overwhelming evidence that they actually help reduce drug abuse by encouraging injection drug abusers to enter treatment.

As a former prosecutor and a member of the Judiciary Committee, I take very seriously the epidemic of drug addiction in our society. But we cannot make responsible public policy based on fear and ignorance.

It is bad enough for legislators to overrule local decision makers in matters of this kind. But it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community. To say, in effect, “our minds are made up. Don’t confuse us with facts.”

I have seen what needle exchange programs have accomplished in Massachusetts, Mr. Chairman, and I know that they have saved lives.

If this amendment becomes law, more people in Washington, DC will become infected with the AIDS virus. More people will die of it. And their blood will be on our hands, Mr. Chairman.

I urge my colleagues to vote “no” on the amendment.

Mr. TIAHRT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would like to remind the gentleman from Massachusetts (Mr. DELAHUNT), other speakers have indicated that the underlying bill already bars the use of Federal funds for needle exchange programs in the District of Columbia, but the gentleman is not satisfied with that. He wants to prevent the people of the District from using their own money for this purpose, money obtained through local taxation that is widely supported by citizens of the District, programs that have proven to be effective, according to the National Institutes for Health, the Centers for Disease Control and practically every respected public health agency in America, programs, by the way, that are saving millions of taxpayer dollars every year in health care costs.

The overwhelming evidence is that they prevent HIV infection, that they do not encourage or increase drug abuse, that actually help reduce drug abuse by encouraging injection drug users to enter treatment.

It is bad enough for legislators to overrule local decision makers in matters of this kind, but it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community to say in effect, we have already made up our minds, do not confuse us with the facts. Let us save some lives and vote no on the amendment.

Mr. Chairman, I yield 1 minute to the gentleman from Oklahoma (Mr. ISTOOK), the chairman of the Subcommittee on the District of Columbia of the Committee on Appropriations.

Mr. ISTOOK. Mr. Chairman, I yield 2½ minutes to the gentleman from Massachusetts, Mr. DELAHUNT.

Mr. DELAHUNT. Mr. Chairman, other speakers have indicated that the underlying bill already bars the use of Federal funds for needle exchange programs in the District of Columbia, but the gentleman is not satisfied with that. He wants to prevent the people of the District from using their own money for this purpose, money obtained through local taxation that is widely supported by citizens of the District, programs that have proven to be effective, according to the National Institutes for Health, the Centers for Disease Control and practically every respected public health agency in America, programs, by the way, that are saving millions of taxpayer dollars every year in health care costs.

The overwhelming evidence is that they prevent HIV infection, that they do not encourage or increase drug abuse, that actually help reduce drug abuse by encouraging injection drug users to enter treatment.

It is bad enough for legislators to overrule local decision makers in matters of this kind, but it is the worst kind of irresponsibility for us to substitute our own uninformed opinions for the sound judgment of the public health community to say in effect, we have already made up our minds, do not confuse us with the facts. Let us save some lives and vote no on the amendment.

Mr. Chairman, I rise in opposition to the amendment by the gentleman from Kansas.

The bill before us already bars the use of Federal funds for needle exchange programs in the District of Columbia. But the gentleman is not satisfied with this restriction. He wants to prohibit the people of the District from using their own money for this purpose—money obtained through local taxation for programs that are widely supported by the local citizenry.

The amendment of the gentleman from Kansas (Mr. TIAHRT) that we are voting on offers the identical language that was approved last year by this House, approved by the Senate, and signed into law by the President. I want to make sure that people know that we already have in this bill a new initiative, a huge assault against illegal drug usage and the problems it causes in the District.

The District funds drug treatment programs right now that are overcrowded because more than anywhere else there are so many people who are convicted felons convicted of drug offenses that are in these programs that they crowd out the ability of other people to get in.

This bill creates with Federal dollars a $23 million new program of universal drug testing for the 30,000 people in the District of Columbia that are on probation or parole, most of them for things related to drug offenses. Included within that program is some $16 million for drug treatment. That will free up the money that the District is currently spending for drug treatment on those programs that are being funded with our Federal tax dollars. It is a war on drugs.

We are funding in this bill with Federal taxpayer dollars the most aggressive war on drugs of any community in the country, and we are doing it because this is our Nation’s capital. But we do not want a mixed message. Is it too much to ask when we fund a war on drugs that the message is a war on drugs and not peaceful co-existence? I fear the needle exchange program would use public money to undercut and undermine the effort that we have undertaken in this bill to combat illegal drugs.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Oklahoma (Mr. ISTOOK), the chairman of the Subcommittee on the District of Columbia of the Committee on Appropriations.

Mr. ISTOOK. Mr. Chairman, what are the goals we have? To save lives, to reduce crime, to reduce illegal drug usage which helps to reduce the great amount of crime that is associated with it.

It is a real problem which this bill does great things to correct, and I want public health community to say in effect, we have already made up our minds, do not confuse us with the facts. Let us save some lives and vote no on the amendment.
not effective, that the studies have large gaps. It is not good science, and the reason that babies have AIDS is because their mothers are injecting themselves with illegal drugs.

Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I yield 20 seconds to the gentleman from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Chairman, the Vancouver study has been often cited here. Let me quote the authors of that study:

As the authors of the Canadian study, we must point out that these officials have misinterpreted our research. The study in the Lancet, the British medical journal, found that 29 cities worldwide where the program was in place, HIV infection dropped by an average of 5.8 percent a year among drug users. In 51 cities that had no needle exchange plans, drug related infection rose by 5.8 percent a year.

Clearly these efforts can work.

Mr. TIAHRT. Mr. Chairman, I yield 1½ minutes to the gentleman from Oklahoma (Mr. COBURN).

Mr. COBURN. Mr. Chairman, as my colleagues know, I continue to be amazed. I do not believe there is anybody on that side of the aisle that has actually read the studies. I have read every study on drug use. I want to give my colleagues some statistics about Vancouver. We do not misinterpret them; we read the conclusions at the end of the studies. I actually have met with the Vancouver study, and I will be happy to quote their summation. But let me list for my colleagues some of the things that have been said about the Vancouver program.

The Vancouver Police Department stated there is a 24-hour drug market now because there is a study at the location of the needle exchange program.

Number two, property crime of all sorts is highest of any other place in Vancouver where the needle exchange program is located.

Number three, the elementary teachers will not let their schoolchildren go outside in this area of Vancouver because there are needles strung out all over. They are fearful that these children will be infected with one of the needles.

Absent any mandate for drug treatment, needle exchange programs will focus on what they can afford and do best, exchange needles. All interviewees associated with Vancouver stated that needle exchange programs are not a silver bullet, but in reality that is what we are trying to do.

The fact is there is a 33 percent increase in those using needles in the needle exchange program of Vancouver compared to those drug addicts who are not in a program.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute and 10 seconds to the gentleman from New York (Mr. NADLER).

Mr. NADLER. Mr. Chairman, the evidence is clear and convincing. Needle exchange programs save lives.

The government’s top scientists, the National Academy of Sciences, the National Commission on AIDS, the National Institutes of Health, and the General Accounting Office have all concluded that needle exchange programs are effective in preventing the spread of AIDS and that they do not encourage drug use.

The numbers are shocking. Every day, 33 people become infected with AIDS, a virus as a result of intravenous drug use. The Surgeon General has noted that 40 percent of all new AIDS infections in the U.S. are either directly or indirectly the result of infection by contaminated needles. For women and children, the figure is 75 percent.

Needle exchange programs are one of the very few programs that have demonstrated that they dramatically reduce the number of new AIDS infections and save lives. To ban Federal funds for these programs in the District of Columbia will bring certain death to thousands.

Finally, Mr. Chairman, we should not prevent the District of Columbia from exercising its judgment in spending its money, not Federal money, to join the other 113 local governments in preventing the spread of AIDS through the use of a needle exchange program.

We do not have an equal interest, all of us, in the affairs of the District with the residents. They live here. We have an interest in a decent Capital. Ele-

Mr. Chairman, I rise today in opposition to the Tiahrt amendment which would prohibit federal funds for needle exchange distribution programs in the District of Columbia.

Mr. Chairman, the amendment we are debating today is a death sentence to many in this country. Mr. Chairman, the evidence is clear and convincing. Needle exchange programs save lives.

The federal government’s top scientists, as well as the National Academy of Sciences, the National Commission on AIDS, the National Institutes of Health, and the General Accounting Office, have all concluded that needle exchange programs are effective in preventing the spread of AIDS, and that they do not encourage drug use. And yet, with this evidence in hand—with scientific proof in hand that needle exchange saves lives—some in this Congress would rather let people die and suffer than let science and medicine help those in need.

The numbers are shocking. Every day, 33 people become infected with the AIDS virus as a result of intravenous drug use. This includes not only drug users themselves, but also their partners and their children. The Surgeon General has stated that 75 percent of all new AIDS infections in the U.S. are either directly or indirectly the result of infection by contaminated needles; for women and chil-

There is no gray area here. We know that needle exchange saves lives, and that it does not cause an increase in IV drug use. The fact, studies show that IV drug use actually declines as a result of needle exchange, because needle exchange programs encourage drug users to seek treatment.

If we have the ability and resources to help those who want and need assistance and save them from probable death, then why not help them? To remain indifferent to the lives lost is morally bankrupt. The stakes are far too high to let a few extremists stand in the way of a sensible policy that we know will save many lives.

Mr. Chairman, I do not believe that any member of this House could deny that the AIDS epidemic is a national and international problem that must be meaningfully addressed. Needle exchange programs are one of the very few programs that have demonstrated that they dramatically reduce the number of new AIDS infections and save lives. There is no real controversy surrounding this compelling data—all the experts agree it is a fact that needle exchange saves lives.

Mr. Chairman, we do not support the use of intravenous drugs. But we also have to face reality. People do use drugs. If we can reduce the incidence of the use of dirty needles, contaminated with blood borne pathogens, then we can reduce the transmissions of AIDS. Scientific study after study has shown that needle exchange does reduce the number of new AIDS infections. I would like to reiterate that six federally funded reports, conducted independently by the National Commission on AIDS in 1991, the General Accounting Office in 1993, the University of California in 1993, the Centers for Disease Control and Prevention in 1993, and the National Academy of Sciences in 1995 confirm this fact.

And, finally, Mr. Chairman, we should not prevent the District of Columbia from exercising its judgment, and spending its money—not Federal money—to join the other 113 local governments in preventing the spread of AIDS through use of a needle exchange program. We do not all have an equal interest in the affairs of the District of Columbia. That statement is the nub of the problem. Washington is our capital. We have an interest in its being a decent capital. But the people who live here have a much greater interest in local affairs than my constituents in N.Y.’s elementary democracy. And they should decide local questions.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Arkansas (Mr. SNYDER).

Mr. SNYDER. Mr. Chairman, what we are talking about here today is one program in the District of Columbia called Prevention Works. Yesterday, I met with their administrative staff and some of their board members, and
today I went out and visited with them as their truck and van was on the streets of the District of Columbia, about 6 minutes’ drive from here.

What is the program we are talking about? It is a 1985 truck with unreliable air-conditioning staffed by two remarkable people, Alphonso and Vera, showing through the good, but compassionate care for a group of people that nobody in this place wants anything to do with.

As it turns out, my last hour visit this morning is the only time a Member of Congress has visited this truck and van and seen what they do, and that includes the proponents who are talking so knowledgeably about it today. They do, indeed, count their needles, and one can watch them do it if one would take the time to visit.

Second point. The issue is not what we in our own personal conclusions or personal thinking, what conclusions we reach. I would spend 10 cents to spare the life of a child. I yield one minute to the gentleman from Virginia (Mr. MORAN).

Mr. MORAN. I yield 1 minute to the gentleman from Virginia (Mr. MORAN). Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentleman from Virginia (Mr. MORAN).

Mr. TIAHRT. I thank Mr. Chairman. Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentlewoman from California (Ms. Lee).

Ms. LEE. Mr. Chairman, I want to thank the gentleman from Virginia for yielding me this time.

Washington, D.C. City Council’s Consensus Budget, as incorporated in the appropriations budget, is sound. However, it has been incurred by some very obnoxious amendments. I oppose these amendments. For the bill especially the Tiahrt amendment, which viciously prohibits the District of Columbia from operating a local private needle exchange program.

The residents of Washington, D.C. pay taxes. They have a right to spend the money the way they want to spend their money. We know now that the transmission of HIV from mother to child can be reduced and eliminated.

Mr. Chairman, I ask my colleagues if they would spend 10 cents to spare the suffering of a child with HIV AIDS.

In San Francisco we have reduced to zero, as the gentlewoman from California (Ms. Lee) mentioned, the transmission rate from mother to child because of the needle exchange program and outreach to pregnant moms. In Baltimore, Dr. Bellenson has told us there are 1,000 people, because of the needle exchange program, who are off drugs now. As far as the hepatitis C argument, it does not apply in this case.

Last year, Dr. Varmus, Dr. Fauci, Dr. Satcher were among the scientists who signed a letter saying we have unanimously agreed that there is conclusive scientific evidence that needle exchange programs reduce transmission.

I urge my colleagues to have the courage to save a child’s life. Vote “no” on the Tiahrt amendment.

We are not condoning IV drug use, just the opposite. We are saying that we want babies in Washington, D.C. to be born free of HIV infection, and we want to provide a proven option to eliminate drug addiction.

Vote “no” on this amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield three-quarters of 1 minute to the gentleman from Brooklyn, New York (Mr. WEINER).

Mr. WEINER. Mr. Chairman, I do not think we will see a single conservative supporting this amendment. After all, I have not been here very long, but I have figured out what conservatives support. They support local initiatives, church-based initiatives, community-based organizations going out and trying to solve a community’s problems and Washington staying out of their way. So there is no way anyone that calls themselves a conservative can possibly support the idea of Congress not only opposing the use of Federal funds, but even local funds, to try to solve a health problem that my colleagues on that side of the aisle have done precious little to solve.

What are we doing here is stepping all over a classic, conservative ideal which has let the District of Columbia manage its affairs the way it sees best.

Mr. MORAN of Virginia. Mr. Chairman, may I inquire as to how much time remains.

The CHAIRMAN. The gentleman from Virginia (Mr. MORAN) has 1 1/4 minutes remaining.

Mr. MORAN of Virginia. Mr. Chairman, I yield three-quarters of 1 minute to the gentlewoman from California (Ms. Pelosi).

Ms. PELOSI. Mr. Chairman, our distinguished ranking member has pointed out the sad tale about the cases of AIDS in Washington, D.C. One-half of all AIDS cases in children are a result of injection drug use by a parent.

Mr. Chairman, I ask my colleagues if they would spend 10 cents to spare the suffering of a child with HIV AIDS.

In San Francisco we have reduced to zero, as the gentlewoman from California (Ms. Lee) mentioned, the transmission rate from mother to child because of the needle exchange program and outreach to pregnant moms. In Baltimore, Dr. Bellenson has told us there are 1,000 people, because of the needle exchange program, who are off drugs now. As far as the hepatitis C argument, it does not apply in this case.

Last year, Dr. Varmus, Dr. Fauci, Dr. Satcher were among the scientists who signed a letter saying we have unanimously agreed that there is conclusive scientific evidence that needle exchange programs reduce transmission.

I urge my colleagues to have the courage to save a child’s life. Vote “no” on the Tiahrt amendment.

Would you spend ten cents to spare a child the suffering of AIDS. In San Francisco we have reduced to zero the transmission rate from mother to child because of the needle exchange program and outreach to pregnant moms. That is our experience.

As for the science, last year, leading scientists issued a statement on needle exchange programs. The signers included Dr. Harold Varmus, Nobel Prize winner and director of the National Institutes of Health; Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Disease; and Dr. David Satcher, our Surgeon General.

They wrote:

After reviewing all of the research, we have unanimously agreed that there is conclusive scientific evidence that needle exchange programs, as part of a comprehensive HIV prevention strategy, have demonstrated effective public health intervention that reduces the transmission of HIV and does not encourage the use of illegal drugs.

The Tiahrt amendment tramples on the ability of D.C. residents to govern themselves. A vote against this amendment is not a vote for needle exchange.

Have the courage to save a child’s life—vote “no” on Tiahrt.
Mr. TIAHRT. Mr. Chairman, I yield myself 1 1/2 minutes.

Mr. Chairman, I just want to remind the gentleman that my amendment does is retain current law. It is law that was supported by the Drug Czar, General Barry McCaffrey; it was passed by this body, the House; it was passed by the Senate; it was signed into law by the President of the United States.

We have heard that we are trying to influence what the taxpayers want here in the District of Columbia. Mr. Chairman, I am a taxpayer in the District of Columbia. All of us here are a taxpayer in the District of Columbia. I care about these people. I care about what is going on.

There is a great deal of desperation for solutions here, and people are reaching far to say these days are successful when they have not read the studies. It is not a successful program.

The real reason that I am trying to stop this ineffective program, at least from public funds, is because it enables people to carry on a destructive behavior. I have seen people who have recovered alcoholics. They said the worst thing that they had during their time of trying to recover was someone to enable them to continue their destructive behavior. That is what we are doing for these people. It is as if we are driving nails in their coffin; we are enabling them.

We are doing a lot to combat illegal drugs in this bill. Mr. Chairman, $25 million is set aside to combat illegal drugs, and yet we are enabling the men and women of this city to take illegal drugs and inject them into their veins. I think it is wrong; I think it is destructive. It does currently go on, it is privately funded, and I think that this does nothing to stop that. If people want to carry on in terms of chlamydia, human papilloma virus, and the cancer that is going to be associated with it.

So the debate really decides, how do we care the most? The compassion exhibited by wanting to eliminate the transmission is a wonderful, compelling argument. But it is not enough compassion. We have to have enough compassion to eliminate the problem and not enable people to fail, as we are enabling our children to fail, by our message of safe sex with a condom that does not protect 50 percent of the sexually transmitted disease in this country today.

So the heart is right; the message is wrong. If we really want to help these people, then we will redouble our efforts to drug treatment centers, not enable them to continue to fail.

The final thing is, what happens to somebody when they get hepatitis C in this country? And that is the growing epidemic in this country, not HIV. It is hepatitis C. That person does one of two things: they either die or they get a liver transplant.

So if we want to enable this epidemic to continue to flourish, then we need to give all of the drug addicts in this country needles, because they are sharing the needles anyway, and that is what the studies show. We are not lessening their long-term health consequences; we are, in fact, enabling them to fail and die of diseases.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself the balance of the time.

Mr. Chairman, it is not just we who are opposed to this amendment who are saying that the needle exchange program does not increase the level of drug addiction, nor increase the amount of AIDS. We are listening to the experts. The American Medical Association says this program is effective. The American Academy of Pediatrics, the American Nurses Association, the Association of Territorial Health Officials, the National Association of County and City Health Officials, the National Institutes of Health, the Centers for Disease Control. Every single professional organization tells us this program works.

The CHAIRMAN. The gentleman from Oklahoma (Mr. COBBUR) has 2 1/2 minutes remaining.

Mr. COBBUR. Mr. Chairman, I want to say a word about all of that I have admiration for those who support this program, because what they are really saying is that they care about those people who are addicted. However, I also would say, we care too. The debate divides on how best to solve the problem, and the issue is, are we best solving the problem by reducing risk, or do we best solve the problem by avoiding risk?

I want to give my colleagues a corollary. Three years, 13 million Americans are going to get infected with an STD: 45 percent of those will never get rid of that infection. Our message to our children has been, you can practice risky behavior as long as you use safe methods to do it. So our message has been, we are going to reduce the risk. And as our message has had time to come home about, we have the largest incidence of sexually transmitted disease of any society, and the largest growth of incurable viral diseases. HIV is nothing compared to what is going to happen in the future. AIDS is the white death, human papilloma virus, and the cancer that is going to be associated with it.

So the debate really decides, how do we care the most? The compassion exhibited by wanting to eliminate the transmission is a wonderful, compelling argument. But it is not enough compassion. We have to have enough compassion to eliminate the problem and not enable people to fail, as we are enabling our children to fail, by our message of safe sex with a condom that does not protect 50 percent of the sexually transmitted disease in this country today.

So the heart is right; the message is wrong. If we really want to help these people, then we will redouble our efforts to drug treatment centers, not enable them to continue to fail.

The final thing is, what happens to somebody when they get hepatitis C in this country? And that is the growing epidemic in this country, not HIV. It is hepatitis C. That person does one of two things: they either die or they get a liver transplant.

So if we want to enable this epidemic to continue to flourish, then we need to give all of the drug addicts in this country needles, because they are sharing the needles anyway, and that is what the studies show. We are not lessening their long-term health consequences; we are, in fact, enabling them to fail and die of diseases.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself the balance of the time.

Mr. Chairman, it is not just we who are opposed to this amendment who are saying that the needle exchange program does not increase the level of drug addiction, nor increase the amount of AIDS. We are listening to the experts. The American Medical Association says this program is effective. The American Academy of Pediatrics, the American Nurses Association, the Association of Territorial Health Officials, the National Association of County and City Health Officials, the National Institutes of Health, the Centers for Disease Control. Every single professional organization tells us this program works.

Mr. COBBUR. Mr. Chairman, I want to say a word about all of that I have admiration for those who support this program, because what they are really saying is that they care about those people who are addicted. However, I also would say, we care too. The debate divides on how best to solve the problem, and the issue is, are we best solving the problem by reducing risk, or do we best solve the problem by avoiding risk?

I want to give my colleagues a corollary. Three years, 13 million Americans are going to get infected with an STD: 45 percent of those will never get rid of that infection. Our message to our children has been, you can practice risky behavior as long as you use safe methods to do it. So our message has been, we are going to reduce the risk. And as our message has had time to come home about, we have the largest incidence of sexually transmitted disease of any society, and the largest growth of incurable viral diseases. HIV is nothing compared to what is going to happen in the future. AIDS is the white death, human papilloma virus, and the cancer that is going to be associated with it.

So the debate really decides, how do we care the most? The compassion exhibited by wanting to eliminate the transmission is a wonderful, compelling argument. But it is not enough compassion. We have to have enough compassion to eliminate the problem and not enable people to fail, as we are enabling our children to fail, by our message of safe sex with a condom that does not protect 50 percent of the sexually transmitted disease in this country today.

So the heart is right; the message is wrong. If we really want to help these people, then we will redouble our efforts to drug treatment centers, not enable them to continue to fail.

The final thing is, what happens to somebody when they get hepatitis C in this country? And that is the growing epidemic in this country, not HIV. It is hepatitis C. That person does one of two things: they either die or they get a liver transplant.

So if we want to enable this epidemic to continue to flourish, then we need to give all of the drug addicts in this country needles, because they are sharing the needles anyway, and that is what the studies show. We are not lessening their long-term health consequences; we are, in fact, enabling them to fail and die of diseases.

Needle exchange is supported by medical and health related organizations. Last year, the National Institute of Health issued a determination that needle exchange programs reduce HIV transmission and such program do not encourage the use of drug.

Thus, the health impact of this amendment would be devastating in this city. As with most major U.S. cities, D.C. faces an AIDS epidemic that must be fought on all levels. D.C. has the highest rate of new HIV infections in the country. AIDS is the third largest cause of death in this city. We must not handicap this city's ability to stem the tide of AIDS transmission.

I also believe that the residents of this city deserve to use the mechanism of democracy and its elected officials should be able to make decisions that benefit the citizens. The local government in D.C. has chosen to use its own funds to address this need.

Congress has no business in the local affairs of the District government. D.C. has chosen to implement this program to prevent the spread of AIDS. This nationally recognized program has been successful in bringing addicts into treatment. D.C. is the only jurisdiction that has a federal bar on the use of local funds.

The District of Columbia no longer receives the federal payment, thus all of these funds are from local taxpayers. I oppose this intrusion into local affairs and I believe that this amendment will severely hurt the residents of D.C. I urge my colleagues to oppose this amendment.

Ms. MILLENDER-MCDONALD. Mr. Chairman, I rise today in strong opposition to the amendment offered by Representative TIAHRT that prohibits federal and local funds from being spent on needle exchange programs in the District of Columbia. I object to this intrusion into the funding priorities of the District. I also oppose this amendment because needle exchange has been shown to be an effective method of HIV prevention.

Needle exchange is supported by medical and health related organizations. Last year, the National Institute of Health issued a determination that needle exchange programs reduce HIV transmission and such program do not encourage the use of drug.

Thus, the health impact of this amendment would be devastating in this city. As with most major U.S. cities, D.C. faces an AIDS epidemic that must be fought on all levels. D.C. has the highest rate of new HIV infections in the country. AIDS is the third largest cause of death in this city. We must not handicap this city's ability to stem the tide of AIDS transmission.

I also believe that the residents of this city deserve to use the mechanism of democracy and its elected officials should be able to make decisions that benefit the citizens. The local government in D.C. has chosen to use its own funds to address this need.

The District of Columbia no longer receives the federal payment, thus all of these funds are from local taxpayers. I oppose this intrusion into local affairs and I believe that this amendment will severely hurt the residents of D.C. I urge my colleagues to oppose this amendment.

Ms. MILLENDER-MCDONALD. Mr. Chairman, I rise today in strong opposition to the Tiahrt amendment to H.R. 2587. As a Member of this House representing a region of the country with an astronomically high rate of HIV transmission and AIDS, I cannot support this bill. I cannot support legislation that not only prohibits the use of federal funds, but also prohibits the use of local or other funds. What are we saying to the citizens of the District of Columbia when their elected representative does not support this bill?

HIV and AIDS continue to plague this Nation. Yes, we have seen some much-needed improvements in the extension of lives through better treatment and we have seen the number of deaths resulting from AIDS fall for the first time. But we have not and will not see the rate of HIV transmission fall if we continue to let politics rule the legislative process.
The needle exchange programs that have been implemented in inner-cities throughout the country are playing a crucial role in reducing HIV transmission, assisting HIV positive drug users in obtaining necessary medical care and drug treatment, and providing essential information and AIDS. This is critical for the hundreds of thousands of adults who do not know that their partners are using drugs, and for the innocent children who are born with this fatal disease.

Public health officials do not support this amendment and I encourage my colleagues to join me in voting against this amendment, which is full of politics and void of reason.

The CHAIRMAN. All time has expired.

The question was taken; and the Clerk pronounced that the ayes appeared to have it.

Mr. MORAN of Virginia. Mr. Chairman, I demand a recorded vote, and pending that, I make the point of order that a quorum is not present.

The CHAIRMAN. Pursuant to House Resolution 260, further proceedings on the amendment offered by the gentleman from Kansas (Mr. TIAHRT) will be postponed.

The point of no quorum is considered withdrawn.

Amendment No. 2 offered by Ms. NORTON
Ms. NORTON. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 2 offered by Ms. NORTON:
Page 54, strike lines 19 through 25 (and redesignate the succeeding provisions accordingly).

Ms. NORTON. Mr. Chairman, first I want to thank the gentlewoman from Michigan (Ms. KILPATRICK), the co-sponsor of this amendment, for offering it in the Committee on Appropriations.

This amendment simply strikes gratuitous and now moot language carried over from last year in the bill that forbids the District to use its own funds on a lawsuit testing whether American citizens who live in the District are entitled to voting rights in the Congress.

Members are looking at the only Member of this body who represents taxpayers American citizens who are denied full representation in the Congress. The language in this bill adds to the basic denial of D.C. voting rights, the denial of the right to seek redress in the courts.

Does this Congress really want to pile on the sensitive issue of full democratic representation by seeking to keep the District from testing that denial in court? This provision in the bill is unworthy of this House, unless we want to cross over and join the authoritarian regimes of the world.

In the darkest days of southern segregation, no State sought to legislate black people out of court suits. That is exactly what this amendment does to D.C. residents, however. It is a self-inflicted wound to the status quo denial of rights, even if it means standing to bar the courthouse door.

It should be enough to defeat this amendment that the denial of court redress is patently un-American. It is also futile and moot. The lawsuit for D.C. voting rights recently argued before a three-judge panel in the District court is being carried pro bono by a major law firm.

The District’s involvement always was minimal. The city’s Corporation Counsel participated in the oral argument with permission of the court to participate pro bono. The Corporation Counsel has resigned. His only involvement now would be as a private citizen with no D.C. ties.

Please do not allow history to add to the litany of denials of democracy for the people of the District. Wherever they may stand on their constitutional jurisdiction over the District, this is a different case. Members surely do not want to be counted against peaceable redress of constitutional rights through the courts. No Federal funds are involved. Even District expenditures are not now being used to support this suit.

Please remove these proceedings once and for all from our appropriation bill.

Ms. KILPATRICK. Mr. Chairman, I rise in favor of the amendment.

Mr. Chairman, I want to support and am proud to be a co-sponsor of this amendment that we offered in the Committee on Appropriations.

I agree with the delegate, the gentlewoman from Washington, D.C. (Ms. Norton) that what they seek to strike from the bill today is only $463 million.

Members have heard debate over the last hour on the needle exchange program. We are not going to get into that, but the citizens do have a right, as every citizen of the country has, to spend its local money on those things that they deem necessary for their people.

This amendment that the gentlewoman from the District of Columbia (Ms. Norton) and I were offering would say that the residents of the District of Columbia can spend their local dollars to go to court to challenge the notion that they cannot vote in this Congress, that they do not have a voting representative in this Congress.

The District of Columbia has more population than three of America’s States. All of those States have representatives in this Congress who vote. They all have two Senators in the U.S. Senate who vote. Why, then, do we deprive over 500,000 people who have chosen Washington, D.C. as their place of residence the right to have a representative in this Congress, the right to have two Senators, as all other States have, and the right to use their own local money for those programs that they deem necessary?

The Congressional Research Service goes just a little bit further. They say that the District of Columbia, which is denied the right to vote, should have a representative in Congress. District residents carry some of the same burdens of citizenship that all American citizens pay and do. They pay taxes, they serve in our wars, they die in our wars.

Still, this Congress will not allow them to use their own local funds to defend the right to vote. Why, then, does this Congress not allow the D.C. residents, with the backing of its mayor and its council and its delegate, permission to use their local funds that they also pay, in addition to their Federal funds, allow them the right to go to court and use those funds to defend their right for a vote in this Congress, for a vote on those referenda that they deem necessary?

Mr. Chairman, this is not right, it is not fair and it is not Democratic. As was mentioned earlier, over 500,000 people call D.C. their home. They pay Federal taxes, over $4 billion to this Federal Government. The bill before us is $463 million. Additionally, they pay local taxes.

What are we saying in our amendment, allow D.C. to use their local money to go to court should they want to, to defend their right to vote. This is a glorious country, the best country in the world. The citizens of D.C., American citizens, over 500,000 of them, deserve the right to use their local funds as they see fit.

Mr. Chairman, I urge Members to adopt this amendment.

Mr. ISTOOK. Mr. Chairman, I rise in opposition to this amendment. I very much appreciate the arguments that we have heard from the gentlewomen regarding their support of this particular amendment.

I feel obligated to point out that what they seek to strike from the bill is language that last year was approved by the House of Representatives, approved by the U.S. Senate, and signed into law by the President of the United States. Specifically, it is language that says that public funds shall not be expended for an initiative or a civil law suit permission to use their local funds for those programs that they deem necessary.

I well understand the desire of the proponents of this amendment and many other people to have that vote in
City in the United States, sits down in council; a city that, like every other specifically control are those Federal dollars. If Members watching the actions on the floor today will see that even though they have gone through that process at the local level, the heavy-handed Congress here on the floor of the House of Representatives is adopting amendments which are mean, which take away the city’s ability to provide safety measures for their inhabitants with needle exchanges, to take away adoptions, to take away legal medical marijuana, even though the States that many Members represent have already passed such measures at the State level and local level.

They are taking away the ability of a city to file a lawsuit. These are amendments that are not American amendments, these are amendments that are not fiscal in nature. Members are entitled to it. Congress might have a reason that they would want to support this, but these are city dollars. If Members do not like this, they could run for the City Council in the District and probably take a different point view. I do not think they would be elected successfully.

What we have to remember is that the relationship between the city of Washington, D.C. and the Federal Government is unique. It is described in the Constitution. It goes back to the late 1700s, when we wanted to have a Federal enclave that would not be at the mercy of any State government. It happened when some militia who had been unpaid from the Revolutionary War fell upon the Pennsylvania militia, who were in sympathy with them, and let them chase the Continental Congress across the river from Philadelphia into New Jersey.

At that point, the continental Congress went ahead and said we have to have our own Federal enclave. We cannot trust any State to look after the Federal side of things. They take sides and disputes between States. As a result of this, the District of Columbia was born.

Now, a lot has changed in 200 years. The city still does not have a vote on this floor, although these people pay taxes. They can be drafted. They have served in the military. They do the things everybody in all of our States do.

It has been likened that the District of Columbia is like a city and we are the State. But my colleagues have to remember cities across this country have representatives in State legislatures in the State Capitols and have a vote. The District of Columbia does not.

All this amendment does is it says, because there have been some questions raised about the constitutionality of whether the city should have a vote on the floor, that they could pursue that judicial remedy in the court system with their own money collected by their own citizens through their duly-elected leaders.

With all of the other things piled on, I think the least we can do since we do not give the city a vote on the floor is to allow them to use their own money and pursue their judicial remedies the way any jurisdiction in the country can do.

For heaven’s sakes, if we want democracy to work in the District of Columbia, we have to nurture it, we have to allow some decisions made to be final. We have to allow the city to make its own decisions and not have every decision they make be questioned by Congress. When we do that, they are not going to make the tough decisions because they know they are going to get overridden here, and democracy will fail.

For almost 100 years, the city had no elections, and we had, over the last few years, we have had a vote in the House of Representatives. This amendment ought to be defeated. This amendment ought to be adopted because it deletes one of those mean provisions. I ask my colleagues to vote against all of the amendments except for those of the gentleman by the District of Columbia (Ms. Norton) who was elected by the citizens of Washington, D.C. to be here on the floor of the House of Representatives.

Mr. DAVIS of Virginia. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, I rise in support of this particular amendment. Let me tell my colleagues why. We have been piling on the city with some very difficult issues that I feel deeply about; as well, needle exchange programs, which I oppose. I do not believe that we ought to be giving free needles to people who are committing illegal acts.

The couples’ adoptions, the limitation on the medicinal use of marijuana, this is something that in other jurisdictions, in Arizona and in Colorado and other States that have had referenda, the citizens have decided they want to do that. In the District of Columbia we did not even let them vote. However people feel about those issues, and I am conflicted on these, along with a lot of my other colleagues, what we are talking about here is the right of the citizens of the District of Columbia to have a vote on the House floor and to pursue a final judicial decree that will set their rights at this point, which have been questioned in the courts.

We ask ourselves, if we cannot use city money, who is going to do this? This is city money, it is not Federal money. If this were a prohibition on Federal dollars going to the city, I can understand Congress might have a reason that they would want to support this, but these are city dollars. If Members
years, actually some problems, and we set up a control board over that. But now we have a new mayor, a new council. They are working forward. Let us let them make their own decisions. Let us not second them on everything they do.

So I support the amendment of the gentleman from Oklahoma (Mr. ISTOOK) knows full this was considered last year, was in-

agree with what they seek, but because

courts of this land, not because we
dress of their grievances through the

courts. Wherever they may live, this deals

that was in a bill of about $400

2003 13:13 Apr 29, 2004 Jkt 069102 PO 00000 Frm 00042 Fmt 0688 Sfmt 0634 E:

CONGRESSIONAL RECORD—HOUSE July 29, 1999

I tell my colleagues, Oklahoma City
goes to court using taxpayers’ funds to redress grievances against the Federal Government for the redress of grievances that
happens in Tulsa as well. It happens in Baltimore. It happens in San Francisco and I.A. and Chicago. Large and small
cities, counties, and States bring suits against the Federal Government for the redress of grievances. I assume that happens.

Is that not a fundamental American right? How can we say in this bill, cor-


court and use your corporate funds to

chagrined to find every conservative
committee. I was shocked, saddened,

on the floor of the House of Representa-

atives ought to have a vote. That is our

constitutional right.

Is it our position that we will say, no,

we disagree with that objective; and, therefore, they cannot go to court?

The gentleman from Oklahoma (Mr. ISTOOK) says, oh, well, we are not doing that. Shoot, they can get pro bono ex-

penses. They can get people to donate it, or they can get private donations. They can. The gentleman is correct. So can every other State, county, and mu-

cipality in America.

Would any of my colleagues support legislation which says that Tulsa or Oklahoma City or Baltimore or Upper Marboro could not bring suit for the redress of grievances and saying that something is either against the Con-

stitution or against the Federal state-


tute or against the regulation? I cannot

believe my colleagues would do that.

This is so fundamental to what we be-

lieve about our country.

I want to tell my colleagues, I was

chairman of the Helsinki Commission

until 1995, and I traveled to Sofia in

Bulgaria. Bulgaria would not tell So-

phia, the capital, they can not bring suit. They would under the Communist government, because one could not bring suit at all. That made us really different.

Bucharest in Romania the same

thing, Warsaw in Poland, Prague in

Czechoslovakia.

The CHAIRMAN. The time of the

gentleman from Maryland (Mr. HOYER)

has expired.

(By unanimous consent, Mr. HOYER

was allowed to proceed for 2 additional

minutes.)

Mr. HOYER. Mr. Chairman, this

ought not to be a partisan issue. This is

an issue we fought a Cold War over. We
did not fight it, luckily, for the most

part, with bullets. We fought it with a

commitment to our ideals of freedom

and individual liberty. Not collective

liberty, individual. No citizen, no mat-

ter how wrong they might be, is pre-

cluded from coming to the courts and

standing up. I cannot disagree with
me, but I think I am right.

Mr. Chairman, I hope that, on this

issue, my colleagues summon up the

wisdom and the courage to say we
ought not to do this because it is in-

consistent with what we believe about
our country, what has made our coun-

try different.

Do not tell the residents of the Dis-

ctrict of Columbia that they have a

grievance, but only if they get the lar-
gest of some private donor will they be

to seek constitutional relief. Do not

do not that to them, not because they

are the District of Columbia under the

Constitution as a State or a District

that we have authority over, but be-

cause there are 500,000 Americans, just

as I am an American, just there are col-

leagues are Americans, 260 million of

us, not D.C. Americans, Maryland

Americans, Oklahoma Americans, but

Americans, protected by the best doc-

ument man ever forged, the Consti-

tution of the United States. It holds

these truths to be self-evident, that all

men and women are created equal, each

one of us, endowed, not by the D.C. sub-
committee, not by the House of Rep-

resentatives, endowed by God with cer-

tain unalienable rights, these rights are

life, liberty, and the pursuit of hap-

piness. That is what they seek. Do not

preclude it.

Admit mistake in this area. Support

this amendment.

Mrs. MEEK of Florida, Mr. Chair-

man, I move to strike the requisite

number of words.

Mr. Chairman, it is a very hurtful ex-

perience each year when the D.C. bill

comes to the floor and there is some-

thing in the bill that, in my opinion, in

some way wants to turn back the hands

of time and to turn back justice and

fairness to the people of this District.

The language in H.R. 2857 should be

amended by the courageous gentle-

woman from the District of Columbia

(Ms. NORTON). She has fought a very

hard fight. Each of us should under-

stand this fight, because we seek jus-

tice and we seek freedom. It should be

amended.

The language in the bill is targeted,

and I say targeted because it has some

very dangerous inferences. It is gloomy. It is dark. To me, it appears to point at one group of people, and that

group of people live in the District of

Columbia.

Who are those people? Most of the

people in the District of Columbia are

black like me. Most of those in there are people who have, for years, their rights have been taken away. I have

sat here for 8 years and heard con-

stantly, constantly that we beat away

rights have been taken away. I have

pointed at one group of people, and that

group of people live in the District of

Columbia.
CONGRESSIONAL RECORD—HOUSE

July 29, 1999

amendment. That, Mr. Chairman, very simply, is the amendment.

This amendment is going to create a lot of controversy. I know that. We have debated this amendment before, and I would like to address some of these things in my opening statement, Mr. Chairman.

What does it do, exactly? It prevents the District of Columbia from granting joint adoption to individuals that are not related by blood or marriage. Very simply, adopt...
Finally, and most importantly, Mr. Chairman, I want to say that many will distort this amendment as gay bashing. Some will say this is going to limit the ability of adoptions to go forward. Nothing could be further from the truth. Nothing in this amendment precludes any, any, individual or family related by blood or marriage from seeking adoption. Any individual, regardless of their sexual preference, can still seek legal adoption and then be related through that adoption with the child.

What this amendment will do, Mr. Chairman, is assure that these kids, who desperately need love and, most importantly, security, that they will get it by ensuring that they are placed in legally recognized families.

Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I rise in opposition to the amendment, and to claim the time in opposition.

The CHAIRMAN. The gentleman from Virginia (Mr. MORAN) is recognized for 15 minutes.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, the gentleman from Oklahoma (Mr. LARGENT) is quite right that an appeals court decided that two men could adopt a child in the District of Columbia, a little baby girl. I suspect that one of the reasons was that there are over 3,000 foster care children awaiting adoption, more than 3,000, in the District of Columbia. They do not have loving parents.

Another reason why the court saw fit to allow this is that they had ruled on the parenting ability of these two people. Every day, court judges, with the advice of social workers and other professionals, make determinations on the parental suitability of people wishing to adopt children who have no parents. That is the way it is throughout the country.

This amendment is not law today, but if the gentleman from Oklahoma (Mr. LARGENT) prevails, the District of Columbia will stand alone in not allowing the court system, with the advice of professionals, to make that determination. The District of Columbia will stand alone in having that determination made by politicians in this body who have no knowledge of the suitability of those parents and no direct knowledge of the neediness of those children.

If we adopt this amendment, we are saying we would rather these children be left as orphans, without parents, than allow two people, who the court decides are suitable parents, to adopt those children. That is what this amendment is all about. We are saying we do not want to make that determination, we want professionals to make that determination. We want the domestic law judges, who today are making that determination, to be able to continue to and not be precluded by this amendment.

Mr. Chairman, in surveys that have been conducted, American citizens, by a 4-to-1 margin, say that they would prefer the court system to conduct its business without political interference. So we are not carrying out the public interest, we are not carrying out the interest of our own constituents, we are not even doing what they do in our own jurisdictions today if we pass this amendment.

Mr. Chairman, there are going to be any number of very substantive arguments raised against this amendment. I want to enable my colleagues to make those arguments, but I would very strongly urge defeat of this amendment. I urge not only to the professionals in the court system who are able to make these decisions in every other part of the country.

Mr. Chairman, I reserve the balance of my time.

Mr. LARGENT. Mr. Chairman, I yield myself 15 seconds to remind the body of this country, that there has never, in the history of this country, been a legislative body at any level that has approved joint adoption to people that are unrelated by blood or marriage.

Mr. Chairman, I yield 1 minute to the gentleman from Mississippi (Mr. SHOWS).

Mr. SHOWS. Mr. Chairman, I rise in support of the Largent amendment.

Adoption is the utmost expression of family values, for it allows people the opportunity to extend their homes and their hearts to people in need. But adoption should not be a selfish act. Adoption is for the child's benefit. And if we set aside a meaningful life opportunity for children, they must be given the stability any child needs to grow and thrive.

People who are not married but sharing a house always remain as free to adopt as ever. But the legal relationship created by the adoption should be one between the child and the single adoptive parent, rather than between a child and multiple parents who have no legal relationships amongst each other.

If we really love our children, let us be fair to them. Let them grow up in a stable environment. The Largent amendment is about taking family relationships and raising children seriously. It is fair and reasonable.

Mr. MORAN of Virginia. Mr. Chairman, I yield 2 minutes to the gentleman from Massachusetts (Mr. DELAHUNT), a member of the Committee on the Judiciary.

Mr. DELAHUNT. Mr. Chairman, it is a sad fact that not all parents are fit parents. Child abuse and neglect occurs in all kinds of families. Among the "birth families" no less than adoptive families. Among so-called "traditional two-parent families" no less than families of less conventional description.

But good parents and families come in all shapes and sizes, too. Some of the most loving, nurturing and supportive families I know would fail the litmus test of the gentleman from Oklahoma (Mr. LARGENT). And that would truly be a tragedy for the 3,300 children now languishing in the District's foster care system.

Most of these children in need of adoption are neglected or abused by their biological parents. Many of them are children with special needs, children whose chances of adoption and a chance at life are doubtless even without the restriction that the Largent amendment would impose.

So with so many kids out there who need decent homes, this is not the time for Congress to set starting criteria for those who would be permitted to adopt.

Mr. Chairman, I rise in opposition to the amendment by the gentleman from Oklahoma.

Some who oppose this amendment will emphasize its unwarranted intrusion into family matters best left to the people of the District of Columbia. I share that concern, Mr. Chairman. But today I wish to speak as an adoptive parent, who is concerned first and foremost with the well-being of abandoned and neglected children.

Mr. Chairman, it is a sad fact that not all parents are fit parents. Child abuse and neglect occurs in all kinds of families. Among the "birth families" no less than adoptive families. Among so-called "traditional two-parent families" no less than families of less conventional description.

But good parents and families come in all shapes and sizes, too. Some of the most loving, nurturing and supportive families I know would fail Mr. LARGENT's litmus test.

And that would be a tremendous loss for the 3,300 children languishing in the D.C. foster care system—many of them neglected or abused by their biological parents, many of them children with special needs.
With so many kids out there who need decent homes, this is not the time for Congress to start setting criteria for who will be permitted to adopt. The test we should apply is the one the law already uses to determine whether a child belongs in a particular family situation or not. That test is whether the placement is in the "best interests" of the child.

That evaluation requires the careful weighing of a multitude of factors by those with the requisite expertise. We should ask whether the parents have the means to feed and clothe the child and see to its education. We should ask whether they maintain a home that will offer the child a harmonious, stable and nurturing environment. We should ask whether they have the skills and the commitment it takes to be a good parent.

When we find a family that offers all this to a child in need, what kind of society would reject that family because the parents are "not related by birth," or "not married," or "not the right sex sex?" And, in fact, what does this amendment really say? It does not say that anybody cannot adopt a child. It does not say that a gay person cannot adopt a child. It is confuse the issue. What does this amendment say? It does not say about the legal recognition of same-sex marriages by allowing them to adopt children.

I support my colleague from Oklahoma in what he is trying to do. It simply prohibits funds from being used to allow joint adoption by persons who are unrelated by either blood or marriage. That is pretty simple. I do not think this supports the Supreme Court's decision.

So one of the things we do real often inquire as to how much time is remaining? Why is it irrational? It does not fit all circumstances. The gentleman from Oklahoma is right. It may be irrational. Because it is about love. It is not about law.

So let us be sure we are straight about what this amendment does. It is a great emotional word picture to make no mistake about it. On one side, we have the ACLU that has filed a class-action suit last month challenging the State of Florida overruled it. So now the ACLU is filing again.

I would like to read from the article in the newspaper about the justification for the Supreme Court when they actually decided to rule in favor of the existing law in the State of Florida and which supports the Largent amendment.

The analysis was done by psychologist Paul Cameron. This is what he said, among other points. He said, "The child is reared in a traditional household experiences more emotional problems, suffer more from unstable home lives, and struggle more with their own sexual identities later in life."

He goes on to say, "Children need and deserve the best environment possible in which to learn and grow. The traditional mom-and-dad family provides this, while homosexual relationships do not."

Now, this is a clinical psychologist who has said this. And he said that this supports the Supreme Court's decision.

So I think it is clear to my colleagues that what we are talking about, the real question is, do we want to have these appropriations allow a back-door approach to push for the legalization of same-sex marriages by allowing them to adopt children?

So I support my colleague from Oklahoma in what he is trying to do. It simply prohibits funds from being used to allow joint adoption by persons who are unrelated by either blood or marriage. That is pretty simple. I do not think there is anything in the motion to object to.

To my way of thinking, a family is not made up of unrelated individuals that just happen to be in the household, who happen to be living together and then suddenly want to adopt a child. Neither Congress nor the legislature of any of the States has authorized joint adoption by unrelated individuals. So I think my amendment is very simple. I think it should be supported by my colleagues. I hope it will pass.

Mr. MORAN of Virginia. Mr. Chairman, I yield 2 minutes to the gentleman from New Mexico (Mrs. Wilson) from being adopted. And to say that is being less than straightforward.

This amendment says that even though two people might be living together, if they are unrelated who are unmarried, one of them can adopt. So it does not preclude the adoption of any group in any way from anytime adopting. It is just saying, if they are not married under the legal definition of "marriage," only one of them can have that child as their child.

So one of the things we do real often is confuse the issue. What does this amendment really say? It does not say that a gay person cannot adopt a child. It does not say that anybody cannot adopt a child. What it says is, if a child is adopted in a relationship that is not recognized by law, that it can be only adopted by one of those members, not both, so that the child is not confused, so that the courts are not confused about what the legal representation of that adoption is.

So let us be sure we are straight about what this amendment does. It is a great emotional word picture to think that a child who is dying or a child that is disabled cannot be adopted. But, in fact, it is not true under this amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1½ minutes to the gentleman from New York (Mr. Weiner).
Mr. WEINER. Mr. Chairman, I listened with great interest to the statement of the sponsor of the amendment; and to the great deal of emphasis on how, in the sponsor's opinion, this family structure with two unaffiliated folks would not be in the best interest of the child.

Well, with all due deference, why should we care what we here think is in the best interest of the child? I mean, there are court proceedings that are going to have the opportunity to discern that. There are authorities in all the 50 States, including the District of Columbia, to make that determination. Why is our judgment sitting here so very important?

The notion that somehow they would be better off with one parent, as the previous speaker seemed to imply, or in foster care, which is implicit in this entire debate, is utterly absurd.

The point has also been made that these two people who are seeking the adoption are to the affiliated. They are affiliated. They are affiliated in their love and caring for this child. That affiliation should be the overarching one. That affiliation should be the one that is most important.

Finally, this notion that there is nothing legally binding between these two folks, in fact, in the past in this very House there have been prohibitions put on the District of Columbia from establishing domestic partnership jurisdiction which would clarify this issue once and for all.

In fact, this argument should be about what is best for the child, not what we here think are values and how we define “family.” That is not the issue.

I urge a “no” vote.

Mr. LARGENT. Mr. Chairman, I yield myself some time, as I may consume.

Mr. Chairman, once again I would just remind the gentleman that just spoke that the reason we are here is the courts have said that the Congress has not declared a clear intent and that is entirely what we are doing here today.

Mr. Chairman, I yield 2 minutes to my friend, the gentleman from South Carolina (Mr. GRAHAM).

Mr. GRAHAM. Mr. Chairman, I thank the gentleman for yielding me the time.

Mr. Chairman, count me into the crowd that says, I do not want to destroy the best interest of the child rule that courts use in determining what is the best place for the child to live.

But here is the point I think we are missing: Parental rights attach in couple ways. Biological parents have parental rights because they are the biological parents.

Can they be terminated? Yes. A court can terminate the parental rights of a biological parent. But they have to have a court proceeding where they give notice to the parent and somebody comes and makes a case; and the judge, based on the best interest of the child, will make a legal determination that that would be null and void.

This is a dramatic thing in the law. That happens. But it happens very rarely. But there is room in the law to terminate parental rights. The best interest of the child is always a concern by the court. But there is a legal concept in our law that I hope we never destroy, and that is that biological parents cannot lose their children without a very good reason and we are not going to form families outside the law without a very good reason.

A person who adopts a child that is a ward of the State becomes a legal parent by going through a process that is a pretty exhaustive review of that person’s qualifications to see if the best interest of the child can be accommodated by placing that child, the ward of the State, into the hands of an individual. What my colleagues are trying to prevent here, and the gentleman from Oklahoma (Mr. LARGENT) is doing a good thing in my opinion, is not to take a couple, regardless of their gender, living outside of marriage and put them in the same spot or the same status under the law as a couple who are legally recognized as a married couple.

That is a tremendously damaging concept I think to the legal structure around marriage. That does not mean single individuals cannot adopt children.

What the gentleman from Oklahoma (Mr. LARGENT) is saying is that couples that are not connected by the legal bonds of marriage that has rules of the game and allow them separate property and assets, that we are not going to extend the adoption rules to these couples, and that makes a lot of sense.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 minute to the gentlewoman from Maryland (Mrs. MORELLA).

Mrs. MORELLA. Mr. Chairman, I rise in strong opposition to the Largent amendment.

This legislation not only segregates nontraditional couples but also harms children who are in desperate need of loving families. There are approximately 3,100 children in the D.C. foster care system. We all know that children of all ages deserve love and the nurturing of an adoptive couple, “couple” preferably. The best interest of the child and parenting skills must be the sole factor for placement in safe and loving homes and not marital status or sexual orientation.

Congress has traditionally left family decisions, law decisions, to the State and local levels. The odds for placing these children currently in the D.C. foster care system in loving homes are slim. It would be a travesty to further jeopardize these odds and force children to languish in institutions, at great cost to taxpayers, when there are loving couples waiting to give them homes.

Mr. Chairman, I urge my colleagues to continue to leave family law decisions where they belong, at the local level. Do not lose sight of the thousands of children in foster care who would be deprived of a loving home. Vote “no” on the Largent amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 1⁄2 minutes to the gentleman from Arizona (Mr. KOLBE).

Mr. KOLBE. Mr. Chairman, I rise in opposition to the amendment offered by the gentleman from Oklahoma.

Last month, over 1,000 children in the District of Columbia’s foster care system waited for someone, anyone, to take them home. Over 1,000 children, children looking for a stable, secure home.

The sponsor of the amendment during last year’s floor debate indicated that he wanted to provide a sense of stability for children, and I believe that is true, that he wants that, and we all do. I think the sponsor has also spoken about the importance of the need for two-parent families.

So which is it? This amendment would allow single parent adoptions, but it disallows joint adoptions in the District of Columbia by persons who are not related by either blood or marriage.

I do not quite understand. The sponsor of this amendment believes it is okay not to have two single people who want to be parents to adopt a child, but it is okay to have a single parent adopt a child. Is there not a bit of a double standard here?

The gentleman from Oklahoma has spoken about not wanting to put children in an ambiguous situation, but what could be more ambiguous than keeping a child in foster care? What could be more ambiguous than keeping them in limbo, never allowing them to be adopted?

We have these children in the District who are waiting to be adopted. I would love to have 1,000 lawfully-married-in-the-eyes-of-whatever-religion couples in the District of Columbia step up and adopt these children. But that is not going to happen. I would love to have 1,000 single people in the District of Columbia decide to become a parent and step up and adopt these children. But that is not going to happen, either.

This amendment would limit the options for adoption to those two scenarios. There are 1,000 children in the District waiting to be adopted, that are looking for caring, loving families. We should not adopt this amendment, we should reject it and allow them to have the option of adoption.

Mr. MORAN of Virginia. Mr. Chairman, I yield 1 1⁄2 minutes to the gentlewoman from the District of Columbia (Ms. NORTON).
Ms. NORTON. Mr. Chairman, I thank the gentleman for yielding me this time. I want to clarify. The new docs do not need the amendment. Gay couples can adopt in the District of Columbia and that is not a matter where there is now need for clarification from Congress or anybody else. There is no chance that unsuitable parents can adopt in the District because the courts strictly regulate these adoptions.

This is a gay-bashing amendment. Yet everybody knows that gays can only get to adopt, under court proceedings, children that nobody else will adopt, the disabled children, the older children.

There are practical reasons why this is an important amendment. It guarantees that the child would have ongoing financial responsibility from both people; that the child’s interest would be the concern of the courts and hospitals and in day care programs would be protected; that in the event one parent died, the child could directly inherit; and that if a parent became ill or died, workmen’s compensation and Social Security benefits could be recieved.

Who would want to deny these to a child because of some notion that the parents do not suit the Members here today? They suit this child. These children need loving parents. There are 3,000 of them. They are desperate for homes.

Do not pass this tragic amendment.

Mr. LARGENT. Mr. Chairman, I yield myself such time as I may consume. Again I just want to remind the body that there is nothing in this amendment that precludes anybody, any individual or couple related by marriage or blood from adopting any children, and that in the history of the District of Columbia there has never been one case that has existed that a child has gone unadopted because they could not be given joint adoption to people that were unrelated.

Mr. Chairman, I reserve the balance of my time.

Mr. MORAN of Virginia. Mr. Chairman, I yield such time as she may consume to the gentlewoman from California (Ms. PELOSI).

Ms. PELOSI. Mr. Chairman, I urge the adoption of this amendment.

Mr. Chairman, I urge the adoption of this amendment. Mr. MORAN of Virginia. Mr. Chairman, we also want the $8.5 million for adoption funds used most effectively.

Mr. Chairman, I yield such time as she may consume to the gentlewoman from California (Ms. PELOSI).

Ms. PELOSI. Mr. Chairman, in the interest of safe and secure adoptions for the children of the District of Columbia, I urge a ‘no’ vote on the Largent amendment.

We in Congress do not have any duty more important that protecting the welfare of children. Why, then, would we deny young people in the District of Columbia the right to have two legal guardians instead of one?

There are 3,100 children in the District foster care system, and over 1,000 of them are ready to be adopted. Each of them needs a loving and stable home. This amendment would promote adoptions that are less stable and secure by outlawing joint adoptions by individuals not related by blood or marriage.

The sponsor has made it clear that his amendment does not prohibit adoptions by gays or lesbians. Of course it should not. According to the American psychological association, studies comparing children raised by non-gay and gay parents do not identify developmental differences between these two groups of children.

But since the amendment does not prohibit these adoptions, the logic of the proposals is difficult to grasp. If gay or lesbian couples are going to be adopting children, shouldn’t we want those adoptions to be as stable and secure as possible? What purpose do we serve by making these adoptions more precarious? Why play here is a lack of comfort with fully affirming lesbian and gay adoptions and lesbian and gay families. And what is said is that some members of Congress would ignore the scientific evidence and allow their own lack of comfort to stand in the way of secure family placement of children.

I ask you—in light of the evidence and the overwhelming need, do we have a right to stand in the way of making adoption placements as stable and secure as possible?
Congressional Record—House

July 29, 1999

we acting on behalf of children, or our own prejudices?

Both the child Welfare League of America and the Children’s Defense Fund oppose this dangerous amendment because they recognize that children in the District deserve the most stable homes we can find for them. I urge my colleagues to vote against the Largent amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield such time as he may consume to the gentleman from Massachusetts (Mr. OLVER).

Mr. OLVER. Mr. Chairman, I rise in opposition to the amendment. I rise in opposition to the Largent amendment which prohibits D.C. from using funds for joint adoption by people unrelated by blood or marriage.

I cannot construct or conjure up a legitimate reason for this amendment.

Under the amendment, two sisters, obviously related by blood, would have a right to jointly adopt, but two women unrelated by blood would be precluded from jointly adopting that child regardless of the relative capacity of those two families to provide a stable loving home for the child.

Under the amendment, a married couple has the legal right to jointly adopt. But a common-law couple who have been together for 20 years, have children of their own and, by every proven measure, have love to give another child or even siblings orphaned by tragedy or accident, are prohibited from joint adoption.

It is capricious to argue that two parents provide stability, legal responsibility and continuity to an adopted child, and then deliberately deny the same child the benefit of stability, legal responsibility and continuity by denying joint adoption into the common-law couple’s family.

Three thousand children are presently in foster care, waiting and hoping to be adopted and have a family. One thousand of them are deemed “ready for adoption.”

The underlying bill provides $8.5 million to promote adoption. We should not at the same time constrain the options for these children to find loving homes by attaching this mean-spirited amendment to the bill.

In my view, this amendment is without legitimate purpose and should be rejected.

Mr. MORAN of Virginia. Mr. Chairman, I yield the balance of my time to the gentlewoman from Wisconsin (Ms. BALDWIN).

The CHAIRMAN pro tempore. The gentlewoman from Wisconsin is recognized for 1 minute.

Ms. BALDWIN. Mr. Chairman, let me be clear: If this amendment becomes law, children who are being raised by unmarried couples will still have two parents. They will still receive love, protection and understanding from both parents. And thankfully this amendment cannot stop that.

But what the Largent amendment will do is to prevent joint adoption by individuals who are not related by blood and marriage. In effect, this amendment, under the guise of ensuring the security of children, would prevent otherwise qualified and loving three individuals from adopting the tens of thousands in need of adoption.

We are all aware that this amendment would prevent gay and lesbian couples from adopting children. I find it hard to believe that there are still Members of this Congress who can believe that sexual orientation has a direct effect on a person’s ability to raise a child. The American Psychological Association has conclusively decided that there is no scientific data which indicates that gay and lesbian adults are not fit parents. Research by the APA has also determined that having a homosexual sexual parent has no effect on a child’s intelligence, psychological adjustment, social adjustment, popularity with friends, development of sex-role identity and development of sexual orientation. To maintain assumptions otherwise is unfair, and scientifically unfounded.

It is my belief, and I’m sure that with a moment’s consideration you will all agree, that the issue of adoption is best decided by parents and trained professionals on a case-by-case basis, based on the best interest of the child. We would not deprive children of families who are capable of raising them. How can you cheat a child out of a happy home and a caring family? How can you deny a person the right to share their love, their home, and the security they can offer a child?

Raising a child is a very personal issue, one that deserves the time and consideration of individual case-by-case evaluations. Anything else is simply discriminatory. I urge my colleagues to oppose the Largent amendment, and let each child and each potential parent have the right to an individual evaluation.

Ms. JACKSON-LEE of Texas. Mr. Chairman, I rise in opposition to the amendment offered by Representative LARGENT to the District of Columbia Appropriations bill. This amendment would prohibit unmarried couples from jointly adopting children. I believe that local governments should be allowed to make the proper decision concerning adoptions, based on the universally accepted standards that regards the best interest of the child.

Family law is not an area that Congress generally addresses because it is a local concern. State and local jurisdictions are better suited to address issues of domestic relations.

There is no reason to deny potential parents the right to adopt a child based on their marital status. If we do not deny single people the right to adopt, then an unmarried couple should not be denied the right to raise a child. This amendment places the children that are currently waiting to be adopted at risk for remaining in the foster care system. That would not be in the best interest of any child. These children need consistent care and a safe home.

This amendment suggests that an unmarried couple cannot provide a child with a proper environment to develop intellectually and socially. But this amendment only makes that suggestion of the residents of D.C.

D.C. and 48 other states allow lesbian and gay couples to adopt when it is in the best interest of the child. It is clear that two loving parents, offer a child greater stability than one parent, yet we would make this
Amendment No. 4 offered by Mr. Barr of Georgia
Mr. BARR of Georgia. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore. The amendment is as follows:

Amendment No. 4 printed in House Report 106-283 offered by Mr. Barr of Georgia: Page 65, insert after line 24 the following new section: Sec. 167. None of the funds contained in this Act may be used to enact or carry out any law, rule, or regulation to legalize or otherwise reduce penalties associated with the possession, use, or distribution of any schedule 1 substance under the Controlled Substances Act (21 U.S.C. 802) or any tetrahydrocannabinol derivative.

The CHAIRMAN pro tempore. Pursuant to House Resolution 260, the gentleman from Georgia (Mr. BARR) and a Member opposed each will control 10 minutes.

Mr. BARR of Georgia. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I know that some folks will not listen to this, but right off the bat, let me implore those who will be considering and voting on this amendment to understand as much what it does not do as what it does.

Mr. Chairman, this amendment has nothing whatsoever to do with the publication of the ballot results of the marijuana initiative held in the District of Columbia last year. The current prohibition on taking steps to count and report the results of that ballot extend only through the end of this fiscal year. The amendment that I am proposing has nothing to do with the counting of that ballot.

It has everything to do with continuing to say to the people of this country that insofar as the Federal Government has concern and jurisdiction over drug use, no monies contained in this Act shall be used for the purpose of legalizing or reducing the penalties for any schedule 1 controlled substance including, but not limited to, marijuana.

If, in fact, the residents of D.C. have voted last year to legalize marijuana under the so-called medicinal use purpose, then this amendment today, if it is included in this appropriations bill, will prohibit further steps from being taken to implement that initiative. Without this amendment, the residents of the District of Columbia have voted in favor of marijuana legalization, without this amendment it will go into effect.

That is what this amendment addresses, that is all that it addresses, is further steps, any further steps towards the legalization of marijuana or other controlled substances, schedule 1, in the District of Columbia.

Now I also have and I am sure the folks on the other side have a letter from the Office of the Corporation Counsel for the District of Columbia worrying terribly that the Barr amendment today would prohibit the counting of the ballots of last year's drug initiative. Let me assure the Corporation Counsel that this is not the case. We have also spoken with the subcommittee chair. He understands that this is not the case and has indicated, if it remains a problem for those on the other side who are not going to listen to this debate, then we will include language, seek to include language, in the conference report.

Now that the red herring that the Barr amendment we are discussing today would somehow prohibit the counting and the reporting of the ballots from last year's marijuana initiative, let me reiterate what this amendment does and why it is so essential. It is essential because it will stop further steps from being taken pursuant to last year's initiative or any other from legalizing or reducing the penalties for marijuana or other schedule 1 controlled substances. It will not prevent after the commencement of the next fiscal year on October 1 the counting and reporting of any ballot previously taken.

Legalization of Marijuana for Medical Treatment Initiative of 1998

SUMMARY STATEMENT

This initiative changes the laws of the District of Columbia to: Restore the right of seriously ill individuals to obtain and use marijuana for medical purposes when recommended by a licensed physician to aid in the treatment of HIV/AIDS, glaucoma, muscle spasm cancer, or other serious or chronic illnesses for which marijuana is considered a cost-effective and safe alternative to other treatments, including but not limited to the use of cannabis derivatives; and to prohibit the use of marijuana for any non-medical purpose.

It becomes effective August 5, 1998 (D.C. Law 4-29; D.C. Code (§ 33-541 et seq.) (controlled Substances Act)).
to assure that any medical patient protected by the order of the Mayor of the District of Columbia shall deliver a copy of this act to the President and the Congress to ex-
press the sense of the people of the District of Columbia which can government must develop a system to distribute mari-
juana to patients who need it for medical purposes.

Sec. 11. If any provision of this measure or the application thereof to my person or cir-
cumstance is held invalid, that invalidity shall not affect other provisions or applica-
tions of this act or be construed by the courts. If all or any portion of this act is held invalid without the invalid provision or applica-
tion, and to this end the provisions of this measure are severable.

Sec. 12. This measure shall take effect after a 30 day period of Congressional review as pro-
vided in section 602(c)(1) of the District of Columbia Self-government and Govern-
mental Reorganization Act, approved De-
ember 24, 1973 (87 Stat. 813; D.C. Code § 1–
233(c)(1)).

Mr. Chairman, I reserve the balance of my time.

Mr. MOULIN of Virginia. Mr. Chair-
man, I rise in opposition to the amend-
ment offered by the gentleman from Georgia (Mr. BARR) and claim the time.

Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, we oppose this amend-
ment. We believe it is possible that the use of drugs that would contribute to a drug culture, that would contribute to the debilitation of any individual human being, but that is not the issue we are arguing. The issue we began arguing is whether the District of Columbia can count the ballots in a referenda that inquired as to whether people would support the ability of doctors to pre-
scribe marijuana for their patients who are terminally ill, generally of AIDS, so as to relieve their suffering. Again, my colleagues would think that that should be a professional decision made by professional medical practitioners.

Now up until now, Mr. BARR's intent was to prevent the votes being totaled. That's apparently from being spent to itemize the ballots. The gentleman from Georgia (Mr. BARR) now goes beyond that to say that under any circumstances regardless of what the outcome of that refer-
endum might be that the citizens of the District of Columbia cannot have their doctor prescribe for patients who are suffering to be able to use mari-
juana to relieve their suffering.

Mr. Chairman, there are some rami-
fications of this amendment that go be-
yond what some might consider to be a relatively heartless attempt on the part of the proponent of the amend-
ment. For example, prohibiting the re-
duction of penalties associated with the possession, use or distribution of marijuana or any schedule I substance undermines the efforts of law enforce-
ment, the courts, and the correctional system to enter into plea bargains with criminal defendants in their war against illegal drugs. It could elimi-
nate the option of reducing sentences of prisoners as an incentive to encour-
ge good behavior.

The gentleman from Georgia (Mr. BARR) I know was an assistant U.S. At-
torney. He understands how important it is to be able to plea bargain, to be able to have flexibility, to look for the best option for the criminal defendant or even to use individuals who are caught to be able to turn in the people who are truly distributing drugs. There are a lot of ramifications of this amendment, all of them negative. This should be defeated.

Now at this point I am going to re-
serve the balance of our time, so a number of subsequent speakers can list a number of reasons for our colleagues to vote against this amendment.

Mr. Chairman, I reserve the balance of my time.

Mr. BARR of Georgia. Mr. Chairman, I yield myself such time as I may con-
sume.

Mr. Chairman, the sky is not falling, and the sky will not fall if this amend-
ment is adopted; let me assure my col-
leagues on the other side.

The extent to which the other side and the key proponent who just spoke is opposed to this amendment either blindly in judgment or his ability to fairly read within the four corners of the amendment, or he is simply engag-
ing in an argument that he knows not to be an accurate one, there is nothing in this language that either expressly or by the wildest interpretation of its language would reduce in any way, shape or form the ability of any pros-
ecutor to plea bargain. This amend-
ment is by its four corners and by any reasonable interpretation designed simply to stop efforts to legalize or re-
duce penalties for the possession or use of controlled substances. It has nothing to do with plea bargaining which does not reduce penalties for, it simply dis-
poses of a particular case.

A number of subsequent speakers can list the other state-
ments that the other side will put for-
ward in opposition to simply standing for the proposition that we do not want and this body should not condone ef-
forts to legalize drug usage in the Dis-
trict of Columbia.

Mr. SOUDER. Mr. Chairman, I yield 2 minutes to the gentleman from Indiana (Mr. SOUDER).

Mr. SOUDER. Mr. Chairman, I thank the gentleman from Georgia (Mr. BARR) for yielding this time to me. This is not about health care. The word medicinal in front of this is so disgusting. Marinol, a subpart of mari-
juana, can be used to treat, and it is legal, and if the only way you can do it is through smoke marijuana, one can go to HHS, and there is an appeal proc-
ess for those rare cases.

This is a national drug battle being funded by a few individuals, and it is a back-door way to legalize marijuana. Every year, we go through a drug cer-
tification process. When I go down to Columbia or to Mex-
ico or to Peru and Bolivia and other countries, they always say, “What’s your standard in the United States?” If
in our Nation's capital, we are going to relax our drug laws and allow the back-door legalization of marijuana in our Nation's capital, if we do not reduce the drug sentences for those who are convicted under the federal law, then we should not be here, we should not be doing the drug surveys.

We ought to just acknowledge that we are going to allow the toleration of marijuana because that is, in fact, where we are headed here, that this is like saying that a subcomponent of arsenic can be helpful to somebody, therefore, we are going to encourage the use of arsenic or some other substance that can be fatal, that marijuana is the gateway drug along with tobacco and alcohol to the heroin, to the crack and in and of itself, as we have heard in numerous drug hearings, from abused mothers.

We had an abused mother in Arizona who told us she could get marijuana, mixed it with alcohol, was beating her, and she was in constant fear of her life. It is not just harder drugs, it is also the marijuana. We had multiple wrecks in the last year in my district where either juveniles were on marijuana or those older than students were on marijuana who had automobile wrecks that terminated the lives of other people.

We cannot in our Nation's capital where the Constitution specifically says to exercise exclusive legislation in all cases whatsoever over such district especially when it is a national law. This law applies to every State. The States that went through these referendums are, in fact, being prosecuted in courts to resolve this. There is absolutely no reason to implement such a law in District of Columbia. It would be an abomination to our country.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I would suggest to the gentleman from Georgia (Mr. BARR) that the source of my comments about limiting the ability of legal professionals to come up with plea bargains and to otherwise pursue justice in the court system came from the United States Justice Department and from the offender supervision division of the District of Columbia. So it was not my personal opinion, it was a professional opinion, that the poor wording of this amendment is inspired by a medical marijuana initiative many residents may have opposed, but the outcome is unknown because of the amendment offered by the gentleman for yielding this time to my friends over there.

Then we heard from one gentleman about, well, we need to do prohibition. His argument was for prohibition of alcohol, not just marijuana, but this goes far beyond legalization. This says they cannot reduce the mandatory minimums, they cannot experiment with diversion programs. They must say seems to me the least intellectually valid enactment of the United States Congress in its history. He has backed away from that. But what he now has is a rather poorly drafted amendment that is very different than the one its proponents defend.

In the first place, it does not just say law, it says law, rule, or regulation. If there were to be a policy in the prosecutor's office governing plea bargaining in controlled substances cases and my colleague wanted to amend that rule by which he controlled the practice of plea bargaining, it might be effective, but all the more important is the other language. It does not just say to legalize it, it says otherwise reduce penalties.

So do my colleagues know what would be illegal under this if it applies? Government Pataki of New York, the Governor of New York, has recently proposed, a good Republican, George Pataki, has to reduce some of the sentencing. They have mandatory minimums, and he said those are not working. If they were governed by this, it could not happen.

Now are we going to tell the District of Columbia that they cannot in their policy experiment with a diversion program for first offenders, with reducing mandatory?

This Congress passed a law in 1994 over the objections of many on that side, but it was passed by the Congress, which did away with mandatory minimums in some cases for some controlled substances. Had we been bound by this law, it could not have happened.

This is an outrage.

The debate about legalization and medical marijuana can move forward. I will note that this horrendous policy of supporting medical marijuana that is being decried over there has been supported by the states of our Nation, by the states, and I keep noting the extent to which the Republican party, at least as represented in the House, is falling out of love with the voters of America. Time and time again in public opinion polls or referenda the voters disappoint the Republican party, at least as represented in the House, is falling out of love with the voters of America.

Then we heard from one gentleman about, well, we need to do prohibition. His argument was for prohibition of alcohol, not just marijuana, but this goes far beyond legalization. This says they cannot reduce the mandatory minimums, they cannot experiment with diversion programs. It ought to be rejected.

Mr. BARR of Georgia. Mr. Chairman, I yield myself such time as I may consume.

I would remind my learned colleagues on the other side that the role of the U.S. attorney is governed very distinctly from the D.C. Appropriations Act. I would also remind my colleagues that the Department of Justice is funded in an entirely different appropriations bill. This amendment here has nothing whatsoever to do with the power of U.S. attorneys to continue to prosecute cases. The judges do continue to sentence under federal laws and the ability of Federal prosecutors in the District of Columbia to plea bargain.

Mr. Chairman, I yield 1 minute to the gentleman from California (Mr. CUNNINGHAM).

Mr. CUNNINGHAM. Mr. Chairman, I probably, in committee, surprised some of my liberal friends by supporting the counting of the ballots. To me, it violated the First Amendment rights of individuals who at least expressed their opinion. I also stated that I would do everything in my power to fight against legalization of marijuana.

In California they had an initiative, and they have found such extreme abuse of using marijuana for medicinal purposes and medical because they could always find some doctor from the hippy generation of the 1960s or 1970s that would prescribe just to basically get around the law. They had tremendous problems in California already with it, and I think it is wrong.

I think the liberalization of family values, the liberalization of our traditions and our laws are part of the problems why we end up with Columbine and those kinds of things. I think to back off on marijuana and other drugs would do the same kind of thing, and I will fight tooth, hook, and nail against the legalization of marijuana, but not the right to express one's opinion on it. I think that part is right.

Mr. MORAN of Virginia. Mr. Chairman, I yield 2 minutes to the gentlewoman from the District of Columbia (Ms. Norton).

Ms. NORTON. Mr. Chairman, I thank the gentleman for yielding this time to me.

Let us face it. What is this amendment doing here?

This amendment is inspired by a medical marijuana initiative many residents may have opposed, but the outcome is unknown because of the amendment offered by the gentleman from Georgia (Mr. BARR) last year. It is outrageous enough to overturn local legislation without the consent of the governed. Mr. BARR just cannot wait. He wants to strike down a local initiative before it is enacted and even without knowing that it will be enacted. Even if a medical marijuana initiative passes, it could not move forward without legislation by the city council.

The poor wording of this amendment will lead to consequences that even the gentleman from Georgia (Mr. BARR) did not intend. The three reduce penalties associated with drug use is so overbroad it will produce challenges against what courts and prosecutors do every day. If we cannot otherwise reduce penalties, we may not be able to reduce drug sentences for routine matters like a defendant's cooperation with the prosecution or successful completion of drug rehabilitation.
I would never ask my colleagues to support permissive drug use, and our own constituents know us better than that.

The full Committee on Appropriations eliminated this amendment because it recognized that democracy, not drugs, was the issue. Mr. Chairman, I ask my colleagues to respect that judgment. The gentleman from Georgia and any Member of this body can repair to their remedies after the legislation is enacted. We ask, for goodness sake, that you spare us something unprecedented, even for the District of Columbia, prior restraint on democracy.

The CHAIRMAN pro tempore (Mr. HASTINGS of Washington). The Chair would remind the Members that the gentleman from Virginia (Mr. MORAN) has 2½ minutes remaining and the gentleman from Georgia (Mr. BARR) has 1 minute remaining.

Mr. MORAN of Virginia. Mr. Chairman, I yield 2 minutes to the gentlewoman from California (Ms. PELOSI).

Ms. PELOSI. Mr. Chairman, I commend the gentleman for his leadership on this bill, and the gentleman from Oklahoma (Mr. ISTOOK) as well for his leadership in bringing the bill to the floor.

I rise in strong opposition to the Barr amendment for the following reasons. The findings of scientific research, the will of the voters of the District of Columbia, and compassion for people with serious illnesses all argue against this amendment.

In the spring of this year, the Institute of Medicine issued a report that had been commissioned by the Office of National Drug Control Policy. The study found that marijuana is “Potentially effective in treating pain, nausea and anorexia of AIDS-wasting and other symptoms,” and it called for more research on the use of marijuana in medical treatment. That is the latest science.

Finally, we must consider the need for people with cancer, AIDS, and other serious illnesses who want access to a drug which can help them deal with the symptoms of their illnesses. Of course, all of us in this body are opposed to illegal drug use, and those of us who are voting “no” on this amendment are strongly opposed to illegal drugs. I hope there is no question about that. We are also against the use of Federal law to make criminals of terminally ill people who are trying to use a proven remedy to seek relief.

The American Academy of Family Physicians, the American Preventative Medical Association, and the American Public Health Association all support access to marijuana for medicinal purposes.

Voters in my home State passed an initiative in November 1996 authorizing seriously ill patients to take marijuana on the recommendation of a licensed physician. Proposition 215 has authorized as many as 100,000 Californians who suffer from AIDS and many other debilitating diseases with safe and legal access to a remedy that makes life a little more bearable.

Thousands of constituents in my district struggling with AIDS and cancer will tell us that choosing the appropriate medical treatment should be a decision for public health officials, physicians and patients, not for the House of Representatives.

Mr. Chairman, I urge my colleagues to oppose the Barr amendment.

Mr. BARR of Georgia. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, if anybody ever wondered what one big loophole looks like, this be it. This is a copy of the Legalization of Marijuana for Medical Treatment Initiative that is the subject matter of this debate. If one reads, and I do not know whether folks on the other side have read the D.C. Initiative, but if they do, they will find it is one massive loophole. It is not limited only to certain types of diseases, it applies to virtually anything. It is not limited simply to patients who say that marijuana or doctors who say that marijuana has a proven medical use. It is simply, does marijuana have a demonstrated utility, whatever in the heck that means.

It also allows not only for the patient to have this marijuana, but for any friend of theirs who might have it to give to them.

So it is just replete with loopholes. It does not even require a written prescription. It can simply be an oral recommendation of the doctor.

This is bad legislation. If we do not stop it today, it will go into effect, and we would be telling the people of this country that drug usage is okay in our Nation’s Capital. We should not do that. Support the Barr amendment.

Mr. MORAN of Virginia. Mr. Chairman, I yield myself the remainder of the time.

Mr. Chairman, it is difficult to argue to make any drugs legally available. But under some circumstances, we do make drugs legally available. Certainly, morphine is customarily used when people are suffering. I know I, myself, when my mother was dying and experiencing a great deal of pain, I had to inject morphine, simply to reduce the suffering. I never would have done that, but the doctors prescribed it.

Basically, that is what we are suggesting here, that we defer to the judgment of medical professionals. If there is a way to relieve people’s suffering, and the gentlewoman from California is experiencing terminal illness, we should allow this. This is a tough vote, but I do think the right vote is to vote “no.” Leave this to the medical community.
about. In addition, because the amendment would bar the District from using local funds to "enact or carry out any law, rule or regulation" that requires anyone to possess marijuana, it would deny an effective medication to those in need.

Mr. Chairman, medical studies demonstrate that in some cases marijuana has proven effective in treating pain and discomfort for patients, especially those that are undergoing chemotherapy. The medical use of marijuana is a public health issue. It is not a war on drugs. Once again, marijuana has been proven to relieve the pain and suffering of seriously ill patients. It is unconscionable to deny an effective medication to those in need.

Mr. Chairman, I would like to point out for the record that former Speaker Gingrich and the distinguished chairman of our own Crime Subcommittee once agreed with medicinal use of marijuana. In 1981, Representative Newt Gingrich and Representative Bill McCollum, cosponsored H.R. 4498, a bill introduced by the late Congressman Stuart McKinney, that would have allowed the medicinal use of marijuana. In 1985, Chairman McCollum again cosponsored H.R. 2282, a bill reintroduced by Congresswoman McKinney, which would have allowed the medicinal use of marijuana. I, along with many others, would be very interested to learn why our colleagues changed their minds.

Mr. Chairman, many states have held state referenda on the use of medical marijuana. Two states, California and Arizona, have successfully passed legislation to allow the prescribed use of marijuana for medicinal purposes. The voters of these states have spoken and in our democratic system they must be respected.

Mr. Chairman, although the Congress exercises oversight over the District, we should not micromanage it. We should trust the citizens of the District and their elected officials to manage and implement policies that benefit the District and its residents.

Finally, Mr. Chairman, permitting the medical use of marijuana to alleviate the pain and suffering of people with serious medical conditions does not send the wrong message to children or anyone else. It simply states that we are compassionate and intelligent enough to respect the rights of patients and the medical community to administer what is medically appropriate. It is time for this Congress to acknowledge that a ban on the medicinal use of marijuana is scientifically, legally, and morally wrong.

Mr. DELAHUNT. Mr. Chairman, I rise in opposition to the amendment by the gentleman from Georgia.

The amendment seeks to nullify the results of a popular local initiative by congressional fiat. So much for "federalism" and "states' rights." So much for "local self-determination." And so much for common sense. But then, whenever marijuana is involved, some of our colleagues seem to take leave of their senses altogether.

When the citizens of California and Arizona voted in 1996 to allow doctors to prescribe marijuana for medical purposes, this House responded with a resolution declaring that "marijuana is dangerous and addictive drug and should not be legalized for medicinal use."

Yet we all know that many narcotics—such as morphine and even cocaine—which are highly dangerous when used without proper medical supervision, are nonetheless approved for a range of medical uses.

We do not deny narcotics to cancer patients because it could "send a signal" to others who might wish to use these drugs recreationally. Yet that is what this amendment would say, with regard to marijuana. With all due respect, I do not believe that anyone who had watched an AIDS or cancer patient suffer uncontrollable nausea for hours at a time could make such an argument.

Proponents of the amendment are quick to point out that the scientific community is divided over the medical benefits of marijuana. They are less quick to acknowledge that both the benefits and the dangers of a large number of medical substances are subject to scientific dispute.

I submit that it is not the job of the Congress to resolve such disputes. We could argue all day about the science. But that is not our role.

It is not our role to prohibit scientists from continuing to develop sound data regarding the safety and efficacy of marijuana—as they do with any other experimental treatment.

And it is both foolish and inhumane for us to prevent licensed physicians and their patients from studying the growing literature, weighing the benefits and the risks, and deciding whether the use of such drugs is medically appropriate—especially when more conventional therapies have been found ineffective.

If marijuana is shown through the local decisions, and to replace sound medical judgment with our own, let's at least not be hypocritical. Let's take morphine and cocaine off the market as well. Let's explain to the patients who depend on these drugs to control their pain that they will simply have to suffer so that we can send the "right signal" about drug abuse. I'm sure they'll understand.

The CHAIRMAN pro tempore. All time has expired.

The amendment was agreed to.

AMENDMENT OFFERED BY MR. STEARNS

Mr. STEARNS. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore as follows:

Amendment offered by Mr. Stearns;
Page 66, insert after line 24 the following new section:

SEC. 167. Nothing in this Act prohibits the Department of Fire and Emergency Services of the District of Columbia from using funds for automated external defibrillators.

ANNOUNCEMENT BY THE CHAIRMAN PRO TEMPORE

The CHAIRMAN pro tempore. The Chair will remind all persons in the gallery that they are here as guests of the House and that any manifestation of approval or disapproval of proceedings or other audible conversation is in violation of the Rules of the House.

Mr. ISTOOK. Mr. Chairman, I reserve a point of order.

The CHAIRMAN pro tempore. The gentleman from Oklahoma reserves a point of order.

Mr. STEARNS. Mr. Chairman, my amendment is very straightforward. It states that nothing in this act prohibits the Department of Fire and Emergency Medical Services of the District of Columbia from using funds for automatic external defibrillators.

This amendment, Mr. Chairman, seeks to highlight how invaluable AEDs are to use to save personal lives. This is endorsed by the American Heart Association, the American Red Cross, the American Association of Respiratory Care, the American College of Cardiology, the Citizen CPR Foundation, and the International Association of Firefighters. These are just a few people that support the idea of making AEDs available in Federal buildings.

I want to make it clear to my colleagues that this amendment in no way seeks to dictate to the District of Columbia how they should spend their money.

An AED of course is a device that is a little larger than a laptop computer. It automatically analyzes heart rhythms and delivers an electric current to the heart of a cardiac arrest victim. AED can restart a heart that has stopped beating.

Passage of this amendment simply reaffirms that the District of Columbia should have access to the most up-to-date, state-of-the-art equipment. Like AEDs, they can restore a normal heart rhythm in persons suffering from sudden cardiac arrest.

Mr. Chairman, frankly, it does not require a lot of training. Just turn it on and it tells someone what to do. It allows a great number of people to be able to respond to medical emergencies that require defibrillation. They are essential to strengthening this chain of survival for anybody that has a cardiac arrest.

The four links to this process, of course, are dialing 911 as a first step, early resuscitation, and then defibrillation, and then, of course, early and advanced life support.

While defibrillation is the most effective mechanism to revive a heart that has stopped, it is the least accessible tool we have available. So I think putting AEDs in Federal buildings is much like the argument for putting firefighting equipment in the buildings.

Studies show that 200 lives can be saved each and every day from cardiac arrest by using the AED device. Those are the kinds of statistics that no one can argue with.
No one knows when a sudden cardiac arrest might occur. According to a recent study, the top five sites where cardiac arrests do occur of course are at airports, county jails, shopping malls, sports stadiums, and of course golf courses. I believe we would all do ourselves a favor and great comfort in knowing that in any one of these Federal buildings, so far as I know, if a resolution for that matter, any Federal building, so far as I know, we have in Washington, DC, that the most up-to-date equipment is available and that folks are now trained to use it to help all Americans.

They are being produced today very inexpensively. They are easy to maintain, and so I think between those two things, the state of the art is bringing costs down for the AEDs and they afford a wider range of emergency capability for trained and equipped personnel.

So I think with all of the tourists we have here in the District of Columbia each day, it is important that all of these buildings, as well as the District of Columbia, have these available.

Mr. Chairman, I have talked to the gentlewoman who represents D.C. on the District of Columbia, have these things, the state of the art is bringing costs down for the AEDs and they afford a wider range of emergency capability for trained and equipped personnel.

Mr. STEARNS. That is correct, Mr. Chairman. I have worked with me collegially to get a satisfactory solution.

Mr. STEARNS. Mr. Chairman, I appreciate the compliment and I am always glad to work with the gentlewoman.

The report language in a sense is that we should conduct a study about the need for placement of the automatic external defibrillators in the Federal buildings and District buildings. I think this a first step for the whole country to recognize that AEDs are an important survival technique, and we are taking that step this afternoon here on the House floor.

I thank the chairman of the D.C. Committee.

The CHAIRMAN. Without objection, the amendment is withdrawn.

There was no objection.

Mr. BENTSEN. Mr. Chairman, I move to strike the last word.

Mr. Chairman, today as we consider the appropriations bill for the District of Columbia, I want to highlight a high-profile case of police incompetence that has grievously affected some of my constituents. Last year, a resident of Baytown, Texas, Mr. Chanda Smith was only 2 months away from graduating from the University of Maryland when the car she was traveling in was broadsided by another vehicle on a District street, ending her life. Despite the fact that the Smith case should not have been on the road that day due to poor brakes and substandard steering, Chanda was looking forward to her graduation which would have occurred in December.

The suspect, who tried to flee the scene, was quickly apprehended by District police. However, in the first of many police department missteps, none of the attending officers called the police department’s mobile crime personnel unit that routinely examines skid marks and patterns of debris and take photographs and measurements of fatal accident scenes. These mistakes, while serious, were a harbinger for an even more appalling series of events.

The Smith case was assigned to Detective Milton James, whose handling of several other fatal crash scenes had been criticized by the D.C. Police Department. When Detective James began his investigation into the Smith case, he failed to order a blood sample from the suspect and did not get a warrant to search the suspect’s vehicle. After he allowed the car to be towed, the police property division inadvertently junked the vehicle which contained direct evidence that the car should not have been on the road that day.

But the incompetence in handling this case has now been closed. The Smith family, who have suffered through a terrible, wrenching tragedy, have been denied justice for their daughter’s life. Due to the original handling of this case, these parents are left searching for answers that may never be restored.

Mr. Chairman, I appreciate the tough job that the men and women of the D.C. Police Department have to do, and I believe that the vast majority do it well. But the incompetence in handling this case should not have been on the road that day due to poor brakes and substandard steering. Police investigators are being watched by the D.C. Department of Motor Vehicles inspectors who have long known this detective was not carrying out the basic functions of an accident investigator, such as identifying witnesses, taking blood samples, photographing crime scenes, and preserving evidence.

After learning of the Department’s lapses in January 1999, Chanda’s parents were contacted by an investigator with the U.S. Attorney’s Office, who tried to salvage the case and bring some justice to the Smith family. The Smiths worked with an Assistant U.S. Attorney to reconstruct some of the evidence, including turning over detailed pictures of the car that the insurance company had taken following the accident.

While a grand jury was convened, there have been no indictments and the case has now been closed. The Smith family, who have suffered through a terrible, wrenching tragedy, have been denied justice for their daughter’s life. Due to the original handling of this case, these parents are left searching for answers that may never be restored.

Mr. Chairman, I appreciate the tough job that the men and women of the D.C. Police Department have to do, and I believe that the vast majority do it well. But the incompetence in handling this case should not have been on the road that day due to poor brakes and substandard steering. Police investigators are being watched by the D.C. Department of Motor Vehicles inspectors who have long known this detective was not carrying out the basic functions of an accident investigator, such as identifying witnesses, taking blood samples, photographing crime scenes, and preserving evidence.

As we consider the funding levels for the District of Columbia for fiscal year 2000, I want to urge all of my colleagues and particularly the members of the committee to consider this case and the implications for our constituents who may be affected by the inaction and incompetence in this instance by the District Police Department.

I also urge Police Chief Charles Ramsey, who had a promising in his response to this matter, to take every action necessary to resolve this case. The job performance of the lead detective and the supervisors in
this case were completely unacceptable. Their lack of action has caused enormous grief for a family who may never achieve even a small measure of justice for the loss of their daughter. They clearly deserve better, and so do the residents of the District of Columbia and the citizens of the United States.

ANNOUNCEMENT BY THE CHAIRMAN PRO TEMPORE

The CHAIRMAN pro tempore (Mr. HASTINGS of Washington). A few minutes ago the Chair noted a disturbance in the gallery, in contravention of the law and rules of the House.

The Sergeant at Arms removed those persons responsible for the disturbance and restored order to the gallery.

Mr. ISTOOK. Mr. Chairman, I move to strike the last word.

Mr. CHAIRMAN pro tempore (Mr. BENTSEN). I interpret the remarks of the gentleman from Texas (Mr. BENTSEN), and although I have no personal familiarity with the circumstances he relates, I certainly share his concern about the proper enforcement of laws and the proper procedures being followed by the police within the District for the protection of the citizens, whether they reside here, visit here, or work here.

I do want to point out to the gentleman that in the bill we have provided $1.2 million for the expenses of the Citizen Complaint Review Board, which is intended to deal with concerns about police procedure, whether they be activity or inactivity, actions or oversights.

I would certainly encourage the persons involved in the incident that he mentioned to utilize the services of that board, which we have sought to fund, to assist the District in resolving what we know are some long-term accumulative problems regarding the police department that I know Chief Ramsey wants to aggressively correct.

Mr. CHAIRMAN pro tempore (Mr. BENTSEN). And although I have no personal familiarity with the circumstances he relates, I certainly share his concern about the proper enforcement of laws and the proper procedures being followed by the police within the District for the protection of the citizens, whether they reside here, visit here, or work here.

I do want to point out to the gentleman that in the bill we have provided $1.2 million for the expenses of the Citizen Complaint Review Board, which is intended to deal with concerns about police procedure, whether they be activity or inactivity, actions or oversights.

If this body agrees that there is no need for the language put in by the gentleman from Oklahoma (Mr. LARGENT) that would supersede the judgment of the domestic courts in this city with regard to who is eligible to adopt children, then we have a bill that is going to pass virtually unanimously.

But the problem, Mr. Chairman, is that there are two, and if we have a bill that, if they are approved by this House, are so egregious in terms of trampling the rights of the District of Columbia citizens, its elected representatives, and its court system that the White House has to veto this bill, then we are right back at the starting point. All this excellent effort by the gentleman from Oklahoma (Mr. ISTOOK) and his colleagues on the Republican side and all the bipartisan support on the Democratic side will have been for naught.

That reason alone should be sufficient to vote down these amendments and vote up the appropriations bill before us, because these amendments do not belong in an appropriations bill. That is why we had the argument on the rule. We had to have a rule that waived the rules of this House, saying that despite the fact that they would be ruled out of order, we are going to rule them in order, allowing them to be added to the bill.

Would we stuck with an open rule, we would not have had to deal with this. We would have had a pure bill, a pure appropriations bill. We would have bipartisan support for it and it would pass overwhelmingly in this House.

That is why, Mr. Chairman, I would urge my colleagues to reject these two amendments; to support the bill, if they are rejected, and to give the White House a bill that it can sign right away and at least take this issue off the table.

Mr. CHAIRMAN. Mr. Chairman, I want to thank the members of the Committee on Appropriations staff, I want to thank my assistant on the D.C. appropriations bill, Mr. Harkin, who was accompanied by Anstice Brand. I want to thank Tom Forhan particularly as the lead minority staff person for D.C. appropriations.

I want to thank the gentleman from the District of Columbia (Ms.
There was no objection.

Mr. MORAN of Virginia. Mr. Chairman, will the gentleman yield?

Mr. MORAN of Virginia. I yield to the gentleman from Oklahoma.

Mr. ISTOOK. Mr. Chairman, I think I had understood it was protocol for the chairman to have the last word. Now, if the gentleman from Virginia insists upon having the last word, certainly I will not interfere with his desire to do so.

Mr. MORAN of Virginia. Mr. Chairman, I suggest to the gentleman from Oklahoma I will speak and then yield to him to have the last word.

Mr. ISTOOK. That is fine.

Mr. MORAN of Virginia. Mr. Chairman, let me just say that, first of all, I neglected particularly to thank Mr. American — I mean Miconi who was just superb on this bill. When I was thanking everybody, it was not sufficient to thank the members of the Appropriations staff without mentioning him particularly, specifically. He has some excellent people working with him, and we appreciate their fine work.

Again, not only did we not mention the $17 million for the in-State tuition program, terrific idea, the $3.5 million for adoption, the money for charter school, the money for offender supervision, I could go on and on and on, great things, plus supporting the consensus budget.

That is why we particularly hope that these two amendments can be defeated and we can support the underlying bill.

Mr. Chairman, I yield to the gentleman from Oklahoma (Chairman ISTOOK) to conclude.

Mr. ISTOOK. Mr. Chairman, I have no further comments except my word of appreciation for the ranking member, the great people, Mr. Miconi, Mr. Albaugh, Mr. Monteiro, all the people who have worked on this bill.

The CHAIRMAN. Are there further amendments to the bill?

Mr. ISTOOK. Are there further amendments to the bill?

The CHAIRMAN. Pursuant to House Resolution 260, proceedings will now resume on those amendments on which further proceedings were postponed in the following order: Amendment No. 1 printed in House Report 106–263 offered by the gentleman from Kansas (Mr. TIAHRT) on which further proceedings were postponed and on which the ayes prevailed by voice vote. The Clerk will redesignate the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment.

Mr. ISTOOK. Mr. Chairman, will the gentleman yield?

Mr. MORAN of Virginia. I ask unanimous consent to strike the requisite number of words.

The CHAIRMAN. Without objection, the gentleman from Virginia is recognized.

Mr. ISTOOK. Mr. Chairman, I ask unanimous consent to strike the requisite number of words.

Mr. MORAN of Virginia. I yield to the gentleman from Oklahoma.

Mr. ISTOOK. Mr. Chairman, I suggest to the gentleman from Oklahoma I will speak and then yield to him to have the last word.

Mr. MORAN of Virginia. Mr. Chairman, I suggest to the gentleman from Oklahoma I will speak and then yield to him to have the last word.

Mr. ISTOOK. That is fine.

Mr. MORAN of Virginia. Mr. Chairman, let me just say that, first of all, I neglected particularly to thank Mr. American — I mean Miconi who was just superb on this bill. When I was thanking everybody, it was not sufficient to thank the members of the Appropriations staff without mentioning him particularly, specifically. He has some excellent people working with him, and we appreciate their fine work.

Again, not only did we not mention the $17 million for the in-State tuition program, terrific idea, the $3.5 million for adoption, the money for charter school, the money for offender supervision, I could go on and on and on, great things, plus supporting the consensus budget.

That is why we particularly hope that these two amendments can be defeated and we can support the underlying bill.

Mr. Chairman, I yield to the gentleman from Oklahoma (Chairman ISTOOK) to conclude.

Mr. ISTOOK. Mr. Chairman, I have no further comments except my word of appreciation for the ranking member, the great people, Mr. Miconi, Mr. Albaugh, Mr. Monteiro, all the people who have worked on this bill.

The CHAIRMAN. Are there further amendments to the bill?

Mr. ISTOOK. Are there further amendments to the bill?

The CHAIRMAN. Pursuant to House Resolution 260, proceedings will now resume on those amendments on which further proceedings were postponed in the following order: Amendment No. 1 printed in House Report 106–263 offered by the gentleman from Kansas (Mr. TIAHRT) on which further proceedings were postponed and on which the ayes prevailed by voice vote. The Clerk will redesignate the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment.

Mr. ISTOOK. Mr. Chairman, I ask unanimous consent to strike the requisite number of words.

Mr. MORAN of Virginia. I yield to the gentleman from Oklahoma.

Mr. ISTOOK. Mr. Chairman, I suggest to the gentleman from Oklahoma I will speak and then yield to him to have the last word.

Mr. MORAN of Virginia. Mr. Chairman, I suggest to the gentleman from Oklahoma I will speak and then yield to him to have the last word.

Mr. ISTOOK. That is fine.

Mr. MORAN of Virginia. Mr. Chairman, let me just say that, first of all, I neglected particularly to thank Mr. American — I mean Miconi who was just superb on this bill. When I was thanking everybody, it was not sufficient to thank the members of the Appropriations staff without mentioning him particularly, specifically. He has some excellent people working with him, and we appreciate their fine work.

Again, not only did we not mention the $17 million for the in-State tuition program, terrific idea, the $3.5 million for adoption, the money for charter school, the money for offender supervision, I could go on and on and on, great things, plus supporting the consensus budget.

That is why we particularly hope that these two amendments can be defeated and we can support the underlying bill.

Mr. Chairman, I yield to the gentleman from Oklahoma (Chairman ISTOOK) to conclude.

Mr. ISTOOK. Mr. Chairman, I have no further comments except my word of appreciation for the ranking member, the great people, Mr. Miconi, Mr. Albaugh, Mr. Monteiro, all the people who have worked on this bill.

The CHAIRMAN. Are there further amendments to the bill?

Mr. ISTOOK. Are there further amendments to the bill?

The CHAIRMAN. Pursuant to House Resolution 260, proceedings will now resume on those amendments on which further proceedings were postponed in the following order: Amendment No. 1 printed in House Report 106–263 offered by the gentleman from Kansas (Mr. TIAHRT) on which further proceedings were postponed and on which the ayes prevailed by voice vote. The Clerk will redesignate the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment. The Clerk redesignated the amendment.
Mr. TIERNEY and Mr. STUPAK changed their vote from “aye” to “no.” Messrs. DOOLITTLE, DICKEY, VISCLOSKY, GEORGE MILLER of California, BARTLETT of Maryland, and WISE changed their vote from “no” to “aye.” So the amendment was agreed to.

The result of the vote was announced as above recorded.
Messrs. PACKARD, SOUDER, and COBURN changed their vote from "aye" to "no."

Messrs. SWEENEY, GORDON, JOHN, and MCINTYRE changed their vote from "aye" to "no."

So the amendment was rejected.

The result of the vote was announced as above recorded.

AMENDMENT NO. 2 OFFERED BY MR. LARGENT

The CHAIRMAN. The pending business is the demand for a recorded vote on Amendment No. 2 printed in House Report 106-209, offered by the gentleman from Oklahoma (Mr. LARGENT) on which further proceedings were postponed and on which the ayes prevailed by voice vote.

The Clerk will redesignate the amendment.

The Clerk redesignated the amendment.

The vote was taken by electronic device, and there were—aye 213, not voting 5, as follows:

AYES—213

[Roll No. 346]

AYES—213

[Roll No. 346]

[Roll No. 346]
H. RES. 263

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule X VIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H. R. 2606) making appropriations for foreign operations, export financing, and related programs for foreign assistance, economic development, and related programs for the fiscal year ending September 30, 2000, and for other purposes. The first reading of the bill shall be dispensed with. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chairman and ranking minority member of the Committee on Appropriations. After general debate the bill shall be considered for amendment under the five-minute rule. Points of order against provisions in the bill for failure to comply with clause 2 of rule XXI are waived. After consideration of any other amendment it shall be in order to consider the amendments printed in part A of the Committee on Rules report only in the order printed in the report.

These amendments relate to title I of the bill and related programs. In addition, the rule provides for consideration of amendments printed in part B of the Committee on Rules report only in the order printed in the report.