The SPEAKER pro tempore. Under the Speaker's announced policy of January 2, 1999, the gentleman from Guam (Mr. UNDERWOOD) is recognized during morning hour debates for 5 minutes.

Mr. UNDERWOOD. Mr. Speaker, I rise today to discuss an issue of vital concern to the people of Guam and this concerns Compact-Impact Aid, which is part of the Interior Appropriations bill which will be brought to the floor today.

Compact-Impact Aid is the assistance that is annually given to the people of Guam as compensation for social and educational costs for the unrestricted migration of 3 newly-created independent States in the Central Pacific, the Compact States of the Republic of the Marshall Islands, the Federated States of Micronesia and the Federated States of Palau.

The President’s budget for fiscal year 2000 proposes that Guam receive an increase of $5.52 million for Compact-Impact Aid funding in the Department of Interior’s Office of Insular Affairs’ budget, which would bring Guam’s total to $10 billion annually. Last year, Guam received a total of $7.58 million, a 3.5 percent increase from previous years. From fiscal year 1996 to 1999, Guam received $4.58 million annually. Annual actual Compact-Impact costs for all of the social and educational costs to the government of Guam as a result of this free and unrestricted migration are actually estimated to be between $15 million to $20 million annually.

Unfortunately, this year’s Interior Appropriations provides only $4.58 million to Guam because of budgetary scoring problems that the House Committee on Appropriations had with the way in which the administration had identified the source of funding within the Office of Insular Affairs. This is a very serious issue which hopefully will be resolved in the context also of current renegotiations of these Compacts between the United States and the Federated States of Micronesia and the Republic of the Marshall Islands.

I simply want to emphasize that Compact-Impact Aid has been a Federal responsibility since 1986 which has only recently been addressed for Guam, and 1986 was the year that these Compacts went into effect. I understand that the House Committee on International Relations Subcommittee on Asia and the Pacific will be holding an oversight hearing later on this month, and I certainly hope, and I plan to raise the issues of migration of FAS citizens at this important hearing.

The issue of Compact-Impact Aid is not new, in 1986, the first year of Compact-Impact Aid, the law which governs the relationship between the United States and these newly-created nations, Section 104(3)(e) pertains to impact costs and states: "There are hereby authorized to be appropriated for fiscal years beginning after September 30, 1985 such sums as may be necessary to cover the costs, if any incurred, by the State of Hawaii, the territories of Guam and American Samoa, and the Commonwealth of the Northern Mariana Islands resulting from increased demands placed on educational and social services by immigrants from the Marshall Islands and the Federated States of Micronesia."

Since Guam is clearly the most economically developed island in the Central Pacific and because of its geographical proximity, the vast majority of these immigrants come to Guam. Under the Compact Agreement, it also states that "It was not the intent of the Congress to cause any adverse consequences for the U.S. territories and commonwealths or the State of Hawaii."

It also states that if any adverse consequences occur, Congress will act sympathetically and expeditiously to resolve these adverse consequences.

We are now in the 15th year of the implementation of these contracts, and while I appreciate all of the sympathy that Congress could perhaps give on this issue, I certainly expect more expedited action, particularly in the reimbursement of costs that are incurred directly by the taxpayers of Guam.

Guam’s unemployment rate is currently over 15 percent, and from mid 1997 to mid 1998, the total of Compact migrants to Guam was over 7,000. This is a population of 140,000, and this exceeds the numbers that are going to Hawaii and other areas.

This is not the same as problems normally referred to in addressing the impact of immigrant issues in the 50 States. The obligation to Guam is clear in the law; the obligation is written into the treaties of free association between these new countries and the United States, and the obligation to the people of Guam is clear. I am hopeful that we will be able to work on this through the process of conferencing, and we are grateful for the fact that this still remains a high priority for the Clinton administration.

STOP TB NOW ACT FOR EFFECTIVE TUBERCULOSIS TREATMENT

The SPEAKER pro tempore. Under the Speaker’s announced policy of January 19, 1999, the gentleman from Ohio (Mr. BROWN) is recognized during morning hour debates for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, tuberculosis is the greatest killer of young women. Tuberculosis kills 2 million people each year, 1 percent around the world every 15 seconds. Tuberculosis hit an all-time high in 1999 with 8 million new cases, 95 percent of them in the developing world.

We have a small window of opportunity during which stopping tuberculosis is very cost-effective. The costs of Directly Observed Treatment, Short Course, so-called DOTS, can be as little as $20 to save a life. If we wait, if we go too slowly, so much drug-resistant TB will emerge that it will cost billions of dollars to control with little guarantee of success. Multidrug resistant TB is more than 100 times more expensive to cure than nondrug resistant TB.

I have introduced the Stop TB Now Act with the gentlewoman from Maryland (Mrs. MORELLA) in an effort to control tuberculosis. The bill authorizes $100 million to USAID for tuberculosis control in high incidence countries, mostly using the Directly Observed Treatment, Short Course, so-called DOTS. It calls on USAID to collaborate with CDC, the World Health Organization, National Institutes of Health and other organizations with tuberculosis expertise. The measure provides funding for combating Multi-Drug Resistant TB, which is spreading at an alarming rate. Multi-drug resistant TB has been identified on every continent. According to the World Health Organization, multi-drug resistant tuberculosis ultimately threatens to return TB control to the preantibiotic era where no cure for TB was available. An effective DOTS cure program can prevent the development of multi-drug resistant tuberculosis.

A recent World Health Organization study in India found in areas where effective TB treatment was implemented, the death rate from tuberculosis fell by more than 85 percent. TB accounts for one-third of AIDS deaths worldwide and up to 40 percent of AIDS deaths in Asia and in Africa. Eleven million people are currently affected with TB around the world and with HIV. The good news is that TB treatment is equally effective in HIV positive and HIV negative people. So if we want to improve the health of people with HIV, we must address the issue of tuberculosis.

WHO estimates that one-third of the world’s population is infected with the bacteria that causes tuberculosis; two billion, two billion people. An estimated 8 million people develop active tuberculosis each year, and roughly 15 million people in the United States are infected with tuberculosis. The threat to TB patients for Americans derives from the global spread of tuberculosis and the emergence and spread of strains of tuberculosis that are multi-drug resistant.

Up to 50 million people worldwide may be infected with drug-resistant tuberculosis. Incidence is particularly high in selected regions and populations such as Russian prisons where
an estimated 5 percent of prisoners have active multi-drug resistant TB. In the U.S., TB treatment, normally about $2,000 per patient, skyrockets to as much as $250,000 per patient, as it did in New York City in the early 1990s when we had to treat multi-drug resistant tuberculosis. Treatment may not even be successful. MDR drug-resistant TB kills more than half those infected, even in the United States and in other industrialized nations, and it is a virtual death sentence in the developing world.

The President recently visited India. I contacted him before that trip to discuss our bill. India has more tuberculosis cases than anywhere else in the world. Their situation illustrates the urgency of this issue. Two million people in India develop TB every year, and nearly 500,000 die from it each year. More than 1,000 Indians a day die from this infectious disease. The disease has become a major barrier to social and economic development, costing the Indian economy $2 billion a year. Three hundred thousand children are forced to leave school in India each year because their parents have tuberculosis, and more than 100,000 women with TB are rejected by their families due to social stigma.

India has undertaken an aggressive campaign to control tuberculosis, but they also need western help. Not surprisingly, the statistics on access to TB treatment worldwide are pretty grim. Fewer than 1 in 5 of those with TB are receiving DOTS treatment. Based on World Bank estimates, DOTS treatment is one of the most cost-effective health interventions available, costing the developing world as little as $20 to save a life. DOTS can produce cure rates of 85, 90, even 95 percent, even in the poorest countries.

Mr. Speaker, Gro Bruntland, the Director of WHO, has said that TB is not an industrialized nation, and it is a virtual death sentence in the developing world. The disease has become a major barrier to social and economic development, costing the Indian economy $2 billion a year. Three hundred thousand children are forced to leave school in India each year because their parents have tuberculosis, and more than 100,000 women with TB are rejected by their families due to social stigma.

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Mr. Speaker, Gro Bruntland, the Director of WHO, has said that TB is not a medical issue, but a political issue. We have an opportunity to save millions of lives now and prevent millions of needless deaths in the future.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12 of rule I, the Chair declares the House in recess until 10 a.m. today. Accordingly (at 9 o’clock and 18 minutes a.m.), the House stood in recess until 10 a.m.

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. QUINN) at 10 a.m.

PRAYER

The Chaplain, the Reverend Daniel P. Coughlin, offered the following prayer:

Almighty God, ever present and Lord of history, throughout the ages You have drawn our attention and told us: “You are a chosen race, a royal priesthood, a holy nation, a people truly set apart as God’s own.”

Frankly, Lord, You overwhelm us. We wrestle with the times in which we live because they demand so much from us. We wrestle with Your own deep calling which dignifies us yet demands great responsibility.

Empower us to live up to Your expectations as uniquely chosen to guide the course of human events in this holy Nation.

We are dedicated to serve You by lifting up the sacrifice of work today. We embrace this work as dedicated service to You, Our God, and as service to the holy people we represent.

Since You have called us to this task, You will surely gift us with Your Spirit, transforming each aspect of our work into an act of worship; transcending all barriers and distinctions into realizing a deeper unity at work in us, Your Spirit, now and forever. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day’s proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

Mr. FOLEY. Mr. Speaker, pursuant to clause 1, rule I, I demand a vote on agreeing to the Chair’s approval of the Journal.

The SPEAKER pro tempore. The question is on the Chair’s approval of the Journal.

The question was taken; and the Speaker pro tempore announced that the ayes have it by the following vote.

Mr. FOLEY. Mr. Speaker, on that, I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8, rule XX, further proceedings on this question will be postponed.

The point of no quorum is considered withdrawn.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Maryland (Mr. BARTLETT) come forward and lead the House in the Pledge of Allegiance.

Mr. BARTLETT of Maryland led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair will entertain five 1-minutes on each side.

VOTE AGAINST THE LABOR-HHS-EDUCATION APPROPRIATIONS BILL

(Ms. BALDWIN asked and was given permission to address the House for 1 minute.)

Ms. BALDWIN. Mr. Speaker, I rise today in opposition to the fiscal year 2001 Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act.

Studies show that smaller class sizes help teachers provide more personal attention to students. Teachers are then able to spend less time on discipline, more on instruction for the students that they serve. This helps students receive a stronger foundation in basic skills, skills that will help them succeed in the 21st century economy. The economic function of education must not be overlooked if today’s students are to compete in our rapidly growing global economy. I believe that we must ensure that young children have the kind of one-on-one contact with teachers that smaller class sizes will permit.

This bill does not include funding to address these problems.

Mr. PITTS. Mr. Speaker, Caspar Weinberger, our former Secretary of Defense, wrote a short column for Forbes Magazine recently that should make every conservative and every journalist stop and think for a moment.

Let me quote: “Why is it,” the magazine asks, “that the press always calls the worst elements in Iran the ‘conservatives’ and refers to the group identified with President Khatami as the ‘reformers’ or even the ‘liberals’?

“The fanatical mullahs who rule Iran . . . oppose human rights, freedom of speech and religion, and all other manifestations of an individual’s right to achieve all he or she can.

“They believe in an all-powerful state, ruled by them, where the individual does not count.

“This is not conservatism.

While President Khatami is not pro-America, he and certainly some of his followers believe in human rights and far more personal freedom than do the clerics.

“That is conservatism.”

Mr. Speaker, we have to wonder what definition our friends in the Fourth Estate are using. Listen to their language. Is anyone they do not like a conservative?

PRESS USE OF TERM “CONSERVATIVE”

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