

On the HIV-AIDS situation, as we all know, we can look at the data and say it is looking great. We have made some inroads, but the bottom line is the numbers are increasing for the socioeconomic areas of our country. Those increases are going to be more harshly hit because these are the people who do not have access to good quality care. These are people who do not have access to the resources needed to respond to issues such as AIDS. If you are wealthy and have insurance, you can almost survive AIDS. But if you do not, you are going to find yourself not being able to sustain life and also not even knowing about it until it is almost too late.

As we look at the border, we look at our children's health and the importance of vaccinations in providing access to good quality health care, there have been some efforts with community mental health centers in assuring that we provide that care. I do want to take this opportunity to thank those centers for their efforts throughout the country, and especially on the border in providing access to health care. They have people working out there, people working in communities providing that access to that care, and making sure that those people have access. We still need a lot more resources.

In addition to that, we have talked about the environment. We talked about water pollution. Remember that on both sides we still need sewage plants, not only on the United States side but the Mexican side also. We drink water from the Rio Grande. We find ourselves in a real bind in terms of the quality of that water. So every effort needs to be made to make sure we have good quality drinking water.

When we look at air pollution, it is no coincidence that El Paso has not been able to meet EPA standards. No matter what El Paso does, they are going to have difficulty meeting those standards mainly because of colonias. So colonias needs to be considered when looking at the formulas. You cannot consider one side of the river without looking at the other side, and making sure that good quality care exists on both sides because we breathe the same air and drink the same water and we are affected as we communicate with each other.

Mr. Speaker, the border has a lot of positives. It has a lot of enthusiasm. It has a lot of people moving forward. There are a lot of things happening that are great, but part of that is making sure that we have good quality care. I want to take this opportunity and maybe I will do it at a later date, to talk about the information regarding some of the other States. I know in New Mexico there are 167 miles along the Mexican border area comprised of five counties in that region. You will find some disparities that exist in the

area of health care, and those disparities are evident not only in New Mexico but throughout. I want to mention a couple of other things.

I know one of the main disparities that exist in New Mexico when you look at tuberculosis cases, they find that you have a large number of tuberculosis cases also all along the border, and New Mexico is no exception. As well as Arizona. Arizona finds itself in the same situation, as well as California. So the whole border region is an area that we need to continue to focus on.

Mr. Speaker, I am very pleased if nothing else with the issue of NAFTA. For those who opposed NAFTA, you have to admit that at least NAFTA has allowed us an opportunity to focus. In Texas, very seldom did we talk about the border. The State of Texas never focused on it. It continued to neglect it, and because of the importance of trade, because they saw the value of our neighbor to the South, now there is a great deal of focus.

Along with that focus once again should come the real concern of meeting the needs of the community in that area, and those needs are translated in the form of resources for access to good quality care.

I am hoping as we move forward, we will continue to look at getting resources for access to health care; and I am hoping as that county judge from El Paso testified, that we can start looking at those disparities and making sure that those resources when they come to Texas, and those States on the border, that they come to those regions where they are needed the most and allow them to be able to leverage those resources in order for them to be able to fight the diseases I have mentioned.

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I want to thank everyone who has been here tonight. I know that we had some opportunities to be able to dialogue about the importance of these issues. I want to just indicate that there has been some discussion on the issue of medication. I just want to briefly indicate that along the border, there is a study that was done where nearly 40 percent of a survey reported that someone in the immediate household, 40 percent, received their medications on the border from Mexico. We find a population that is seeking out for access to health care, they are not finding it on this side, they are seeking it elsewhere in Mexico, and there are some pitfalls to that. There are some positives also, but there are some pitfalls. Some of the pitfalls that I have indicated are like the problems that we find with tuberculosis that in Mexico is not treated in the same way that we treat it. We provide it with a lot more medication than they do. That could create some serious problems for all of

us if it is not treated appropriately. Secondly, as they go across, one of the main prescriptions that they get deals with uses for colds and some uses, 30 percent, were for blood pressure, 50 percent were for heart disease, 20 percent for diabetes.

As we move forward, I am hoping that Congress at the national level, that there is a responsibility to meet and that when people live on the border and people come across the border that we as a Nation have a responsibility to also provide access to good quality care for not only all the people on the border but also those people that get impacted by people from the other side of the border.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. ABERCROMBIE (at the request of Mr. GEPHARDT) for today on account of official business.

Mr. BACA (at the request of Mr. GEPHARDT) for today on account of a death in the family.

Ms. CARSON of Indiana (at the request of Mr. GEPHARDT) for today on account of official business in the district.

Mr. CRANE of Illinois (at the request of Mr. ARMEY) for today on account of travel delays.

Ms. KILPATRICK (at the request of Mr. GEPHARDT) for today on account of official business in the district.

Ms. PELOSI (at the request of Mr. GEPHARDT) for today on account of a flight delay.

Mr. SCARBOROUGH (at the request of Mr. ARMEY) for today, July 24, and July 25 on account of attending a memorial services for a former staffer.

Mr. SHERMAN (at the request of Mr. GEPHARDT) for today on account of airline mechanical problems.

Mr. STARK (at the request of Mr. GEPHARDT) for today on account of medical reasons.

Ms. WATERS (at the request of Mr. GEPHARDT) for today on account of official business in the district.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. DEFazio) to revise and extend their remarks and include extraneous material:)

Mr. DEFazio, for 5 minutes, today.

Mr. DAVIS of Illinois, for 5 minutes, today.

(The following Members (at the request of Mr. TIAHRT) to revise and extend their remarks and include extraneous material:)

Mr. OSBORNE, for 5 minutes, today.

Mr. WICKER, for 5 minutes, today.

Mr. TIAHRT, for 5 minutes, today.