amount of time it will take the young
borrower to pay off this debt. A
credit card with an 18 per-
cent annual percentage rate who
makes a minimum monthly payment of
$75 will be paying off that credit card
balance of $2,700 over 15 years, paying
as much interest on the balance as he
or she originally borrowed.

The Daily Texan, a newspaper of
the University of Texas, recently reported
that the university’s legal services office
sees students who are struggling with
debt at the rate of one every 2
weeks.
The university counselor said “the
highest voluntary credit debt I have
seen was $45,000. Most students who
come in with major problems are the
ones whose debts range from $8,000 to
$15,000.” That is the common range of
debt for a college student in Texas.

In addition, the nonprofit Consumer
Education Center in Austin, Texas,
helps about a half dozen students every
week to try to deal with credit prob-
lems. But let me be clear, the problem
is certainly not specific to Texas. As I
pointed out, in Indiana, more students
leave college because of debt than
because of academics. This is the story
on every college campus.

Leslie Starkey, the niece of one of
my staffers, was a young successful
advertising executive in New York City,
but she had been burdened by thou-
sands of dollars of credit card debt
since college. It was not very long after
Leslie had pulled herself out of this
shocking debt with the help of a credit
card counselor that she was killed in a
tragic fall. She was 28 years old and
had lived only a short time with the
joy of her debt.

We owe it to Leslie and other young
people who have committed suicide be-
cause they could not meet their credit
card debt obligations to enact this leg-
islation so that they will not be spend-
ing what little time of their lives under
the burden of enormous credit card
debt.

Mr. Speaker, I regret to say that the
bankruptcy laws that recently passed
this House will do nothing to help
these young people.

REGARDING THE NEED FOR A
DEFENSE SUPPLEMENTAL

The SPEAKER pro tempore. Under a
previous order of the House, the gen-
tleman from Missouri (Mr. CLAY) is
recognized for 5 minutes.

Mr. SKELTON. Mr. Speaker, yester-
day I visited the West Coast where I visited several naval instal-
lations and talked with numerous Navy and Marine personnel. As a result, I am
all the more convinced of the need for a
supplemental appropriation now.
Family housing roofs are leaking, air-
craft are realigned, and training
is being curtailed or canceled.

I am dismayed that the White House
has apparently rejected the idea of a
supplemental appropriation for 2001. Such a supplemental would pay for
costs already incurred in operations
around the world, subject to a strategic review of our
future; it is paying for our past. Why it
should be off limits to pay what we owe
is a mystery to me.

Mr. Speaker, it is a disquieting truth
that our military services rely on sup-
plemental funding when making their
operations. They are allowed to budget for
procurement, research, pay and training.
All of these costs are largely pre-
dictable. But they are not allowed to
budget in advance for most operations
because the nature and tempo of the
operations can never be foreseen.

In a way, the Navy includes some op-
erations funding in its peacetime bud-
get. Overseas rotations is part of its nor-
mal operating procedure, so deploy-
ments require little additional funding
when they go into action. The Air
Force is getting toward that concept as
well, but even they need supplemental
to help to cover the cost of operations.

Even if a supplemental is proposed
later in the year, it is sort of like the
fire department showing up after one's
house has burned down.

One reason I enjoy serving on the
Committee on Armed Services, Mr.
Speaker, is that I get to speak regu-
larly with our troops and their com-
manders. One message that has been
coming through with exact clarity, from field commanders and service
chiefs alike, is the need for an imme-
diate supplemental. They have been
forced to borrow against training
money to keep operations going, and
that bill has come due. As a result,
training is slowing to a crawl or stop-
ning. Some ammunition supplies are
exhausted. Our military is not being
kept up to standard.

That is what I hear. It is not just one
service; it is all of them. That, Mr.
Speaker, is why we need an immediate
supplemental.

By immediate supplemental, I do not
mean the check in the hand by the
close of business Friday, although that
would not hurt. But I do mean an im-
mediate and public commitment that
there will be a supplemental, a com-
mitment that help is on the way. If the
chiefs know a supplemental is coming
even one late in the fiscal year, they
can resume full activity confident that
their coffers will be replenished. Ab-
sent that assurance, though, the only
prudent and, in many cases, the only
legal thing for them to do is to stop
training.

This is a test of the new administra-
tion, Mr. Speaker, a test of their word
and of their world view. If the military
is to be sacrificed on the altar of a tax
cut, if help is not the way, then skip the supplemental. But if the
Nation’s commitment to our men and
women in uniform is real, then they
should step up and pay what is owed.

CONSOLIDATED HEALTH CENTERS
BUDGET

The SPEAKER pro tempore. Under a
previous order of the House, the gen-
tleman from Missouri (Mr. CLAY) is
recognized for 5 minutes.

Mr. CLAY. Mr. Speaker, I rise to add
my voice to those calling for a substan-
tial increase in the fiscal year 2002
budget appropriation for the consoli-
dated health centers program.

Community health centers provide
critical primary and preventive health
care services to over 11 million low-in-
come and uninsured patients in more
than 3,000 rural and urban communities
throughout our country. In my own
district, thousands of citizens benefit
greatly from the quality health care
they receive at our local community
health care clinics.

The fact that this program has en-
joyed strong bipartisan support
throughout its 30 years’ existence is
itself a testament to the success they
have achieved in providing needed
health care services to our Nation’s
most vulnerable populations.

While I am encouraged by the Presi-
dent’s call to double the level of serv-
ices these health centers provide, I be-
lieve his proposed funding increase of
$124 million will not adequately cover
the critical demand for quality health
care by the uninsured.

There are over 45 million people in
our country without access to afford-
able health care insurance; and, sadly,
that number continues to rise.

Nowhere is the problem of access to
quality health care more critical than
within the African American commu-
nity where economic factors and lim-
ited health care options exacerbate an
already disproportionate health care
crisis.

Community health care centers are a
vital component in addressing the
health care gap that exists in minority
communities across this country. But
if they are to continue to meet the
growing health care needs of those
communities, it is imperative that we
increase the consolidated health cen-
ters program funding by $250 million in
fiscal year 2002.