

While justice remains elusive, not just in the Balkans but elsewhere, the Coalition has been an indispensable part of the progress achieved in the last decade to hold more people accountable for horrible crimes, in Europe, Africa and elsewhere around the globe. The Coalition, in fact, argues not only for responding to crimes already committed but taking necessary actions to stop ongoing atrocities and to prevent future war crimes. This presents a challenge to the international community and its natural tendency to avoid taking bold and decisive action, and reflects the lessons learned from Rwanda that the international community cannot stand by as genocide occurs. I am extremely pleased that CIJ has taken a leadership role in galvanizing the international community to respond to the ongoing genocide in the Darfur region of Sudan.

As the Ranking member of the Helsinki Commission, most of my work with the Coalition for International Justice has been related to what is unfortunately the still unresolved issue of obtaining Serbia's full cooperation with the International Criminal Tribunal for the former Yugoslavia (ICTY), located in The Hague. Despite the democratic ouster of Slobodan Milosevic in late 2000 and his transfer to The Hague in 2001, Belgrade's cooperation with the tribunal has not been good. Despite Serbia's own need to break with a horrible past, and despite the obvious need for surviving victims and families to have some closure, Serbian officials have largely responded only when pressure is applied. Ratko Mladic and Radovan Karadzic, perhaps the two people most directly responsible for the slaughter of thousands of innocent people in Bosnia and Herzegovina, remain at large. It has been clear for some time that Mr. Mladic has been protected by the military. Serbia's future integration in Europe is placed at risk by this irresponsible behavior.

The Coalition for International Justice has been indispensable in tracking the developments of the tribunal, as well as following reports of where at-large indictees may be, as well as what access prosecutors have had to evidence and witnesses. The Coalition also has done excellent work in analyzing the work of the tribunal itself. This has been important. International justice is a relatively new phenomenon, and things have not always developed smoothly. The Coalition has not been an apologist for ICTY or the other war crimes tribunals, and has brought attention to areas where improvement was needed. The Coalition should take great satisfaction that today, 10 years after genocide in Bosnia and Herzegovina, the war crimes chamber of Bosnia's court system now has the ability to handle the emotional and controversial cases from that dark time.

The staff of the Coalition for International Justice has always been outstanding, and has provided critical assistance to myself, my personal staff, and the Helsinki Commission staff that work on these issues. CIJ staff have been more than willing and able to help those of us in Congress who have worked to ensure common concerns about international justice are appropriately reflected in U.S. foreign policy. Board members Mark Ellis, John Heffernan and Jim Hooper were involved from the earliest days, when few were certain justice

would even be considered in diplomatic efforts to bring peace and stability to the Balkans. Staff past and present, including Edgar Chen, Stefanie Frease and Eric Witte, provided expertise not only on the work of the tribunals but also on the countries and conflicts the tribunals were created to address. I want to highlight in particular Nina Bang-Jessen, CIJ's Executive Director, who so effectively combined expertise and advocacy. She oversaw the Coalition as it broadened its focus to include not only the former Yugoslavia but Rwanda, Cambodia, Sierra Leone and today, Darfur.

Ongoing humanitarian catastrophes, Mr. Speaker, may frustrate us, but those who have worked at the Coalition for International Justice can take satisfaction knowing they did something about it and advanced the cause of international justice beyond where it otherwise would be. They have saved lives and brought war criminals to justice, and played a role in preventing future crimes against humanity. For that, we owe them our thanks and best wishes.

VA EXPERIENCE SHOWS BENEFIT OF GOVERNMENT ROLE IN HEALTHCARE

HON. BARNEY FRANK

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 30, 2006

Mr. FRANK of Massachusetts. Mr. Speaker, one obstacle we have when we seek to address what is clearly the number one domestic problem in America today—a healthcare system that is both unduly expensive and provides too little coverage for many Americans—is the objection to what some people are quick to call “socialized medicine.” The notion that a government role in healthcare is somehow inimical to the delivery of decent healthcare has prevented rational debate on this subject from going forward. Paradoxically, as the Secretary of the Department of Veterans Affairs, Jim Nicholson, recently noted in his speech at the Press Club, it is the healthcare delivery system in our country that is most completely a government operation that scores highest in consumer satisfaction. As Secretary Nicholson noted in that speech, “For the sixth consecutive year, the American Customer Satisfaction Index reports that veterans are more satisfied with their health care than any other patients in America. VA outscored the private sector by a full 10 percentage points. And as you would expect, because of our first-rate care, veterans are now coming to us in ever greater numbers.”

Mr. Speaker, the point must be underlined: the most popular form of medical care with those who receive it according to Secretary Nicholson, speaking on behalf of the Bush Administration, is a form of medicine that is entirely government run. I find it odd that people who would denounce Medicare as a form of “socialized medicine” don't apply that dreaded epithet to the one major medical care delivery system in our country which is entirely run by the public sector—the medical care delivered by the Department of Veterans Affairs.

I ask that excerpts from Secretary Nicholson's speech be printed here because they are an absolutely irrefutable answer to those who claim that any increase in a government role in medical care will somehow cause deterioration in the quality of that care. The ability of some myths to survive reality is one of the most impressive and depressing features of the American political scene. But I hope that people reading Secretary Nicholson's remarks, and thinking about what they mean in the broader context, will refrain in the future from somehow arguing that an increase in a public sector role in medical care will necessarily lead to its deterioration. I join Secretary Nicholson as a Member of Congress in taking pride in the medical care we provide for our veterans. My only criticism is that we don't do it in even greater quantity—too many veterans are unable to get access to the system, and I believe that it is an area where more resources would allow us to do an even better job. But again to quote from Secretary Nicholson's speech, when the “NBC Nightly News . . . aired a story about VA healthcare, saying that it is the envy of healthcare administrators and a model for healthcare nationwide,” it ought to give pause to those who mindlessly repeat the assertion that quality medical care and a government role are incompatible.

The VA is, I think, truly one of America's good news stories. Following a decade-long healthcare transformation, the VA is now at the forefront of America's healthcare industry. And it's not just a proud secretary saying that, but a host of other organizations within and outside of the healthcare community saying that about us. For example, the Journal of American Medical Association has applauded the VA's dedication to patient safety. The Washington Monthly magazine a few months ago had a feature article calling VA health care, quote, “the best care anywhere.”

U.S. News and World Report described the VA as the home of top-notch health care in its annual best-hospitals issue. And since you're sitting down, I won't shock you unduly by telling you even The New York Times recently said that the VA is a model for our nation. And very recently, I think last week or the week before, on the NBC Nightly News was aired a story about VA healthcare, saying that it is the envy of healthcare administrators and a model for health care nationwide.

And we are a model of humanitarian service in our communities as well. Our VA employees come to the aid of their communities and their citizens—veterans and non-veterans alike—in times of disasters and other emergencies. To make my point, I need only to mention the heroic effects and efforts of VA employees during Hurricane Katrina and Rita. Not only did our staffs evacuate several hundred patients out of our hospitals in the Gulf area to other hospitals without losing one, and not only did they do it quickly and efficiently, at great personal risk to themselves and at great personal sacrifice and loss. One nurse told me in Houston, where we relocated patients, that she for four days could see her house in New Orleans, and she could see only the roof and the chimney, but she went with her patients when we evacuated them, not even knowing the disposition of her own family.

And when it's all said and done, it's the millions of the men and women who we care for, though, who are our biggest supporters.

For the sixth consecutive year, the American Customer Satisfaction Index reports that veterans are more satisfied with their health care than any other patients in America. VA outscored the private sector by a full 10 percentage points. And as you would expect, because of our first-rate care, veterans are now coming to us in ever greater numbers. Fully 7.7 million are now enrolled in our system.

This year VA doctors and nurses will treat over 5.3 million veterans at one of our 14 points of healthcare access. That's an increase of more than 1 million veterans coming to us since President Bush came to office. We expect this year that we will have 60 million patient encounters; that is, 60 million visits to our centers, clinics and hospitals. We have 154 major hospitals and over 900 clinics, and we dispense pharmaceutical prescriptions to over three—excuse me, over 230 million times.

We've achieved something that no other major integrated provider has ever yet been able to do, and that is that every one of these 7.7 million veterans enrolled in our system has an electronic medical record.

Time precludes me from telling you all of the advantages of safety and good medicine that that gives us, but let me mention anecdotally a couple of things.

One, a young man came through Ronald Reagan airport. He was a diabetic. His insulin was in his luggage, and they lost his luggage. And he called his father in South Carolina, panicking, and his father said, "Call the VA," because he was a veteran.

He called our VA hospital here in north Washington. They said, "Get in a cab and come out here." And by the time he got there, they had his medical record dialed up, knew his insulin regime, administered to him, gave him a supply and sent him on his way.

And during that relocation of hundreds of patients in Katrina, we were able in every case, after we got them resettled into another hospital, to dial up their medical record.

So electronic health records and their advantages to patient safety, for telemedicine, have put us at the forefront in health care delivery in this country, and we are very proud of that achievement. And I can say that because it didn't happen in the 14 months that I've been in the job. So I'm sitting on the shoulders of those who did make it happen. But it is a seminal achievement in health care.

Two weeks ago I announced the creation of another front of technological initiative at the VA, which has the potential for untold ramifications in health care, and that's the creation of a new Genomic Medicine Program Advisory Committee, which will be to help me establish policies for using genetic information to help improve the medical care of our veterans.

The VA's commitment to move into this realm of research, to advance our knowledge of the relationship of the genome to a host of physical and mental conditions relevant to veterans, is completely in keeping with the investigative nature of VA medicine. For 75 years our researchers and clinicians have been breaking exciting ground in virtually every aspect of medicine, with most of their work resulting in new and better ways to treat the myriad illnesses of our veterans. From Nobel Prize-winning researchers—and the VA's had three Nobel Prize winners—from Nobel Prize winners to the CAT scan to paperless records

technologies, to kidney transplants, to microchip-drive prosthetics, to medical school partnerships that have trained more than half of our nation's physicians today, we are leading the world in our care for our veterans.

As I've outlined, we've done a great job so far. We are a world-class healthcare network when it comes to treating existing illnesses and disabilities. But then we ask ourselves, what if we knew how to identify the earliest possible signs of a veteran's predisposition to a particular disease? What if we knew in advance how a veteran would react to a particular drug therapy? What if we could reasonably forecast the risks a particular veteran might face with respect to some forms of cancer? What if, summing up, we could move from providing medicine that is preventative to medicine that is predictive?

With the advent of the Genomic Medicine Advisory Committee, we are positioning the VA to take a new journey, a truly great journey along the DNA trail. It is a path still not well lighted. There are so many questions of ethics and privacy that we are not going to proceed down that trail without first assessing the risks and benefits to our veterans. But we know from past experience that once we determine that a VA program is in the best interest of our veterans, we move forward with all the resources we can muster.

And when VA health care is on the move, we change the nation's healthcare landscape for the better. As medical practice incorporates the advances of science, we must harness VA's triple mission of health care, research and training to bring these advances to the veterans we serve.

I'm confident our new push down the genomic road will benefit not only our veterans, but the larger national health care community as a whole, as so much of our other research has done, such as the development of the CAT scan and the pacemaker and the first liver transplant done at the VA.

A TRIBUTE TO PARTHENIA HOLLIDAY

HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 30, 2006

Mr. TOWNS. Mr. Speaker, I rise today in recognition of Parthenia R. Holliday and I hope my colleagues will join me in recognizing the accomplishments of this outstanding member of the community.

Parthenia R. Holliday was born in Philadelphia, PA.

Her childhood years were like so many others filled with challenges, crossroads and hurdles that seemed uncrossable. At the tender age of 16 she knew her life long dream and desire was the wonderful art of singing. Her father and other sibling also were musically inclined and played instruments and sang, and so it was in her blood to sing and sing she did.

Ms. Holliday sang all over the world from Budapest, Hungary, Russia, Africa, and most recently in 2005 in London, England. She has also performed with Alvin Slaughter and others.

Ms. Holliday sang in many establishments in New York City and New Jersey. Unfortunately, Ms. Holliday found herself entangled in substances that were not healthy, or helpful for her continued growth and high self-esteem. Ms. Holliday's life took a wonderful change in her early 20s, hearing the promises of God, she accepted Jesus Christ as her lord and savior. The word of deliverance was preached unto her and after many trials and errors, the chains that bound her were broken and the broken pieces of her life were put back together again. Nothing became more important to Ms. Holliday than to do the will of Him who called her out of darkness to the marvelous light.

Ms. Holliday combined the fields of dentistry and elder care for a lifetime of caring and sharing. However, she believes her greatest gift is fundraising. Ms. Holliday received a certificate for great community services from the Honorable State Senator John L. Sampson for her accomplishments at the Bible Speaks Church and Christian School of Brooklyn, NY.

Mr. Speaker, I believe that it is incumbent on this body to recognize the accomplishments of Parthenia R. Holliday as she offers her talents for the betterment of our local and national communities.

HONORING MR. CALVIN BELLAMY

HON. PETER J. VISCLOSKEY

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 30, 2006

Mr. VISCLOSKEY. Mr. Speaker, it is my distinct pleasure to honor Mr. Calvin Bellamy on the occasion of his retirement as chief executive officer of Bank Calumet, where he has served the people of Northwest Indiana over the past 24 years. Throughout his time leading Bank Calumet, Mr. Bellamy has done much to improve the quality of life for everyone in Northwest Indiana. He has been an exemplary community leader as well as a successful business man, and I am proud to call him a friend.

Under Mr. Bellamy, Bank Calumet has become a crucial component for economic development in the region, with branches serving both Indiana and Illinois. Today, Bank Calumet operates in 29 locations with over 400 employees. Bank Calumet has become one of the largest locally owned bank and holding companies in Northwest Indiana with over \$1 billion in total assets. Bank Calumet has been named "one of America's best banks" by all three national rating services under Mr. Bellamy's leadership. These incredible accomplishments reflect the drive, passion, and commitment Cal Bellamy has shown to creating a world-class financial institution that invests in the communities it serves.

Cal Bellamy's contributions to the economy of Northwest Indiana are only eclipsed by his personal dedication to our community. Cal has been called on to lend his expertise and leadership to several important organizations in Northwest Indiana. Mr. Bellamy serves as chairman of the Purdue Technology Center Advisory Board, where he is involved with the center's activities to attract high-tech jobs to