

fatigue is a prevailing ailment that taints relief efforts.

However, the Day of the African Child is also a day to recognize and acknowledge the gains that African countries have had in helping the plight of their children. The situation is, indeed, grave, but contrary to popular misconception, African nations have taken considerable steps in improving the lives of their children. We must wholeheartedly direct more resources toward education initiatives and community rebuilding. We do have the capability, resources, and the conditions that are favorable to succeed in creating a better life for our children. We can fight disease, illiteracy, and malnutrition with simple, low-cost solutions. It is estimated that a child in Africa can be educated for about \$20 a day. With the goal of universal primary school access, the U.N. Children's Fund [UNICEF] has set the years between 1995 and 2000 as the target period to increase primary school enrollment and retention rate. This achievable goal of basic education is also geared to correct the tremendous disparity in the enrollment of female children.

In addition, the United Nations has successfully carried out Days of Tranquility during which children are immunized against the six major childhood killers. Warring parties have also been convinced to let convoys carrying desperately needed food and medicine to the innocent women and children trapped in war-torn areas.

For some the Day of the African Child will be a day to rejoice and enumerate the notable progress that has been achieved to ease the suffering of our planet's most precious citizens. For others, however, it will be a day to reflect, and to remind us, of the existing adversity and suffering that challenges all of us to preserve in our efforts.

I urge all my colleagues to recognize this important day which not only acknowledges the struggles of the African youth, but of children everywhere, as they will someday inherit the mantle of freedom and liberty that we hold so dear.

INTRODUCTION OF A BILL REGARDING D.C. CHILD CUSTODY CASE

HON. THOMAS M. DAVIS

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 15, 1995

Mr. DAVIS. Mr. Speaker, I rise today to introduce legislation which would allow Hilary Morgan, now known as Ellen Morgan and her mother Dr. Elizabeth Morgan to return safely to the United States.

In August of 1987, Dr. Morgan was jailed for civil contempt after she hid Hilary and refused to give up for a 2 week court-ordered unsupervised visitation with her father. Hilary's case, as many throughout the world are aware, involves alleged child abuse by the father. It portrays perhaps the most painful aspect of our own judicial system; a child's welfare and child custody proceedings.

Dr. Morgan spent over 2-years in the District of Columbia jail, until my colleague from Virginia, the Honorable FRANK WOLF offered legislation limiting to 12 months the time an individual could be incarcerated for civil contempt

in child custody cases in the District of Columbia. The bill, approved by this body, in essence freed Dr. Morgan from the D.C. jail. Upon her release she left the country and joined her daughter who was living with relatives in New Zealand. Elizabeth and Ellen remain in New Zealand, to this day.

Pending court orders pertaining to both the mother and the child place unacceptable obstacles in the path of their safe return. This bill seeks to remove those obstacles.

Ellen has indicated personally to me that she would like to return safely to the United States, which is her home.

Ellen will be 13 years old in August and has lived over half her life in New Zealand, away from her family and her home. Dr. Morgan a renowned plastic surgeon, due to local restrictions, has been unable to practice medicine. The Morgan family has suffered greatly, and Ellen wants to come home. We should not force this child, who has suffered so much in her young life to remain in exile if the situation can be remedied.

We should not and can not allow the judicial systems antiquated order to continue to punish this child or to force her to grow up away from her family or her country. The legislation I introduce today will remedy the situation and allow Ellen to come back to the United States and pursue her dreams.

Unfortunately, judicial proceedings and media coverage tended to focus on disputes between two well-known parents. The court order, now over 7 years old, does not address the current circumstances or the welfare of a young teenage child.

Under the provisions of this bill, the current orders relating to the penalties to the mother and visitation by the father, would no longer be operable. However, no bar would be placed on any court from revisiting this issue at any time and weighing the markedly changed circumstances since the original court decree.

Intervention in this issue is not unprecedented, but in my judgment merited for the child's own welfare and desire to return to her native country.

FDA'S CAUTION IS KILLING PEOPLE

HON. JOHN J. DUNCAN, JR.

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 15, 1995

Mr. DUNCAN. Mr. Speaker, I would like to share with my colleagues an editorial from the June 4, 1995, Los Angeles Times written by James P. Driscoll.

Mr. Driscoll, an AIDS activist, is currently vice president of Direct Action for Treatment in San Francisco. He has been working with my constituent, Alzheimer's activist George Rehnquist, to pressure the Food and Drug Administration [FDA] to approve tacrine, the first drug for treating Alzheimer's disease.

One of the most wasteful, bureaucratic agencies in the Federal Government today is the FDA. They have delayed approval for medicines for sometimes up to years to the detriment of the health of American citizens.

Mr. Driscoll's perspective on drug research, "FDA's Caution is Killing People," brings awareness to the needless deaths caused by

FDA's senseless delay of approval on vital medicines. I agree that Congress should no longer tolerate this practice.

[From the Los Angeles Times, June 4, 1995]

FDA'S "CAUTION" IS KILLING PEOPLE

(By James P. Driscoll)

During the 1950s, drug approval in the United States was a relatively quick and simple process. Then came thalidomide. European regulators had approved this tranquilizer without realizing that it could affect a fetus, and several hundred birth defects resulted worldwide. Capitalizing on the tragedy, liberals in Congress expanded the Food and Drug Administration's powers and altered its priorities.

After amendments in 1962, a peculiar system of drug approval emerged. With each passing year, that system grew more dilatory, more unbalanced and more costly to patients.

FDA's top priority became—and remains—prevention of new thalidomides.

Much of our gross national product is spent on prevention: national defense, vaccination, policing, flood control, sanitation, auto safety, cholesterol tests, anti-terrorist measures and burglar alarms.

Our prevention needs are boundless, but resources are limited and must be allocated wisely. Too much allocated to a minor prevention need will leave major needs neglected. Ideally, the greatest good for the greatest number should determine priorities. In reality, narrow self-interest often prevails. Thus, defense contractors build new weapons the country doesn't need. Farmers get subsidies to grow surplus crops. And FDA churns out burdensome regulations that delay drug approval and actually harm patients.

To better understand FDA's narrow priority, we need to see it in light of the kinds of problems that beset drug regulators. The least common problems are the thalidomides, drugs approved before their safety hazards are known. Even with the pre-1962 FDA, this kind of problem never was a threat comparable to food poisoning or plane crashes. But since Congress blamed FDA for mistaken approvals, the agency made preventing new thalidomides its top priority. Through scare tactics and deception, FDA sold the public on this priority.

Congress and the public are beginning to realize that they have been unwitting parties to a deal made in hell. To prevent a minor threat to public health, FDA created a major health tragedy: needless deaths and suffering caused by delaying useful medicines.

Rational priorities would seek a balance that minimizes the total deaths caused by both mistaken approvals and delays. Rationality and balance are hard. Delay is easy and deals made in hell are tempting.

A recent FDA delay resulted in 3,500 deaths—those kidney cancer patients who, by the FDA's own figures, would have been saved if the drug Interleukin 2 had been approved here as quickly as it was in Europe. These kidney cancer deaths exceed the number of babies deformed by thalidomide. And Interleukin 2 is only the tip of the iceberg. Delays in approving heart drugs, cancer drugs, AIDS drugs and life-saving devices have contributed to tens of thousands of deaths.

Congress has tolerated FDA delay because its dangers are difficult to prove. Individual patients usually don't know about the unapproved drug or device that could save their lives. Patients who suffer the worst loss from FDA delay cannot protest from their graves. Fearing retaliation, drug companies avoid blaming FDA for delays.

Few people grasp the complexities of drug development. Few politicians bother to

evaluate carefully either FDA's priorities or the human cost of regulatory delays. Consequently, we've lacked effective congressional oversight on FDA. Without oversight, rational policy perishes, deceit flourishes and demagoguery can triumph.

Enter David A. Kessler, FDA's answer to J. Edgar Hoover. Kessler's FDA boldly sets its own priorities. It does not shrink from half-truths or scare tactics. It pursues retaliation and selective enforcement without remorse. It has made drug safety and efficacy testing a worse bargain than the Pentagon's \$600 toilet seats. Fortunately, recent House and Senate hearings indicate that FDA abuses are finally arousing congressional watchdogs.

Congress should no longer tolerate the FDA's perversion of its mission. To prevent a few mistaken approvals, FDA sacrifices countless patients to approval delay, slows the pace of medical progress and drives health-care costs through the roof and jobs out of the country. It's time for Congress to put patients above bureaucrats and hold the FDA strictly accountable for the human cost of regulatory delays.

TRIBUTE TO THE DEFENSE REUTILIZATION AND MARKETING SERVICE

HON. NICK SMITH

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 15, 1995

Mr. SMITH of Michigan. Mr. Speaker, I rise today to pay tribute to the exemplary efforts of the employees of the Defense Reutilization and Marketing Service [DRMS] based at the Federal Center in Battle Creek, MI.

In the last several years DRMS has vastly improved the efficiency of its operations, which involve the reuse and sale of military surplus goods. In the 1994 fiscal year, DRMS increased its revenues by 85 percent and its profits by 116 percent while cutting its costs by 4 percent. These improvements have continued into the 1995 fiscal year. In fact, the Michigan legislature recognized and commended the achievements of DRMS in a resolution passed on May 31, 1995.

This week, a provision of H.R. 1530 proposed the total privatization of DRMS, ignoring the progress it has made. This provision also ignored the ongoing selective privatization program at DRMS and the opinion of DRMS and the Defense Logistics Agency [DLA] that total privatization is not feasible. Fortunately, with the help of many fine people connected with DRMS, we were able to remove this provision.

I would like to take this opportunity to recognize and thank some of those who took leading roles in the effort to amend H.R. 1530. I like to thank the leaders of DRMS and DLA, navy Captain Hempson [DRMS] and Admiral Straw [DLA]. I also want to express my appreciation for the support of Dan McGinty, DLA's Congressional Liaison.

I want to thank the employees of DRMS both for the excellent work they have done and their efforts to change H.R. 1530. In particular, I would like to recognize the efforts of Gary Redditt and Angie Disher, the union representatives at DRMS.

Once more, let me say once more to DRMS and its employees, job well done.

PHYSICIST, DR. EARL F. SKELTON,
HONORED

HON. IKE SKELTON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 15, 1995

Mr. SKELTON. Mr. Speaker, Dr. Earl F. Skelton, of Washington, DC, a physicist at the Naval Research Laboratory was awarded an NRL-Edison Chapter Sigma Xi Award in Pure Science at a ceremony on June 8, 1995.

Dr. Earl F. Skelton of the Condensed Matter and Radiation Science Division is the author of one of two winning papers in pure science, "Direct Observation of Microscopic Inhomogeneities With Energy-Dispersive Diffraction of Synchrotron Product X-rays." In this paper, also winner of the 1995 NRL Alan Berman Annual Research Publication Award, Dr. Skelton develops fundamental high-pressure research on various superconducting materials using a synchrotron beamline and significantly improves the x-ray diffraction detection limit.

This is the first example of directly detecting structural variations over a spatial scale of 10 micrometers. The existence of such structural inhomogeneities brings into question whether exotic experimental results obtained from high-temperature superconducting material actually reflect their intrinsic properties.

Dr. Skelton, a research physicist with a Ph.D in physics from Rensselaer Polytechnic Institute, has published over 200 research papers in technical journals and won several scientific publication awards. He is a fellow of the American Physical Society and a professor in the School of Engineering and Applied Science at George Washington University.

Each year at the NRL-Edison Chapter of Sigma Xi presents awards to outstanding NRL scientists judged to have made distinguished contributions to pure and applied science during their research NRL. These awards are in keeping with the objective of the chapter to encourage investigation in pure and applied science and to promote the spirit of scientific research at the Naval Research Laboratory.

I know that each Member of this body joins me in congratulating Dr. Skelton on his truly outstanding achievement.

SCHOOL BUS SAFETY ACT OF 1995

HON. JAMES A. TRAFICANT, JR.

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Friday, June 16, 1995

Mr. TRAFICANT. Mr. Speaker, every schoolday in our country approximately 418,000 schoolbuses carry 24 million schoolchildren to and from school and school-sponsored activities covering 4.5 billion miles. Schoolbus safety is an issue that certainly deserves the attention of the American people and the Congress. Between 1988 and 1993 approximately 400 people were killed, and 67,900 people were injured, as a result of schoolbus accidents. In my State of Ohio, there were 475 people—426 of them students—injured in schoolbus accidents in the 1992-93 school year.

Without question the schoolbus is the safest mode of transportation on America's roads today. My goal is to improve on existing tech-

nologies to maximize safety. Today, Mr. Speaker, I am introducing a bill to do just that. The School Bus Safety Act does a number of things that will ensure the safe travel of our most valuable resources: our children.

My bill directs the U.S. Department of Transportation to set national proficiency standards for schoolbus drivers. It also directs the Administrator of the National Highway Traffic Safety Administration to develop guidelines on the safe transportation in schoolbuses of children under the age of 5. Currently, today's buses are designed to transport and provide maximum safety for children above the age of 6. It would apply the Federal Motor Carrier Safety Regulations [FMCSR] to interstate schoolbus operations. Presently, schoolbuses owned and operated by school districts, regardless of the type of operation involved, are not covered by FMCSR because the school districts are exempt governmental entities. My bill mandates a national criminal history background check system to enable local education agencies, or contractors, to check the criminal background of any person they are considering for employment as bus drivers. In addition, the bill calls for the establishment of construction, design, and securement standards for wheelchairs used in schoolbuses. Finally, my bill directs the DOT study the usage of seat belts on schoolbuses, the extent to which public transit vehicles are engaged in schoolbus operations, and the contracting out of schoolbus operations.

Mr. Speaker, as a senior member of the U.S. House of Representatives Transportation and Infrastructure Committee, I have long championed Federal measures to promote transportation safety. My bill jets forth a reasonable plan for improving schoolbus safety and safeguarding the lives of schoolchildren. I urge all my colleagues to support this legislation.

REMEMBERING OUR VETERANS

HON. THOMAS M. BARRETT

OF WISCONSIN

IN THE HOUSE OF REPRESENTATIVES

Friday, June 16, 1995

Mr. BARRETT of Wisconsin. Mr. Speaker, one of my constituents, Thomas J. Boulet, sent me a poem "Remembering" which honors the service of the men and women who have served their country in the Armed Forces. I think this poem gives all of us an opportunity to reflect on their sacrifice and valor.

REMEMBERING

(By Thomas J. Boulet, September 10, 1980)

Yes, the poppies still blow in Flanders Field
But over here, who still cares—?
People have forgotten Wars I and II
That made Veterans of men so true.
For God and Country—they did their duties
Against high odds—they went forward:
Striving, fighting men—now forgotten
They gave their all, let them rest—Their
battles done.

Today, we here, must say a Prayer
To remember the "Peace of the Dead"
Hoping that our Prayers are not in vain
That while this World lasts—no war again.
The "Torch" that was cast to us living
Must be "Held up high"—or die;
"Tis our time now to push and strive
For Peace; then we can hold that torch up
high.