

I have consistently advocated that criminal aliens should be quickly and permanently deported. Not only do I support the permanent deportation of criminal aliens, I want them caught before they commit crimes and jeopardize our communities. Without Federal assistance in undertaking this law enforcement effort, criminal aliens could cause undue harm to women, men and children.

The Federal Government should do all it can to avoid burdening State and local police budgets with the cost of identifying, apprehending and deporting criminal aliens.

The pilot program in the city of Anaheim has resulted in a very successful track record of detentions and deportations of criminal aliens. Because I fully endorse the program's success, I contacted the INS and requested that the Anaheim portion of the pilot program be continued. The INS approved my request.

Because of my concerns, I have joined my colleagues in sending a letter to the Committee on the Budget requesting an increase in funding for the State criminal alien assistance program. This program reimburses State and local governments for the costs of incarcerating illegal alien felons. The Federal Government must not waste American taxpayer dollars to pay for the cost of incarcerating violent criminal aliens. We cannot afford to waste scarce law enforcement revenues.

As a fiscal conservative and in the light of the current budget roadblock, Congress must implement a cost-effective program that deploys INS enforcement officers in the most efficient manner. We need to ensure that more criminals are captured earlier and before they have done harm to our people in our districts and before they end up being a burden to our local law enforcement.

#### THE BUDGET AGREEMENT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Wisconsin [Mr. NEUMANN] is recognized for 5 minutes.

Mr. NEUMANN. Mr. Speaker, I rise to address the budget that is currently being discussed in Washington, DC, and maybe to clean up some misinformation that is floating around out here and provide some very basic elementary facts on what is included in the budget agreement that is currently being worked on and basically been agreed to, short a few final details.

Here is all this budget plan does that is currently being proposed. It balances by the year 2002, has declining deficits for each year starting 1998 and going forward, restores Medicare for a decade so our seniors do not have to go to sleep tonight wondering whether Medicare is going to be there tomorrow. It allows families, all Americans to keep more of their own money instead of sending it to Washington, DC.

This is done in four ways at least. The \$500 per child tax credit is in here.

Capital gains will be reduced, we are hoping, to a number below 20 percent. The death tax reform to allow people to not have to pass away and also see the taxman on the same day is in here. Also, we are hoping to provide a college tuition tax credit to help the many people across this Nation who are paying large college tuition bills this year.

Further, the budget plan does not adjust the CPI. This was a major concern to our senior citizens because, of course, lowering the CPI would reduce cost-of-living adjustments in the future. So there is no CPI adjustment in here. It was a major concern, and it has been addressed and is no longer part of it.

Also in the plan there is discussion and it is laid out exactly how to go about past 2002, paying off the Federal debt. And when we pay off the Federal debt, of course, that means that we also put the money back in the Social Security trust fund that has been taken out. I might add that it was brought to my attention this morning that as we pay off the Federal debt we would also be returning the money to the highway trust fund that has been spent over the last 10 or 15 years as opposed to dedicated to road construction.

As I am out here, there are a lot of things that have developed in this plan. There is an awful lot of misinformation floating around about it. But I think it is time that we look at some of the great things that have happened both under this plan in the last 2 years and how they compare to what happened prior to that.

In the 7 years before 1995, before the Republicans took over Congress, annual spending increases in overall Government was 5.2 percent. Government spending went up 5.2 percent every year. Since the Republicans have taken over in 1995 and as we look at this budget plan, 3.2. So it is a decrease in the amount of growth in Federal Government spending. In inflation adjusted dollars, it was 1.8, and it is all the way down to 0.6. It is a two-thirds reduction in the increases in real-dollar spending of this Government.

I heard some complaints that non-discretionary defense spending is going up too much in this plan. That is not really true either when we look at the facts. We look at the facts before 1995, nondiscretionary defense spending was going up by an average rate of 6.7 percent per year. And under this plan it goes up by 0.9 percent per year, less than 1 percent increase per year. In real dollars, it was 3.2 before 1995, and under this plan it is actually being decreased by 1.5.

A lot of folks talk about us using a rosy scenario to make it look like the budget is balanced. I have good news for everyone in this great country that we live in. The good news is they were not rosy scenario projections that led to the budget getting balanced. The growth in GDP is now being projected 0.2 percent lower than projections we

used in 1995. As a matter of fact, they are very conservative projections. And should the economy continue strong as it is today, the good news is we might very well, under this agreement, reach a balanced budget by 2000 or perhaps even 1999. That is how conservative the projections in this plan are.

One more point I would like to bring to the attention of my colleagues today. Back in 1995, we passed a budget resolution and we declared victory. We said that this is the best thing that could happen to this country because it is going to lead to a balanced budget. We had this idea that, if Government just controlled their growth, they reduced the amount of money they were borrowing out of the private sector, that that would lead to a strong economy in our country.

The theory was, if Government borrowed less, there would be more money available in the private sector. With more money available in the private sector, interest rates would stay low because of increased availability, and with interest rates low, people would start buying more houses and cars and the economy would boom. People would leave the welfare rolls and they would go back to work.

In fact, we find this is no longer a theory, but the model worked better than anyone anticipated. In the budget plan of 1995, we projected a deficit in 1997 of \$174 billion. It turns out this model worked so well that the deficit is all the way down to \$70 billion this year.

I would like to conclude with what I would call the miracle of 1997. I really do think this is a miracle. Before I came to Washington, I would have described this as a miracle. Here is the miracle of 1997.

Between our 1995 projections and today, \$100 billion of unanticipated revenue came in. That is, they collected more revenue because the economy is so strong, \$100 billion more than what was expected. The miracle is this, instead of spending that \$100 billion, every nickel of it went to deficit reduction; and, in fact, that is why the deficit is \$100 billion below what we anticipated back in 1995, when we passed the House budget resolution.

The end result, what this means for our families in America, it means that our kids can look forward to a bright future once again in this great Nation that we live in.

#### PERSIAN GULF WAR SYNDROME

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Vermont [Mr. SANDERS] is recognized for 5 minutes.

Mr. SANDERS. Mr. Speaker, I briefly wanted to discuss an amendment which I will be introducing as soon as the rule on the supplementary appropriation is fixed, which deals with an emergency situation for gulf war veterans who are really not getting the attention and the understanding that they need in

order to deal with the very serious crisis of Persian Gulf war syndrome.

As we know, Persian Gulf war syndrome is right now affecting some 70,000 of the brave men and women who served this country in the gulf. Mr. Speaker, I am a member of the Subcommittee on Human Resources, which is chaired by the gentleman from Connecticut [Mr. SHAYS], who has done an outstanding job in bringing before the subcommittee some of the leading researchers in this country who are searching for an understanding of Persian Gulf war syndrome.

We have also heard testimony from the Pentagon and the Veterans' Administration. I must say, Mr. Speaker, that the conclusion that I have reached is that, for whatever reason, and I say this unhappily, it is my view that neither the Pentagon nor the Veterans' Administration is going to come up with a solution regarding the problems and the cause of the problems that our Persian Gulf war veterans are suffering from. Nor in my view are they going to come up with an effective treatment.

Mr. Speaker, there is some good news. The good news is that there have been some major scientific breakthroughs in allowing us a better understanding of Persian Gulf war syndrome. Mr. Speaker, the military theater in the Persian Gulf was a horrendous chemical cesspool. Nobody denies that. It is now acknowledged that our troops there were exposed to chemical warfare agents that had been denied for a while, but it is now acknowledged by all.

In addition, they were exposed to leaked petroleum, a widespread use of pesticides, depleted uranium and the dense smoke from burning oil wells. In other words, all around them were very dangerous and toxic chemicals. In addition they were given various vaccines. Perhaps, most importantly, as a result of a waiver from the FDA, they were given pyridostigmine bromide for antinerve gas protection.

Mr. Speaker, an increasing number of scientists now believe that the synergistic effects of these chemical exposures plus the pyridostigmine bromide may well be the major cause of the health problems affecting our soldiers.

The truth is that after 5 years, there has not yet been, to the best of my knowledge, one significant study coming out of the Pentagon or the VA which shows the relationship between chemical exposure in the Persian Gulf and the Persian Gulf syndrome.

On the other hand, and this is where the good news is, there have been a number of important studies done outside of the Pentagon and the VA which makes this important link. I will be introducing these studies into the record so that interested Members can study them. But let me just very briefly mention a few of them.

Dr. Robert Haley of the University of Texas Southwestern Medical Center, based on studies that he has done, believes the syndromes are due to subtle

brain, spinal cord and nerve damage caused by exposure to combinations of low level chemical nerve agents and other chemicals, including pyridostigmine bromide in antinerve gas tablets, DEET in a highly concentrated insect repellent, and pesticides in flea collars that some of the troops wore.

And Doctors Mohammed Abou-Donia and Tom Kurt, of Duke University Medical Center, found in studies that used chickens that two pesticides used in the gulf war, DEET and permethrin, and the antinerve gas agent pyridostigmine bromide, which was given to all troops, were harmless when used alone. However, when used in combination, these chemicals caused neurological deficits in the test animals similar to those reported by some gulf war veterans.

□ 1330

Dr. Satu Somani of the Southern Illinois University School of Medicine states that based on recent experimental proof and historical evidence of symptoms, such as impaired concentration and memory, headache, fatigue and depression of workers in the organophosphate industry, he considers that gulf war syndrome may be due to low dose sarin exposure and the intake of pyridostigmine and exposure to pesticides and other chemicals.

Drs. Garth and Nancy Nicolson of the University of Texas, Houston, found that gulf war veterans who are ill may eventually have their diagnoses linked to chemical exposures in the Persian Gulf, such as oil spills and fires, smoke in military operations, chemicals on clothing, pesticides, chemoprophylactic agents, chemical weapons, and others.

Dr. Claudia Miller and Dr. William Rea of Texas also see a connection between the chemicals that our soldiers were exposed to and gulf war syndrome.

Mr. Chairman, this is an important breakthrough. This research provides an important breakthrough which, in my view, may finally give us the information that we need to understand Persian Gulf war syndrome, which is affecting 70,000 veterans. This is why later this afternoon I will be bringing forward an amendment which asks for \$10 million to go to the National Institute of Health and Environmental Science so that they can pursue this important area of research.

#### HOUSING OPPORTUNITY AND RESPONSIBILITY ACT OF 1997

The SPEAKER pro tempore [Mr. GIBBONS]. Pursuant to House Resolution 133 and rule XXIII, the Chair declares the House in the Committee of the Whole House on the State of the Union for the further consideration of the bill, H.R. 2.

□ 1332

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole

House on the State of the Union for the further consideration of the bill (H.R. 2) to repeal the United States Housing Act of 1937, deregulate the public housing program and the program for rental housing assistance for low-income families, and increase community control over such programs, and for other purposes, with Mr. RIGGS (Chairman pro tempore) in the chair.

The Clerk read the title of the bill.

The CHAIRMAN pro tempore. When the Committee of the Whole rose on Tuesday, May 13, 1997, the amendment by the gentleman from Illinois [Mr. DAVIS] had been disposed of and title VII was open for amendment at any point.

Are there further amendments to title VII?

Are there further amendments to the end of the bill?

AMENDMENT IN THE NATURE OF A SUBSTITUTE OFFERED BY MR. KENNEDY OF MASSACHUSETTS

Mr. KENNEDY of Massachusetts. Mr. Chairman, I offer an amendment in the nature of a substitute.

The CHAIRMAN pro tempore. The Clerk will designate the amendment in the nature of a substitute.

The text of the amendment in the nature of a substitute is as follows:

Amendment in the nature of a substitute offered by Mr. KENNEDY of Massachusetts:

Strike out all after the enacting clause and insert in lieu thereof the following:

#### SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Public Housing Management Reform Act of 1997".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows—

Sec. 1. Short title and table of contents.  
Sec. 2. Findings and purposes.

#### TITLE I—PUBLIC HOUSING AND RENT REFORMS

- Sec. 101. Establishment of capital and operating funds.
- Sec. 102. Determination of rental amounts for residents.
- Sec. 103. Minimum rents for public housing and section 8.
- Sec. 104. Public housing ceiling rents.
- Sec. 105. Disallowance of earned income from public housing and section 8 rent and family contribution determinations.
- Sec. 106. Public housing homeownership.
- Sec. 107. Public housing agency plan.
- Sec. 108. PHMAP indicators for small PHA's.
- Sec. 109. PHMAP self-sufficiency indicator.
- Sec. 110. Expansion of powers for dealing with PHA's.
- Sec. 111. Public housing site-based waiting lists.
- Sec. 112. Community service requirements for public housing and section 8 programs.
- Sec. 113. Comprehensive improvement assistance program streamlining.
- Sec. 114. Flexibility for PHA funding.
- Sec. 115. Replacement housing resources.
- Sec. 116. Repeal of one-for-one replacement housing requirement.
- Sec. 117. Demolition, site revitalization, replacement housing, and tenant-based assistance grants for developments.
- Sec. 118. Performance evaluation board.
- Sec. 119. Economic development and supportive services for public housing residents.