

for 1 minute and to revise and extend his remarks.)

Mr. BALLENGER. Madam Speaker, should we count or should we take a poll? The census debate boils down to that difficult question.

The Democrats say, why should the Constitution stand in the way of rigging the numbers the way we want? After all, the Democrats are either unaware of Article I, section 2 of the Constitution that states in clear language that Congress shall direct that a census be conducted using an actual enumeration, or they simply wish to ignore it.

Either way, it is troubling that one party is willing to go so far to trample on the Constitution just for political purposes.

Most Americans do not have a Ph.D. in English or in American constitutional history. But most Americans do believe that sampling, guessing, or taking a poll does not qualify as actual enumeration, also believe the Constitution actually means what it says.

They are pretty tired of liberal Democrats inventing out of whole cloth things that are in the Constitution, no matter how many liberal experts in Washington tell us otherwise.

HMO REFORM

(Ms. SLAUGHTER asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. SLAUGHTER. Madam Speaker, Americans are frustrated with their managed care plans. It is no wonder; HMO horror stories abound. Every day we hear stories of people being denied care, doctors being forbidden from discussing treatment options, and patients unable to get justice when things go wrong.

Americans want a few simple things from their HMOs. In an emergency, they want care without having to worry about whether all necessary treatments will be covered. They want the right to visit the specialist who can address their health problems and the right to get prescription drugs they need.

They want accountability from HMOs and insurance companies when they are injured by abusive practices. They want absolute privacy in their medical records and protection from discrimination on the basis of their genetic information.

Unfortunately, we have not been given the opportunity to have any hearings or a markup on these issues, and, therefore, I encourage my colleagues to carefully consider the great need for legislation that will guarantee patient protection and put the emphasis on managing care rather than managing costs. I urge us to settle for nothing less.

We have a historic opportunity to end these horror stories. Let us not waste this opportunity on half-baked attempts at reform. Let us take this

chance to guarantee the protections that Americans want and need in their health care plans.

VETO OF EDUCATION SAVINGS ACCOUNT BILL WAS WRONG

(Mr. ROGAN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ROGAN. Madam Speaker, the President's late night, quiet veto this week of Education Savings Accounts—timed in order to miss the evening news—means that those that produced generations of education failure have dodged the bullet again.

The other side should explain to America why encouraging parents to save for their children's education is a bad thing. Oh, they are long on heartwarming rhetoric about their care and compassion for "the children" and for "education;" but when it comes to education reform legislation that threatens the special interests that gave us these failing schools in the first place, they are woefully short on action.

They send their own kids to private schools, but then they tell working parents who want to save for their children's education "no."

Madam Speaker, Republicans in Congress are not content to simply talk about "the children," we will fight for children, and for the world-class education they deserve. We will continue the fight for working parents who want to be able to save for their children's education through Education Saving Accounts.

VIGILANCE OF BROWN TREE SNAKE NEEDED IN HAWAII

(Mr. ABERCROMBIE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ABERCROMBIE. Madam Speaker, I rise this morning to express my support for provisions in the Interior Appropriations bill we are debating today for the funding of the Brown Tree Snake control efforts.

The consequences of the Brown Tree Snake becoming established on any of the Hawaiian Islands would be devastating. We have only to look at Guam to understand the potential extinction of many species will, not might, result from the introduction of the snake to Hawaii.

Guam now experiences an instance of more than 12,000 of these snakes per square mile. Entire species have disappeared from Guam since World War II when the snake was accidentally brought to the island, most probably aboard military aircraft which had visited areas of the South Pacific in the snake's natural habitat.

The Interior Appropriation bill contains \$2.1 million for prevention, education, and inspection programs, an increase of \$500,000 over last year. We need to step up our vigilance in Hawaii

against this invasive species which has brought wildlife ruin elsewhere.

The scientific community has not yet developed an effective eradication method. Although I hope we can soon understand how to control and eliminate the snake, until that time, the only action we can and must take is preventing its introduction into Hawaii.

I am very pleased that the Committee on Appropriations has recommended an increase, and I look forward to working with my colleagues in achieving the highest funding level to achieve our goals.

PATIENT PROTECTION ACT

(Ms. DUNN asked and was given permission to address the House for 1 minute.)

Ms. DUNN. Madam Speaker, I rise today in support of the Patient Protection Act, the Republican plan to provide greater accessibility, affordability, and accountability in our Nation's health care system.

This plan will make a real difference in the lives of America's working women for a lot of reasons. Small businesses in this country are increasingly dominated by women who are looking to make their mark in a growing economy. Unfortunately, right now the cost of health care makes it very tough for them to purchase health care for themselves and their families.

That is why the Republican plan makes the cost of health care for small businesses 100 percent deductible, and it allows small businesses to band together to purchase health care at the same discounted rates that are currently enjoyed by big business.

These sensible reforms, combined with our plans giving a woman's right to choose an OB/GYN as her prime caregiver, are essential to improving access to health care for the many women in this country who are helping to drive this Nation's economy. They stand in stark contrast to the Democrat bill which does nothing to make health care more affordable or accessible to American women.

I urge my colleagues to support the Patient Protection Act when it comes to the floor tomorrow.

MANAGED CARE REFORM

(Ms. DELAURO asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. DELAURO. Madam Speaker, as a cancer survivor, I can tell you that when you are diagnosed with a deadly illness you come face to face with your own mortality. While you are wondering whether you are going to live or you are going to die, you should not have to worry that 2,000 miles away an HMO accountant is making the decisions about what kind of treatment that they are going to provide or what kind of drugs can be provided for your illness. These are the kinds of decisions that ought to be made by doctors and patients, period.

The Democrats do have a managed care reform proposal that would ensure the critical health care decisions are made by doctors and patients and not HMO bureaucrats. Yet, the Republican proposals would not provide access to specialty care for cancer patients, provide the necessary needed drugs, prohibit drive-through mastectomies. They have no direct access to OB/GYNs. The last straw is they have no access to State courts if your HMO plan injures you.

What they do allow is for those company accountants to continue to value its HMO healthy profits over the healthy patients that are in this country. Let us return medical decisions back to doctors and patients. Let us pass the Democratic Patients' Bill of Rights.

PARTIAL-BIRTH ABORTION BAN ACT OF 1997—VETO MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 105-158)

Mr. CANADY of Florida. Madam Speaker, I offer a privileged motion.

The SPEAKER pro tempore (Ms. EMERSON). The Clerk will report the motion.

The Clerk read as follows:

Mr. CANADY of Florida moves to discharge the Committee on the Judiciary from the further consideration of the president's veto of the bill H.R. 1122.

(For veto message, see proceedings of the House of October 21, 1997 at page H8891.)

The SPEAKER pro tempore. The gentleman from Florida (Mr. CANADY) is recognized for 1 hour.

Mr. CANADY of Florida. Madam Speaker, I yield the customary 30 minutes to the gentleman from Virginia (Mr. SCOTT), pending which I yield myself such time as I may consume.

□ 1030

Madam Speaker, today for a second time the House considers a presidential veto of bipartisan legislation banning partial-birth abortion. In the last Congress, although the House overrode President Clinton's veto of the Partial-Birth Abortion Ban Act of 1995, the veto was sustained in the other body. Shortly after the current Congress convened, new legislation to ban partial-birth abortion was introduced. In due course, the Partial-Birth Abortion Ban Act of 1997 was passed by both Houses. President Clinton's veto of that legislation is before the House today.

Just 2 weeks ago, the Members of this House and the American people received a stark reminder about the reality of partial-birth abortion. We read in press reports of a tiny baby in Phoenix, Arizona, who was almost killed by a partial-birth abortion. The baby girl survived with a fractured skull and deep lacerations on her face. She survived only because the abortionist stopped the procedure when it became obvious that she was at 9 months and

not 5½ months, as had originally been thought. The abortionist stopped, but we know, nevertheless, that partial-birth abortions are performed from the fifth month through the ninth month of pregnancy, and that a baby feels excruciating pain during a partial-birth abortion at any stage of pregnancy. Miraculously, in this case, a little girl who was marked for destruction is alive today and a Texas couple have come forward to adopt her.

Of course, we know that surviving an attempted partial-birth abortion is very much the exception. Tragically, most of the babies singled out for partial-birth abortion have their lives brutally snatched away, just within inches from being fully born.

Now, despite the campaign of deception waged by the abortion industry to cover up the facts about partial-birth abortion, we know that this gruesome procedure is performed thousands of times a year. We know that in the overwhelming majority of cases, it is performed on the healthy mother, mothers of healthy babies.

We know that the abortion industry that claimed that partial-birth abortion is a rare procedure used only in extreme cases was a lie all along. We know this because the facts are undeniable and because representatives of the abortion industry have themselves ultimately admitted that the industry have been lying all along.

With their campaign of deception exposed, with the lies revealed in the full light of day, what do the advocates of partial-birth abortion say now?

They say that partial-birth abortion is necessary to protect the health of women. They say that partial-birth abortion must be preserved as an option for abortionists to use. They say that it is a necessary medical procedure. These claims, like all their other claims about partial-birth abortion, are false, untrue from start to finish.

When we hear the claims of the defenders of partial-birth abortion, I ask the Members of the House to consider what partial-birth abortion is. Look at what this brutal procedure actually involves. This is partial-birth abortion:

Guided by ultrasound, the abortionist grabs the live baby's leg with forceps. Look at this procedure.

The baby's leg in the next step is pulled out into the birth canal.

The abortionist then delivers the living baby's entire body, except for the head, which is deliberately kept lodged just within the uterus.

Then, in the final step of this horrible procedure, the abortionist jams scissors into the baby's skull. The scissors are opened to enlarge the hole.

Then, after the baby has been killed, the scissors are removed and a suction catheter is inserted. The child's brains are sucked out, causing the skull to collapse, and the delivery of the dead child is completed. This is the final step. This is what we see at the conclusion of every partial-birth abortion.

Now, I have described this procedure many times. I wince every time I de-

scribe it. It is a horrible thing to describe; it is a horrible thing to contemplate. And to the Members of this House who support partial-birth abortion, I would appeal to them, I would appeal to them to look at what is happening whenever a partial-birth abortion is performed.

Now, let me ask my colleagues, how is this horrific procedure calculated to protect the health of the mother? That claim simply makes no sense. It is absurd to claim that killing a partially-delivered child in the birth canal is necessary to protect the mother's health. How does this death blow delivered by the scissors into the tiny baby's skull help preserve the health of the mother?

Madam Speaker, listen, listen to what Dr. Pamela Smith, Director of Medical Education, Department of Obstetrics and Gynecology at Mt. Sinai Hospital says, and I quote her:

There are absolutely no obstetrical situations encountered which require a partially delivered human fetus to be destroyed to preserve the health of the mother.

Listen to Dr. Nancy Romer, a practicing high-risk obstetrician-gynecologist who is also a professor of medicine. Dr. Romer says this:

People deserve to know that partial-birth abortion is never medically indicated, whether to save the health of a woman or to preserve her future fertility.

I would appeal to my colleagues to also listen to the American Medical Association on this issue, which, despite its strong support for abortion rights, has supported this legislation to ban partial-birth abortion. The American Medical Association itself recognizes that partial-birth abortion is not a legitimate medical procedure.

The health argument used by President Clinton and the other defenders of partial-birth abortion is nothing more than a pretense. It is a cloak for the extremist position that abortion for any reason at any stage of pregnancy, and using any procedure imaginable should receive the absolute protection of the law of the land.

I would appeal to my colleagues to reject this extremist position, listen to the voice of reason, cut through all the lies and deception, base your vote on the truth, think of the babies who are subjected to this horrible practice. If my colleagues do so, they will vote to override the President's veto.

This House should, once again, reject the President's extremist position in support of partial-birth abortion, and move forward to override his veto of the Partial-Birth Abortion Ban Act.

Madam Speaker, I reserve the balance of my time.

Mr. SCOTT. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, the motion before us is to discharge the Committee on the Judiciary from further consideration of the bill. Madam Speaker, the Committee on the Judiciary has not considered the bill at all. It was referred to the Committee on the Judiciary several months ago. The thing that