

I'll have to tell Lucy about it, you know,  
that New York girl,  
Who thinks she's much, just because she  
comes from the big town.  
We can't get in, can we?  
I wish we could.  
What will this place be for?  
Well, Lucy will hear of this place,  
I tell you.  
She'll know she doesn't see everything just  
because she's in New York.  
Say, Ed, what's that woman crying about  
anyway?  
Oh, yes. I guess you're right; she must have  
lost her son in the war.

3. *A sonneteering poet sees it.*

This, our great house of stone, is for our  
war's dead,  
Our dead; they died away from us; far away  
In France, they, fighting, died. There, this  
very day,  
Their bodies lie. Yet, let it not be said,  
Ever, that mem'ry of their dying has now  
fled.  
This white, great house is for them, and O,  
may  
It serve their cause well and long. It is they  
Who made, own it. And so, let us dread  
Our miscue of their dying. Let this, our hall,  
This hall so noble with its cool, white stone,  
Bring to our minds that wars may, yet may,  
be.  
Let not men by millions in grief and death  
atone  
For our uncaring and unknowing. Let us all  
Know war, hate war. This is our dead men's  
plea.

4. *One of the jobless warriors of once sees it.*

This place is swell, no getting away from  
that,  
The walls so white and tall and clean.  
The place is so big, I'd be scared to sleep in  
it.  
I guess May and I will be moving soon,  
Whether we like it or not.  
Our three rooms could get in a corner of this,  
And the plaster is falling off in places.  
But they were pretty comfortable.  
I was in one of those French places men-  
tioned on the wall,  
And I was glad to get back.  
Now I'm not so glad.  
I wish I could live in a place I'd like and  
could pay for.  
Those three rooms of ours aren't anything  
fancy at all,  
But they cost too much for me now,  
Who isn't working.  
It's all right for people to have this hall, to  
remember the way by,  
But I wish they'd remember all about it.

RECOGNITION OF NATIONAL COM-  
MUNITY HEALTH CENTER WEEK

**HON. MIKE THOMPSON**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 26, 2002*

Mr. THOMPSON of California. Mr. Speaker, August 18th will mark the kick-off of National Community Health Center (CHC) Week—a time to raise awareness about and pay tribute to the vital services that our community health centers provide to our communities.

Community health centers are local, non-profit health care providers that serve our poorest and our medically underserved rural and urban communities. Often they are the sole source of care for these Americans.

Last year, our community health centers served almost 12 million people in over 3,000

communities nationwide. Almost 5 million were uninsured; 650,000 were migrant and seasonal farmworkers; 5.4 million lived in rural areas; and almost 8 million were people of color. California's community health centers provided service to 15 percent of that population—almost 1.8 million people.

In California's First District, over 100,000 people sought the services of our 18 community health centers on over 300,000 separate occasions. These CHCs play an especially vital role in the rural areas of my district, given the financial and geographic constraints of these populations. Approximately 20 percent of the people served by our CHCs are farmworkers and over 80 percent are either uninsured or on Medicaid. Over 65 percent earn less than the federal poverty level each year. Were it not for the critical services our CHCs provide, many Northern Californians would have gone to the emergency room or they would have gone without any care altogether.

In this way, CHCs are a cost-saver for our health care system—by providing a significantly cheaper alternative to emergency room care for basic treatment—and they improve overall community health. They deliver care to those that would otherwise go without and they target that delivery to their service population. This means that patients receive care when they need it, where they need it and in a way that makes them comfortable and that they understand.

To accommodate different schedules, centers offer daytime, weekend and after-hours care. To accommodate language barriers—in some areas of my district Latino patient loads are as high as 62 percent—most centers offer services in both Spanish and English. And, to accommodate those who cannot travel to receive services, many centers operate mobile units. These “clinics-on-wheels” travel to our schools, migrant camps, community centers and homeless centers.

CHCs provide a truly comprehensive range of care, with basic services including adult and pediatric primary care, obstetrical and gynecological care, immunizations, medical case management, nutrition and dietary instruction and mental health counseling. In addition, some clinics are also able to offer dental care, tobacco cessation programs and HIV care. Outreach and education campaigns are an integral component of their service delivery and all community health centers help those who are eligible to enroll in California's Medicaid and CHIP programs.

I thank the community health centers of Del Norte, Humboldt, Mendocino, Lake, Napa, Sonoma and Solano counties for their dedication to the health and welfare of the residents of the First District of California. As we move towards National Community Health Center week, I urge my colleagues to help raise awareness of the important services that their local CHCs provide. Undoubtedly, many more Americans would lack access to care were it not for the commitment of our nation's community health centers to the service of the poor and medically needy.

INTRODUCING LEGISLATION TO  
REESTABLISH THE U.S. PAROLE  
COMMISSION

**HON. PATSY T. MINK**

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 26, 2002*

Mrs. MINK of Hawaii. Mr. Speaker, Congress voted to abolish the parole system when it passed the Sentencing Reform Act of 1984.

In the rush to close the revolving door for repeat offenders, Congress slammed the door on all non-violent offenders. Today, individuals in prison have little hope. Many serve 5, 10, 20, and even 30-year sentences without the possibility of parole. They have no encouragement to take classes or any other steps to improve themselves.

Congress needs to find a way to help individuals who have paid their debt to society and were given excessive sentences due to mandatory sentencing laws.

I urge my colleagues to consider the case of Terri “Chrissy” Taylor. As a teenager, Chrissy fell prey to the will of a man nearly twice her age. Chrissy became a pawn of this man, and he used her to obtain the chemicals he needed to manufacture methamphetamine. Chrissy never dealt, trafficked, or manufactured drugs. She was convicted of purchasing legal chemicals with the “intention” of using them to manufacture methamphetamine. Under the mandatory minimum sentencing guidelines, the judge had no choice but to give Chrissy a 20-year sentence.

We need to make sure no one is forced to spend years in prison without any hope.

My bill reestablishes the U.S. Parole Commission. The commission will grant parole to reformed prisoners who have earned parole. This is not an open door policy. Rehabilitated prisoners shall be eligible for parole only after serving one third of their term or after serving ten years of a life sentence.

Shortly after sentencing, the commission will give prisoners tentative release dates. The commission can change or revoke the release date based on the prisoners' institutional conduct record. This will be a “hook” to encourage prisoners to rehabilitate themselves. Additionally, judges will have the ability to send criminals to prison without the possibility of parole. This make sure judges have the power to ensure meaningful prison sentences for criminals who commit the most egregious crimes.

I urge my colleagues to cosponsor this bill and give individuals a chance to rehabilitate themselves and rejoin our society. This bill will free the hands of judges who are forced to assign excessive mandatory minimums to individuals whose sentences do not match their crimes.

VETERANS HEALTH CARE  
FUNDING GUARANTEE ACT OF 2002

**HON. CHRISTOPHER H. SMITH**

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 26, 2002*

Mr. SMITH of New Jersey. Mr. Speaker, on behalf of America's 25 million veterans, I am introducing H.R. 5250, the Veterans Health Care Funding Guarantee Act of 2002, along