

On the last evening of Breast Cancer Awareness month, we must not allow the specter of breast cancer to lurk in the darkness. We must recommit ourselves in the upcoming year to arm our Nation's women with the information, resources and support to combat and survive this horrifying disease. Together, I know we can do it.

REASONS FOR SENDING TROOPS INTO BOSNIA NEED TO BE EXAMINED

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

Mr. BROWNBACK. Mr. Speaker, I certainly applaud the gentlewoman from Connecticut [Ms. DELAURO] in her comments, and her fight against cancer and her fight against cancer in this institution as well.

Mr. Speaker, I rise to join my colleagues to ask the President to go to the American people and tell us why we must send troops to Bosnia. It is a simple request, but it is one that must be made, and it is one that we must have the President address to the American people. I would submit, from the calls and comments that I received from the folks that I represent in Kansas, that he has not made his case to the American people. He has not make his case to the Congress. I sit on the Committee on International Relations, and we have heard from several of the Secretaries in this administration, and they fail to put forward a clear plan, a clear reason, a convincing case, a compelling case, for why we should send our young men and women into Bosnia.

Now it seems to me that we have discovered the way to handle these sorts of issues some time ago, and particularly this was exercised during the Persian Gulf war when that President, President Bush, initially said, well, Congress, I need a vote of the Congress, but then there was so much pressure he decided, no, I will get a vote of the Congress, and he took his case to the American people, and he explained why we needed to be in that region of the world, and explained it clearly and concisely, and said here is the reason, here is how we are going to go in, here is what we are going to accomplish, here is how we are going to get out, and it convinced American people and convinced this body. A vote was taken, and a supportive vote was taken, and we conducted that engagement very successfully with a great deal of support of the American people.

Mr. Speaker, we have to do that in this situation in the world, in Bosnia. The vital interests of the American people have to be explained by the Presidency, and it has not been done to date.

Earlier today a colleague of ours, the gentleman from Florida [Mr. WELDON], supplied a certain standard for sending young men and women into combat that I thought was a very good one that we should apply into this case

when the President presents his case as to why we should send our troops in

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He asked the question simply this way: Would I be willing to go? Would I be willing to send my daughter or my son into harm's way for this cause?

It seems to me that is the same standard we should apply in this particular case once we get from the administration what the plan is. Why we are going in? What are the strategic and vital interests? And that has been taken to the countryside, because maybe then we will be convinced that we should be going into Bosnia, we should be protecting that region of the world.

But as of today, we have not seen any compelling case or any real case at all from the administration as to why we should go. Why should we vote or appropriate the funds or allow the use of funds to send our troops into harm's way in that part of the world, when we do not even know what our plan is to go in, to occupy, and how to get out, and what will we declare as victory once we are there.

I have a lot of questions of the administration myself. What is the deployment strategy we are going to have? Let us take that out to the American people. What are the military goals we are going to pursue in this particular area? What is the exit strategy?

Mr. Speaker, I simply ask the President of the United States to do what we have learned over years and years of the history of this country when we engage in military conflicts, when our young men and women can be sent into conflict and some can come home not alive, and that is simply this: Take the case to the American people first. Explain to the American people first what are our strategic and vital interests of why we need to be here. Why do we need to do this? Take it there first. And then, Mr. President, come to this body. Come to the Congress and ask for a vote of Congress, so each of us in our conscience can look and ask ourselves, would I be willing to go? Would I be willing to send my son or daughter into harm's way for this cause? And then let us have a vote. That is how a democracy should operate. That is how we should operate in this particular case.

I call on the administration to act that way. It is in their best interests and the best interests of the American people.

The SPEAKER pro tempore (Mr. Fox of Pennsylvania). Under a previous order of the House, the gentleman from Kansas [Mr. TIAHRT] is recognized for 5 minutes.

[Mr. TIAHRT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

INCREASED MONEY FOR BREAST CANCER RESEARCH NEEDED

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Texas [Ms. JACKSON-LEE] is recognized for 5 minutes.

Ms. JACKSON-LEE. Mr. Speaker, I believe this evening is a very important evening, and I thank the gentlewoman from New York for her leadership on this issue and for organizing this special order to save lives.

I rise tonight to speak about an issue of vital importance to all of the women of this Nation, and this issue happens to be breast cancer. As a woman and a mother, I feel there are few issues as important as the breast cancer epidemic facing our Nation.

As you may know, breast cancer is the most commonly diagnosed cancer in American women today. I recall just a few weeks ago joining in with the Susan G. Coleman Foundation in Houston, TX, where some 8,000 women, many of them survivors, gathered to fight against the epidemic of breast cancer, and to encourage more research in that area.

But the most pointed and the most striking part of it was to see mothers and daughters being able to fraternize and fellowship because of what had occurred in terms of breast cancer detection, to see the survivors, and to see that they were willing to continue the fight.

Currently there are 1.8 million women in this country who have been diagnosed with breast cancer, and 1 million more who have yet to be diagnosed. This year, 182,000 women and 1,000 men will discover they have breast cancer, and 46,000 will die from the disease. Breast cancer costs this country more than \$6 billion each year in medical expenses and lost productivity.

But these statistics cannot possibly capture the heartbreak of this disease which impacts not only the women who are diagnosed, but their husbands, children, and families, and that is what we are talking about today, keeping families together by eliminating this dreaded disease.

We have made some progress in the past few years by bringing the issue to the Nation's attention. Events such as Breast Cancer Awareness Month are crucial to sustaining this attention. There, however, is more to be done. We in Congress must work with the Department of Health and Human Services to implement the national action plan on breast cancer. The plan provides a framework and a plan for activities in three major areas: The delivery of health care, the conduct of research, and the enactment of policy.

It has six major priorities that I think are key to the direction this Congress should take: Identifying strategies to disseminate information about breast cancer and breast health to scientists, consumers, and practitioners using the state-of-the-art technologies available on the information

superhighway; merging all of our talents and all of our strengths to help eliminate, as I said, this dreaded disease; establishing biological resource banks and comprehensive patient data registries to ensure a national resource of information for multiple areas of breast cancer research; ensuring consumer input at all levels in the development of public health and service delivery programs; research studies and educational efforts; involving advocacy groups and women with breast cancer in setting research priorities and patient education.

That was done by the Sisters Network in my district, where one such morning they walked an inner-city neighborhood and began knocking on doors to explain to that community about early detection, and wound up at a church on Sunday morning speaking to the women there about the need for early detection. That is the kind of private help and partnership that should be going on with the Federal Government on this issue.

Expanding the scope and breadth of biomedical and behavioral research activities related to the etiology of breast cancer; making clinical trials more widely available to women who are at risk for breast cancer; decreasing barriers to participation through consumer-clinician dialog; reduction of economic barriers and other strategies; implementing a comprehensive plan to address the needs of individuals carrying breast cancer susceptibility genes; and recommending educational intervention for consumers, health care providers and at-risk patient groups.

Sadly, the death rate for breast cancer has not been reduced in more than 50 years. One out of four women with breast cancer dies within the first 5 years. Forty percent die within 10 years of diagnosis.

Furthermore, the incidence of breast cancer among American women is rising each year. For women ages 30 to 34, the incidence rate tripled between 1973 and 1987. The rate quadrupled for women ages 35 to 39 during the same period.

This Congress has stood well for solving problems. It is important for us to realize here is a problem to be solved. I am particularly concerned about studies which have found that African-American women are twice as likely as white women to have their breast cancer diagnosed at a later stage, after it has already spread to the lymph nodes. A recent study by the Agency for Health Care Policy and Research found that African-American women were significantly more likely than white women to have never had a mammogram, or to have had no mammogram in a 3-year period before development of the symptoms or diagnosis. Mammography was protective against later stage diagnosis in white women, but not in black women. It is clear that more research and testing needs to be done in this area.

We need to help all women, and particularly our inner-city women, but the

most important thing is we need to help families, and breast cancer destroys families.

Mr. Speaker, I thank you for this opportunity. It is so very important for our children, our daughters, our sisters, mothers, and granddaughters, detection, treatment, and prevention. Let us help eliminate this devastating disease.

Mr. Speaker, I rise tonight to speak about an issue of vital importance to the women of this Nation. This issue is breast cancer. As a woman and a mother, I feel that there are few issues as important as the breast cancer epidemic facing our Nation.

As you may know, breast cancer is the most commonly diagnosed cancer in American women today. Currently, there are 1.8 million women in this country who have been diagnosed with breast cancer and 1 million more who have yet to be diagnosed. This year, 182,000 women and 1,000 men will discover that they have breast cancer, and 46,000 will die from the disease. Breast cancer costs this country more than \$6 billion each year in medical expenses and lost productivity.

But these statistics cannot possibly capture the heartbreak of this disease which impacts not only the women who are diagnosed, but their husbands, children, and families.

We have made progress in the past few years by bringing this issue to the Nation's attention. Events such as this month's Breast Cancer Awareness Month, are crucial to sustaining this attention. There is, however, more to be done.

We, in Congress must work with the Department of Health and Human Services to implement the national action plan on breast cancer [NAPBC]. The plan provides a framework and a plan for activities in three major areas: the delivery of health care, the conduct of research, and the enactment of policy. Its six major priorities include:

Identifying strategies to disseminate information about breast cancer and breast health to scientists, consumers, and practitioners using the state-of-the-art technologies available on the information superhighway.

Establishing biological resource banks and comprehensive patient data registries to ensure a national resource of information for multiple areas of breast cancer research.

Ensuring consumer input at all levels in the development of public health and service delivery programs, research studies, and educational efforts. Involving advocacy groups and women with breast cancer in setting research priorities and in patient education.

Expanding the scope and breadth of biomedical and behavioral research activities related to the etiology of breast cancer.

Making clinical trials more widely available to women with breast cancer and women who are at risk for breast cancer. Decreasing barriers to participation through consumer-clinician dialog, reduction of economic barriers, and other strategies.

Implementing a comprehensive plan to address the needs of individuals carrying breast cancer susceptibility genes and recommending educational interventions for consumers, health care providers, and at-risk patient groups.

Sadly, the death rate from breast cancer has not been reduced in more than 50 years. One out of four women with breast cancer dies within the first 5 years; 40 percent die

within 10 years of diagnosis. Furthermore, the incidence of breast cancer among American women is rising each year. For women ages 30 to 34, the incidence rate tripled between 1973 and 1987; the rate quadrupled for women ages 35 to 39 during the same period.

I am particularly concerned about studies which have found that African-American women are twice as likely as white women to have their breast cancer diagnosed at a later stage, after it has already spread to the lymph nodes. A recent study by the Agency for Health Care Policy and Research found that African-American women were significantly more likely than white women to have never had a mammogram or to have had no mammogram in the 3-year period before development of symptoms or diagnosis. Mammography was protective against later stage diagnosis in white women but not in black women. It is clear that more research and testing needs to be done in this area. We also need to increase education and outreach efforts to reach those women who are not getting mammograms and physical exams.

We cannot allow these negative trends in women's health to continue. We owe it to our daughters, sisters, mothers, and grandmothers to do more. Money for research must be increased and must focus on the detection, treatment, and prevention of this devastating disease.

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

[Mr. FORBES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Colorado [Mrs. SCHROEDER] is recognized for 5 minutes.

[Mrs. SCHROEDER addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.]

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

[Mr. STEARNS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.]

MAINTAIN COMMITMENT TO BREAST CANCER RESEARCH

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from New York [Mrs. LOWEY] is recognized for 5 minutes.

Mrs. LOWEY. Mr. Speaker, I want to thank my outstanding colleague, the gentlewoman from New York, CAROLYN MALONEY, for organizing this special order.

Mr. Speaker, over 15 years ago I lost my mother to breast cancer, and tonight I rise not only in honor of my mother, but of all the mothers, all the sisters and daughters, the wives, who have died of breast cancer.