

Eliminate the Clean Coal Program	300
Reduce the fill rate for the Strategic Petroleum Reserve	1,000
End all new Bureau of Water Reclamation water projects	7,400
Eliminate the Dairy Subsidy Program	5,000
Merge the Agricultural Research Service, the Cooperative State Research Service, and the Agricultural Extension Service; cut funding by 50 percent	3,950
Privatize the Government National Mortgage Association (Ginnie Mae)	2,000
Eliminate the Economic Development Administration	1,140
Eliminate non-targeted vocational State funding	3,400
Consolidate the administrative costs of the AFDC, Food Stamps, and Medicaid programs	6,300
Replace new public housing construction with vouchers	610
Increase Medicare safeguard funding by \$540 million over 5 years (net savings)	5,400
Eliminate the Legal Services Corporation	1,900
End postal subsidies to not-for-profit organizations (excluding blind and handicapped individuals)	2,000
Eliminate HUD special-purpose grants	990
Reform vacation and overtime for the Senior Executive Service	540
Eliminate DOD payments for indirect research and development; substitute direct R&D	14,740
Reduce DOE energy technology spending	2,550
Scale back Rural Rental Housing Assistance Program	1,400
Reduce mass transit grants; eliminate operating subsidies	6,250
Eliminate Rural Development Association loans and guarantees	1,380
Eliminate "Impact Aid" to school districts with military bases	3,850
Consolidate Social Services programs	1,000
Reduce NIH funding by 10 percent, concentrating on overhead	4,900
Freeze the number of rental assistance commitments	5,700
Scale back Low Income Home Energy Assistance grants	5,150
Service Contract Act reform	900
Reduce overhead in federally-sponsored university research	1,000
Strengthen and restructure NASA (NPR proposal)	1,500
Eliminate redundant polar satellite programs	250
Streamline HUD	144
Reform prison construction	580
Eliminate Travel, Tourism and Export Promotion Administration	1,002

SPECIAL ORDERS

The SPEAKER pro tempore (Mr. KLUG). Under the Speaker's announced policy of January 4, 1995, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

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

[Mr. FOX of Pennsylvania 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 gen-

tleman from New York [Mr. OWENS] is recognized for 5 minutes.

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

SURGEON GENERAL SHOULD REPRESENT TRADITIONAL AMERICAN VALUES

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

Mr. COBURN. Mr. Speaker, I rise tonight to consider the characteristics that should be present in any individual nominated to the position of Surgeon General of the United States.

As a physician whose entire medical career has dealt with adolescent sexual activity, teenage pregnancy and sexually transmitted disease, I know that we have had exactly the wrong leadership over the past 2 years from Washington.

The underlying assumptions of the safe sex policy are flat wrong and the statistics bear out this fallacy. The predicate of the safe sex policy is that our children cannot and will not act responsibly if given correct and factual information. In other words, our children are incapable of reason.

We have not assumed this predicate in any other area of risk presented to our children. Look at the basis for our educational efforts on alcohol, tobacco, and drugs for example.

The basis for our illogical predicate of safe sex is to rationalize our own lack of self control and sexual promiscuity and our children end up paying the price.

If you have ever been faced with telling the parents of a 19-year-old female that their daughter is dying of AIDS you would truly understand my lack of comprehension with a vision that says to a teenager we know you cannot control yourself and that you are unable to make a reasoned choice so here is a condom.

Mr. Speaker, we currently have a sexually transmitted disease epidemic that is out of control and studies now tell us that over 40 million Americans are carrying some type of viral sexually transmitted disease. In my practice alone, one in three sexually active teenagers is carrying a sexually transmitted disease.

Now what principles should a Surgeon General nominee possess in regard to the present epidemic of sexually transmitted disease and illegitimacy?

I believe that at a minimum the candidate should:

First, be dedicated to the future of our children by supporting their positive attributes and discouraging dangerous behavior. The foundation of a condom clinic is that we have failed to teach the benefits of abstinence and consequently we have given up;

Second, recognize the failure of the present "safe sex" message;

Third, recognize that the growth of the current AIDS epidemic is secondary to a failed public health policy and is directly related to substituting political correctness and its irrationality for a rational public health policy based on medical facts and the current epidemiology of the human immunodeficiency virus;

Fourth, recognize that abortion is a poor alternative for any unwanted pregnancy;

Fifth, recognize that all life is valuable, even when unintended, and that the consequences of abortion, even though legal, seriously impairs us as a society; and

Sixth, recognize that illegitimacy is born out of a society which does not value life and consequently our costs for supporting such a society are a direct result of illicit sexual activity outside of a monogamous married relationship, that is, the traditional American family.

Mr. Speaker, in conclusion I would like to say that it is high time that our Surgeon General represents the traditional American family and the values that the majority of Americans hold and voted for on November 8, 1994.

I plead with our President to nominate such a person.

SUPPORT COMMUNITY POLICING

Mr. STUPAK. Mr. Speaker, tomorrow we will begin the debate on a new Republican crime bill. There will be six bills, and we expect the debate to go for a week to 10 days.

One of the first victims in the new GOP crime bill will be cops on the street, or community policing as we know it.

Cops on the street may be the first victim actually victimized and mugged under the new proposed crime bill. In August 1994, a crime bill was passed by this body. Even though I may not have supported the final committee conference version of the crime bill, I believe that the community policing program is an invaluable tool in the fight against crime.

No one law will stop crime, no one program will stop crime in this country. The revamping of the crime bill that is going to be proposed in the next day on this floor certainly will not stop crime in this country.

In order to stop crime we must all join in the fight against crime. We must all share that responsibility. Police officers cannot do it alone. We must each work in our respective communities and work with the police officers if we are going to have an impact on crime. That is what community policing is all about, law enforcement officers living and working in their beat, in their patrol area, to gain the respect and trust of the citizens they serve.

To gain that trust, respect and confidence, community policing requires the law enforcement to actually live in

the community they serve. Therefore, if there is a crime, the initial complaint is handled by the police officer. The follow-up investigation is handled by the same police officer. That same police officer goes to the prosecutor to secure the warrant, and that is the same police officer that goes with you at the time of a criminal trial, if one takes place.

What community policing does is personalizes crime to build the trust and confidence between the community and a police officer. Your crime will no longer just be your crime, but it will be a crime that will be shared with your police officer. You are working with, you are standing with, you are living with, not only your community, but you are living with the police officer who is there to serve you.

As a police officer for almost 12 years myself, we had an old saying back when I was working the road: "If you want to know what is going on in any community, ask a 12-year-old kid on a bicycle, for they know what is going on in their communities."

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They will not tell the police officers what is going on until there is that confidence, that trust and that respect.

In the last crime bill, the community policing program, commonly referred to as Clinton Cops, was a program that is being used throughout this nation. It has only been in effect for the last 3 or 4 months. But the forerunner to this Clinton Cops program was back in 1978 and 1979, in the Department of Justice, a pilot program which was put forth in northern Michigan.

Northern Michigan, my district, is a sparsely populated area in the north end of Michigan, and three rural, sparsely-populated townships were put together to form a community policing program.

The program was a smashing success, with over 70 percent of all the reported crimes being solved.

Unsolved crimes from years past were cleaned up by the community police officer. In fact, in this case, it was a Michigan State police trooper, and he was referred to as the resident trooper.

It was the first community policing program in Michigan. Community policing is now currently at work in communities as rural as northern Michigan with our three townships or in the highly populated cities such as Houston. Community policing works because police officers live in the community and near the neighbors which they police.

These police with the faith and confidence and trust of the people they serve, their constituents.

It is one program that is highly successful. To dismantle the President's community police program would be a crime in and of itself. It will be dismantled if the votes hold up as they have in recent days, not because there is waste in the program. It will be dismantled not because it does not work,

because we all know it does. The reason why it will be dismantled will be purely for political reasons.

In a crime bill, we need a combination of police, prevention and prisons. A balance of these three principles will be most successful in fighting crime.

We must leave community policing intact. We must leave the Clinton Cops program alone. It may only have been in existence for 3 or 4 months, but in city after city, in rural area throughout this country, it has worked.

APPOINT A SURGEON GENERAL WHO SUPPORTS ABSTINENCE

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

Mr. WELDON of Florida. Mr. Speaker, I rise to first commend my colleague, the gentleman from Oklahoma [Mr. COBURN], on his, I believe, very timely and very cogent comments.

I ran for the U.S. Congress not only because I thought our Nation needed things like the line-item veto, passed tonight, as well as the balanced budget amendment, some real welfare reform, but I also ran because I was concerned about the moral and spiritual direction of our Nation.

I believe that our Nation because the great nation that it is not only because our Founders worked hard but also because they were a disciplined and virtuous people who planted the seeds that grew into the great nation that we are today.

I, too, am a physician, and I began to become concerned about the future of our Nation when working in inner-city obstetrics clinics. I began to see many, many young people coming in with not only unwanted pregnancies but also venereal diseases that in many cases were incurable and that were going to lead to permanent scarring that would affect their future, their future ability to have a family.

And then after I finished my training and my time in the military, I went into practice in Florida. I have the opportunity to work with a very skilled and knowledgeable infectious disease specialist, Dr. Tim Poyer, who was the only physician in our part of the county seeing AIDS patients at the time. And I spent a good part of the last 7 years taking care of AIDS patients.

I have had the opportunity to treat some of the most terrible, devastating complications of AIDS that I could ever imagine seeking. I have had the opportunity to counsel grieving families. I have had the tragic opportunity to have to pronounce many of these young people dead, to fill out their death certificates. And I have to say that we have a terrible problem in our Nation today with AIDS, and that it is very wrong for our leaders here in Washington to propose that the distributions of condoms is a solution to this problem. The failure rate of these

devices in preventing pregnancy in various studies ranges from 5 to 25 percent.

Mr. Speaker, a woman can only get pregnant 1 day out of the month, and yet the failure rate preventing pregnancy is that high. The failure rate for preventing AIDS is much, much higher. Nobody would risk their life to anything that has a failure rate that high.

There are many Americans who are afraid to get on an airplane out of a fear of a plane crash, when the failure rate of an airplane is something in the range of one in a million, yet the failure of a condom to prevent AIDS is much, much higher than that, probably in the order of 5 percent or more. Yet our leaders in Washington and now our new nominee for Surgeon General is proposing this device as the solution to our problem.

The problem, Mr. Speaker, is the morality that was presented to America's youth in the 1960's, that sex outside of marriage is safe and acceptable, is wrong. It is leading to unprecedented problems of terrible disease amongst our Nation, amongst our young people. And it is yielding terrible problems of infertility in our Nation.

Mr. Speaker, we need a nominee for Surgeon General who will tell the young people of America the truth, who will expose the lie of the safe sex proselytizers who would have our young people believe that a condom is the solution to the problem.

The solution to the problem is abstinence, Mr. Speaker, and I would urge our President to appoint a Surgeon General who supports that philosophy.

COMMUNITY POLICING WORKS—THE KEY TO FIGHTING CRIME

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

Mr. FILNER. Mr. Speaker, I rise today to talk about one of the strongest weapons we have in fighting crime, and that is community-oriented policing.

I join my colleague, the gentleman from Michigan [Mr. STUPAK], who has taken a strong lead in this, and other colleagues who will follow me, on what we believe to be the direction that our communities ought to be taking with the support of our Congress.

If we truly want to take back our streets and improve the quality of life in our cities, police officers cannot do it alone. Local residents cannot do it alone. They must work together. That is exactly what community policing does. It allows police officers to work together with local community residents to fight crime.

Now certain Members of Congress want to eliminate this critical approach to crime prevention. And I strongly oppose any efforts to cut community policing programs, and I ask my colleagues to take a good, hard