

assigned additional duty as a military social aide at the White House. Captain Prevatte was Executive Officer of Navy Recruiting District, Houston, TX, from April 1984 to December 1985.

In January 1986, Captain Prevatte returned to Washington, DC for assignment as Head, Fleet Command Support Branch, Naval Military Personnel Command [NMPC]. In April 1987, she became the Deputy Director, Restricted Line/Staff Corps Officer Distribution and Special Placement Division, NMPC, and in February 1989, she became Administrative Assistant/Aide to the Commander, NMPC. Captain Prevatte served as Commanding Officer, Personnel Support Activity, Pensacola, FL, from December 1989 through August 1991. She reported to the Bureau of Naval Personnel in September 1991, where she served as Director, Allocation Division (Pers-45) prior to her assignment to the staff of the Assistant Secretary of the Navy (Manpower and Reserve Affairs) as Executive Director, Standing Committee on Military and Civilian Women in the Department of the Navy in April 1993. Additionally, in June 1993, she assumed duties as Staff Director (Manpower) in the Office of the Deputy Assistant Secretary of the Navy (Manpower).

In March 1994, Captain Prevatte was selected to serve as Executive Assistant and Naval Aide to the Assistant Secretary of the Navy (Manpower and Reserve Affairs). She transferred to the Office of the Secretary of Defense in October 1994, where she served as Military Assistant to the Assistant Secretary of Defense (Force Management Policy) until her retirement.

A proven Navy subspecialist in Manpower, Personnel and Training Analysis, Captain Prevatte holds a bachelor of science degree from Middle Tennessee State University and a master of science degree from Texas A&M University. She was named an Outstanding Young Woman of the Year in 1982. Her military awards include the Legion of Merit, Defense Meritorious Service Medal, Navy Meritorious Service Medal with three gold stars, Navy Commendation Medal, and Navy Achievement Medal with one gold star.

Our Nation, the U.S. Navy, and her parents, Master Sergeant (Retired) and Mrs. James L. Prevatte, can truly be proud of the captain's many accomplishments. A woman of such extraordinary talent and integrity is rare indeed. While her honorable service will be genuinely missed in the Department of Defense, it gives me great pleasure to recognize Captain Prevatte before my colleagues and wish her all of our best wishes in her well deserved retirement.

HONORING NICHOLAS KALIKOW

• Mr. D'AMATO. Mr. President, I rise today to offer congratulations to a young man from New York City who is being honored this coming weekend in Washington, DC. This fine young man,

Nicholas Kalikow, will receive the coveted silver medal award in the annual Scholastic Art and Writing Awards given by the Alliance for Young Artists and Writers. The ceremony will be held at the Corcoran Gallery of Art on Saturday, June 17, 1995.

I have had the privilege of knowing the parents of Nicholas Kalikow, Peter and Mary Kalikow, for many years. Peter is an accomplished businessman, philanthropist, and public servant. Recently, the Governor of New York appointed him to the board of the Port Authority of New York and New Jersey. Mary, in addition to being a caring mother, is deeply involved in the education of the learning disabled, serving on several board's dealing with this critical matter.

I have watched Nicholas grow to his early manhood and have been impressed with his talent and character. In addition to his other fine traits, he is a fine gifted writer, as evidenced by this award.

The Scholastic Art and Writing Awards, administered by the Alliance for Young Artists and Writers, Inc., has recognized young artists and writers for their achievements in the arts since 1923. It is the largest and longest running program of its kind in the Nation. The awards program attracts entries from all 50 States. Some of our country's most important artists and writers, including Truman Capote and Joyce Carol Oates, received their first recognition from this program.

Nicholas will receive the silver medal in the short story category. Many entries were received in this category and I am proud to say the Nicholas' story was selected as a winner.

Mr. President, I want to congratulate Nicholas, his parents, sister Kathryn, his grandmother Juliet, and her husband Steve Levene, all of whom will be present at the awards ceremony. I also want to congratulate the sponsors of this event, many of whom are New York based corporations and foundations, who recognize the achievements of our Nation's youth.●

ALTERNATIVE MEDICINE

• Mr. HARKIN. Mr. President, on March 2, I was honored to participate in a press conference on a report to the National Institutes of Health on Alternative Medicine: Expanding Medical Horizons. The report, which was prepared by an editorial committee chaired by Dr. Brian Berman and Dr. David Larson, represented more than two years of work by more than two hundred practitioners of alternative medicine. It is my sincere hope that the NIH carefully read this document and use some of its recommendations as the basis for a long-term strategic plan for the NIH's Office of Alternative Medicine (OAM).

For my colleagues' review, I am attaching the opening remarks of Dr. James Gordon. Dr. Gordon, a Clinical Professor in the Departments of Psy-

chiatry and Family Medicine at Georgetown Medical School as well as the Chair of the Advisory Council of the Office of Alternative Medicine, presents an excellent overview of various kinds of alternative therapies now being used by America's health consumers along with a cogent justification for the expansion of NIH-sponsored investigations into those therapies. I have also included the short introductory remarks I made at the March 2 press conference. I ask that these remarks be printed in the RECORD.

The remarks follow:

ALTERNATIVE MEDICINE: A REPORT TO THE NATIONAL INSTITUTES OF HEALTH

[Statement by James S. Gordon, M.D.]

Welcome to the press conference on the Report to the National Institutes of Health on Alternative Medicine. This is a very happy and fulfilling occasion for us. For the last two and a half years the efforts and good will of more than two hundred people have gone into creating this Report.

I'm James S. Gordon, M.D.—a psychiatrist who uses a number of alternative therapeutic approaches in his medical practice. I'm a Clinical Professor in the Departments of Psychiatry and Family Medicine at Georgetown Medical School; Director of the Center for Mind-Body Medicine here in Washington; and Co-Chair of the section on Mind-Body Interventions of this report. I'm going to be the moderator for today as we discuss this Report and its origins, and present it to the National Institutes of Health.

I'll begin with an overview of the field and set the context for the development of this Report. I'll then introduce Senator Tom Harkin. Afterwards Brian Berman, M.D. and David Larson, M.D.—the Chair and Co-Chair of the Editorial Board of this Report—will speak briefly on the contents of this Report. Drs. Berman and Larson will present the Report to Alan Trachtenberg, M.D., the Acting Director of the Office of Alternative Medicine. Then, I'll introduce the Editorial Board and several other contributing writers, and we'll be available to discuss the Report and answer your questions on it.

I'd like to begin by giving you some background on the Report and putting it in the context of the field of alternative medicine. Let's start with the name "alternative medicine." Alternative comes from the word "other," and, indeed, this is the other medicine or, more accurately, the other medicines—the ones that are not taught in our medical schools or ordinarily practiced in our hospitals or clinics.

This use of this term is of recent origin. Over the last two decades, it is one of several that has been created to apply to new developments in medicine. Others include "humanistic medicine;" "holistic" or "wholistic" medicine; "mind-body medicine;" and "complementary medicine." Holistic medicine refers to an understanding of the whole person in his or her total environment and the wide range of both conventional and alternative treatments that comprise the whole or comprehensive approach. Humanistic medicine emphasizes the interaction between those who come for help and those who offer it. Mind-body medicine suggests the importance of the two-way connection between mind and body and their integrity. Complementary medicine—the term of choice in Europe—implies a mutually enhancing effect between conventional medicine and other approaches.

Alternative medicine does indeed emphasize other practices. It calls attention deliberately to what is not, or not yet, conventional. It is a way for medicine and our society to observe and evaluate what is new or unfamiliar—to hold it at arm's length while deciding whether and how it may be used and integrated into our larger practice.

The emphasis on alternative medicine emerges now as part of the ongoing development of our medical system and practice. Thirty-five years ago the great microbiologist Rene Dubos suggested that we had begun to approach the limits of modern biomedicine, the surgical and pharmacological treatment of discrete disease entities. We still appreciate the great power of this approach in curing infections and treating acute, life-threatening illnesses, but we have also begun to see how difficult it is to use these methods to treat a variety of kinds of chronic illnesses. And we have begun to become painfully aware of the side effects and overuse of once promising therapies. During these last two decades both patients and physicians have also become increasingly impatient with the kind of care that they have been receiving and offering. They feel a lack of participation and partnership. According to polls taken by Gallup and the A.M.A. itself, there is a sense of alienation on both sides.

During this time, too, the world has become smaller and more intimate. We've become increasingly aware of the healing traditions of other cultures, and of approaches that have been ignored, neglected, marginalized, or scorned within our own culture. Finally, all of us have become acutely sensitive to the enormous financial drain that health care and our medical system are putting on our government and all of us. Health care required four percent of the Gross National Product when Dubos was writing in the 1950's. Now, it is almost fifteen percent. These forces have set the stage for a new approach and new techniques that have propelled alternative medicine to the front of many of our minds, and to a significant place in the on-going health care debate.

With an appreciation and experience of the potential of some of these new therapies, a sensitivity to the wisdom of traditional approaches, and a weather eye on financial realities, Senator Tom Harkin drew up legislation to create the Office of Alternative Medicine three and a half years ago. He and the Health Appropriations Sub-Committee gave that Office a mandate to study these alternative approaches; to find out which ones were most useful; and to make the information widely available.

This Report is one of the Office's first and most significant projects. It had its genesis in Chantilly, Virginia in 1992, when more than two hundred people—among them some of the most experienced and best known researchers and clinicians—gathered to begin to assess the state of the art. This effort was requested and supported, then and now, by the Office of the Director of NIH and by the Principal Deputy Directors—initially, Dr. Jay Moskowitz and, more recently, Dr. Ruth Kirschstein.

At that conference and since, participants divided into groups to work on the thirteen major sections that are covered in this Report. Later, as members of the smaller Editorial Board (most of whom are here today), they began to shape its overall structure, content and tone. Each of these sections are worked on by its own writers and editors. Then, the Editorial Board re-evaluated, discussed, debated, and re-wrote each section.

Each section has its different emphasis and tone. The one on mind-body medicine highlights the range of what we know about the

mind's capacity to affect the body—the power of hypnosis, meditation, biofeedback and visual imagery. It provides thoroughgoing documentation of their efficacy and suggests now easily these approaches can and should be integrated into every aspect of medical care. The section on bioelectromagnetism emphasizes the theoretical promise of this field and its possible role in explaining the underlying mechanisms of many alternative approaches, including acupuncture, homeopathy and laying on of hands. The section on pharmacological and biological therapeutics, by contrast, records the vital importance of studying therapies that are already widely used for such life-threatening conditions as cancer and AIDS—but have never received any critical attention.

In virtually all of the sections there are also common themes. To begin with we see the sometimes surprising number of authoritative articles. There are literally thousands of articles in peer reviewed journals on biofeedback, hypnosis and visualization. And there are also hundreds on herbal therapies, acupuncture, and homeopathy. We see as we read through the Report how deep the historical use of these practices is. Foods like ginger, onions and garlic which we are just beginning to validate scientifically have been used therapeutically for thousands of years. The same is true of spinal manipulation, herbal and mind-body therapies. We learn also how widely used these approaches are. In 1990, a third of the people in this country were using alternative medicines. It is likely that the number now is far higher. Worldwide, according to the World Health Organization, 80% of all people use these "alternatives" as their primary care.

We see, too, how cost effective these approaches can be. To cite several examples: (1) A study done at the Harvard Community Health Plan showed that six weeks of behavioral medicine teaching, including meditation, enabled patients to record savings of \$171.00 each in the six months following the treatment. (2) A program of diet, mind-body therapies, yoga, exercise and group support, designed by Dean Ornish and his colleagues of the Preventive Medicine Research Institute, has been shown to reverse coronary heart disease in patients who would otherwise have had coronary by-pass surgery. This program costs approximately \$5,000 for its one year—in contrast to the \$40,000–\$60,000 for each by-pass surgery. (3) At the University of Miami, Tiffany Field's use of several minutes of gentle massage several times a day to treat low birth weight babies not only helped the babies to gain 47 percent more weight per day in the hospital, but enabled them to leave the hospital six days sooner, at a savings of \$3,000 per child.

Taken as a whole then, this Report is a unique compilation of authoritative information. It is also a remarkable bibliographical resource for those who wish to learn more—to prepare them to undertake research, select treatments or participate in their own care. Finally, it is a guidebook for the Office of Alternative Medicine—a map to help the Office to develop new directions in research and to undertake specific studies. It suggests new research methodologies and new programs of research training which need to be developed. It offers suggestions for new ways to collect and disseminate information; improve peer review; and enlarge and expand collaboration between conventional and non-conventional researchers and practitioners. It explores possible new links between the Office of Alternative Medicine and the rest of NIH, and between the OAM and the general public.

In the Report, there are a number of creative tensions—tensions that reflect the diversity of the medical enterprise and our

own experience as people trained in conventional science and medicine, and interested in alternative medicine. I want to acknowledge these tensions because they give life and excitement to the Report.

Among them are tensions between conventional practitioners and researchers who have been outside the mainstream; between those applying conventional research methodologies to unconventional therapeutic methods and those searching for new, perhaps more appropriate, methodologies; between respect for the integrity of traditional healing systems and a need to study their effectiveness in a way that conventionally trained scientists and clinicians can appreciate; between the requirements of scientific precision and the need for easy, popular accessibility; between the hope for encyclopedic inclusion and the need for careful selection; between the demands of activists desperate for answers to desperate public health problems—among them AIDS, cancer, cardiovascular disease—and the requirements of rigorous, definitive research; between the huge number of tasks to be accomplished and the, so far, very small amounts of money (\$5 million dollars out of NIH's total budget of \$10 billion dollars) available to these tasks.

I hope and believe we are on our way to resolving these tensions in favor of our own greater understanding and the greater understanding and progress of the field as a whole.

This Report is a compilation of much of the best that is known and thought about alternative medicine. It is comprehensive and authoritative. It has many and varied recommendations for future directions for NIH. And, there is more as well.

All of us who have worked on it see this Report as an arrow towards the future as well as a progress report and a summing up. In the end, alternative medicine becomes most important as it helps, in the words of the subtitle of our Report, "To expand medical horizons." Our goal is then to create a more comprehensive, responsive, humane and cost-effective system and practice of medicine and health care.

We are concerned with establishing a way of understanding and practicing which balances the power of definitive treatment with the authority of self care; which is both open to and critical about new approaches; which respects and enjoys the interplay of modern science and perennial wisdom.

Finally, then, this is a Report which goes beyond the opposition of either/or, conventional or alternative. It is a Report based on the concept of both/and, it is, we hope, a step on the way to a healing synthesis and a new synthesis of health care and medical practice—one which includes and is greater and more valuable than either its conventional or alternative halves.

STATEMENT OF SENATOR HARKIN ALTERNATIVE MEDICINE PRESS CONFERENCE

I want to commend Dr. Brian Berman and Dr. David Larson for their leadership in preparation of this report, Alternative Medicine: Expanding Medical Horizons, as well as the other members of the Editorial Committee present here today.

In October 1991, Congress provided \$2 million to establish the Office of Alternative Medicine at the National Institutes of Health for two main reasons. First, to seriously investigate the potential of alternative medical practices; and second, to break down the bias in medical research against review of worthy treatments not now in the mainstream of conventional medicine.

Before this Office's creation, the NIH and the medical establishment failed to accept the importance of alternative medicine. But the American people had already voted their

support for alternative therapies with their pocketbooks.

In 1990 alone, the New England Journal of Medicine found that Americans spent nearly \$14 billion on alternative therapies, and made more visits to alternative practitioners than they did to primary care doctors.

American consumers are turning to these therapies because they're a less expensive and more prevention-based alternative to conventional treatments. And they're investing their dollars and their hopes without hard scientific evidence of the effectiveness—or ineffectiveness—of these alternative treatments. The American people have a right to know whether these alternative treatments are effective! That's why the Office of Alternative Medicine was created in the first place * * * to begin evaluating the efficacy, safety and potential cost effectiveness of alternative medical therapies. This is a health issue and a consumer issue, and the American people deserve nothing less!

Admittedly, since its creation three years ago, the Office has gotten off to a slow start. That's due to the continued skepticism of the medical establishment as well as the office's own mismanagement and lack of planning. It's for this reason that I'm so encouraged by the document being presented today to the NIH. This report, which represents more than 2 years of work by more than 200 practitioners and researchers of alternative medicine, should serve as the basis for a long-term strategic plan for the Office of Alternative Medicine.

It's my sincere hope that the NIH will carefully read this document and use some of its recommendations to put the office back on track, to begin operating efficiently and expand its investigations of alternative therapies.●

WHITE HOUSE CONFERENCE ON SMALL BUSINESS

● Mr. BUMPERS. Mr. President, I rise today to pay tribute to the just concluded 1995 White House Conference on Small Business, and especially to 18 of my fellow Arkansans who traveled a great distance at personal expense to participate in this conference. These delegates took time away from their work and their families to represent the Arkansas business community and are to be commended for their dedication and sacrifice. The Arkansas business owners who attended the conference as national delegates and their respective businesses are as follows:

J. Baker, Baker Car and Truck Rental, Inc., Little Rock; Bob Boyd, Boyd Music and Pro Sound, Inc., Little Rock; Greg Brown, Union Bancshares of Benton, Inc., Benton; Mel Coleman, North Arkansas Electric Cooperative, Salem; Dexter Doyne, Doyne Construction Company, Inc., North Little Rock; Bill Ferren, B-B-F Oil Company, Inc., Pine Bluff; Michael Jackson, Jackson Development Group, Brinkley; Thomas Jacoway, Artran, Inc., Springdale; Phyllis Kinnaman, P.K. Interiors, Little Rock; Charles Mazander, Mazander Engineered Equipment, Inc., Little Rock; Bruce McFadden, Improved Construction Methods, Inc., Jacksonville; Ron McFarlane, Process 1500, Inc., Little Rock; Mary Rebick, Copy Systems, Little Rock; Mary Gay Shipley, That Bookstore, Blytheville; Walter Thayer,

Walter Thayer & Associates, Inc., Little Rock; Daniel Warmack, Warmack and Company, Fort Smith; and George White, Delta Vending Enterprises, West Helena.

Mr. President, the 1995 White House Conference was created by a Congress and President who care about small business—specifically, a Democratic Congress and a Republican President. In 1993, small business in this country was responsible for 50 percent of the gross domestic product, while employing 54 percent of the American work force. This conference was attended by approximately 2,500 delegates from around the country to discuss the most pressing issues facing small businesses.

Although political circumstances have changed, the President and Congress still deeply care about the views and interests of small business owners. Recently, President Clinton signed into law a reauthorization of the Paperwork Reduction Act of 1992, a law that was originally proposed by the first White House Conference on Small Business during the Carter administration in 1980.

Recognizing the important role that the Small Business Administration plays in promoting the entrepreneurial spirit, Congress has said no to proposals to abolish that agency. I am proud to say that last year SBA was directly responsible for stimulating \$10.6 billion in small business growth while spending only \$232 million of American taxpayer money—an amount, I might add, less than the taxes paid by three companies that started with SBA loans—Intel, Apple, and Federal Express.

It's time to listen again to the backbone of our country. In the weeks to come, the White House Conference delegates will be sending their suggestions for the future of small business to both the President and the Congress. On behalf of the 18 delegates from my home state, I urge this Congress to take a close look at their suggestions and debate the legislative agenda set forth by the 1995 White House Conference on Small Business.●

SEVENTH ANNUAL CHINESE HERITAGE FESTIVAL

● Mr. BRADLEY. Mr. President, our country is a remarkable mosaic—a mixture of races, languages, ethnicities and religions—that grows increasingly diverse with each passing year. Nowhere is this incredible diversity more evident than in the State of New Jersey. In New Jersey, schoolchildren come from families that speak 120 different languages at home. These different languages are used in over 1.4 million homes in my State. I have always believed that one of the United States greatest strengths is the diversity of the people that make up its citizenry and I am proud to call the attention of my colleagues to an event in New Jersey that celebrates the importance of the diversity that is a part of America's collective heritage.

On June 4, 1995, the Garden State Arts Center in Holmdel, New Jersey began its 1995 Spring Heritage Festival Series. This Heritage Festival program salutes many of the different ethnic communities that contribute so greatly to New Jersey's diverse makeup. Highlighting old country customs and culture, the festival programs are an opportunity to express pride in the ethnic backgrounds that are a part of our collective heritage. Additionally, the Spring Heritage Festivals will contribute proceeds from their programs to the Garden State Arts Center's Cultural Center Fund which presents theater productions free-of-charge to New Jersey's schoolchildren, seniors and other deserving residents. The Heritage Festival thus not only pays tribute to the cultural influences from our past, it also makes a significant contribution to our present day cultural activities.

On Saturday, June 17, 1995, the Heritage Festival Series will celebrate the 7th Annual Chinese Heritage Festival. Cochaired by Margaret Ko Ma of Murray Hill and Chia Wang Whitehouse of Freehold, this year's event promises to be a grand celebration alive with colorful costumes, traditional foods, ethnic arts and crafts and talented entertainers of Chinese descent. The day-long event will feature a martial arts display by the Shaolin Hung School, as well as traditional flower, lion and drum dancers and music from China will highlight the artistic program. Mall activities will also include an arts and crafts exhibit, vendors selling Chinese food and a fine arts exhibit will feature both traditional and modern Chinese art.

On behalf of all New Jerseyans of Chinese descent, I offer my congratulations on the 7th anniversary of the Chinese Heritage Festival.●

SKI AREA FEE STRUCTURE REFORM

● Mr. LEAHY. Mr. President, I rise to ask my colleagues to take a close look at a bill which I cosponsored with Senator MURKOWSKI and others. The ski area fee system for Forest Service special use permits needs reform and S. 907 is a good way to get this done.

Skiing is one of the best uses that we have today on our national forests. The ski industry brings millions of people to the mountains to enjoy fresh air, scenery, and the mountain environment. Few other national forest activities are able to host such intense public use with relatively minimal impact.

In fact, many resorts have taken extra steps to protect and enhance the environmental resources with trail and resort designs that include modifications for wildlife use, special sensitivities to wetlands, base villages that minimize the need for cars, and plantings that provide forage for birds. Over the years ski resorts have become adept at reducing water pollution, erosion, and snowmaking. There are still