

believe this stigma is the root of ignorance. Mental illness is not due to some sinful behavior. The stigma has kept many individuals from seeking help, and it has prevented health professionals from providing needed services. It is my honest belief that if health plans provided parity in their mental health coverage the stigma would be instantaneously removed. No longer would patients be too embarrassed to seek help. And, no longer would providers be forced to turn patients away, and discriminate between illnesses.

People with mental illness, severe and otherwise, are just as sick as the next person who is suffering from cancer. The idea of not being able to think and reason for yourself is as disabled as one can be. The only real and important difference between physical illnesses such as cancer, or heart disease is that mental illness is a disease of the brain, and it appears to be more complicated. This disease can manifest itself in our centers of thought, reason, and emotion and leave us totally dependent on someone to think for us.

Individuals in need of health benefits for physical disabilities has come a long way. But mental health benefits are not at the same level, even though they serve an important population. These individuals are desperately in need of insurance reform. According to the American Psychological Association, overall national mental health costs are small—only 7 percent of the total health care spending. Insurance carriers have traditionally limited mental health benefits out of fear that parity of coverage would attract poor risks, increase their costs, and put them at a competitive disadvantage.

During the 103d Congress I actively worked to pass universal health coverage and was pleased that the disparity of mental health benefits was brought to the forefront of that debate. Now in the 104th Congress, we have a real opportunity to do something about this disparity.

I urge the conferees to allow the mental health community a chance to be on equal footing with other illnesses that are receiving benefits.

#### ADMINISTRATION UNVEILS NATIONAL DRUG CONTROL STRATEGY

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

Mr. MICA. Mr. Speaker, I come to the House floor tonight to talk about President Clinton and this administration's supposedly new policy relating to national drug control strategy.

Yesterday the President was in my State, and I was somewhat excited about the possibility of his coming to Florida and announcing a new drug strategy. Unfortunately, my hopes for some new approach to this tremendous problem facing our country, particu-

larly under his stewardship, were immediately dashed when I first learned that the President's major activities were several Democratic fund-raising events in the Miami area and I guess a golf game and some other activities. I really thought he was going to come forth with a new strategy, but that was not the case.

Then I got my hopes up until I got a copy of the national drug control strategy that was just released by the administration. I had hoped that there would be some solid solutions to some of the problems, and I find that actually it is just sort of repackaging in sort of a slick cover some of the same approaches that have proven so ineffective during the past 3½ years.

What is particularly disturbing is this whole pattern from this administration relating to drug abuse, substance abuse, and it started right after the President came into office when he first of all dismantled the drug czar's office and fired the bulk of the staff. Most of the reductions in the Executive Office of the White House, the downsizing, in fact, took place in the drug czar's office. Then the President ended drug testing for White House and executive staff members.

Then the President in fact appointed Joycelyn Elders our chief health officer for the Nation, and she adopted a policy of, instead of "Just say no," her theme was "Just say maybe." Maybe we should allow legalization. Maybe we should allow children to use drugs.

Then we saw the reversal of the policy in the Andean region, where we shared information with countries that were trying to stop drug trafficking. We denied radar and intelligence sharing through a distorted policy of this administration.

Then we saw the dismantling of interdiction for 2 years under the Democrat control of the House. We saw them take apart a program which had so many successes in the 1980's and early 1990's of stopping the flow of narcotics into this country.

Then we saw drug treatment as the major emphasis in the drug war. I heard my colleague from Indiana, Mr. SOUDER, say yesterday that drug treatment as the major emphasis in a drug war is like treating only the wounded in a conflict. We see the results of it even in the President's own strategy.

Adolescent drug use. If we look at this chart, in 1992 we see it going down. In 1992, when this administration took office, we see a dramatic, sharp increase. Every one of these chart figures streaming off the chart there in marijuana, LSD, inhalants, stimulants.

With marijuana, marijuana use increase has dramatically leaped forward in the past 3½ years. In fact, there has been a 50-percent increase in marijuana use among our adolescents for each of the last 3 years.

So we see really a lack of leadership, we see a lack of initiative, ideas, and we see packaged again the same policy. We are not even at the level of inter-

diction funding of the last year of the Bush administration.

I look forward to working with the new drug czar, General McCaffrey, and the Members of Congress to turn this around. But this is another policy for disaster. In fact, we must start getting serious about narcotics control and we must take a new, positive direction, not the path so unsuccessful in the past.

#### IN MEMORY OF DONNIE MINTZ

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

Mr. FROST. Mr. Speaker, my friend Donnie Mintz was buried yesterday in New Orleans—the victim of a heart attack that took his life too soon at age 53.

Donnie led a remarkable life and will be missed by many.

Donnie and I met 38 years ago in 1958 when we were teenagers attending a leadership training institute of the National Federation of Temple Youth in Kresgeville, PA. Two southern boys at a camp of highly talented teenagers, mostly from the Northeast and Midwest, Donnie and I became lifelong friends.

Our lives intersected many times in the years that followed. Donnie was elected regional president of the Southern Federation of Temple Youth [SOFTY], and I was elected vice-president of the Texas-Oklahoma Federation of Temple Youth [TOFTY]. Later, Donnie was elected national president of the temple youth movement, and I was elected national treasurer.

Donnie attended Columbia University in New York where he became a Fulbright scholar and ultimately returned to Louisiana to earn a law degree from Tulane. While he attended Tulane, Donnie helped establish the annual direction speakers series and later was named to the Tulane Leadership Hall of Fame.

Though at different schools, we were members of the same college fraternity, Zeta Beta Tau, and served in the same Army Reserve program [JAG] but in different cities. During those years, we would see each other at Army Reserve summer camps.

We shared a love for politics and talked about it often. I always thought Donnie Mintz would be elected to public office long before I would be.

But Donnie's life took a different path. He built a successful law firm in New Orleans, was active in a variety of civic causes and served numerous Jewish organizations on both a local and national level. Donnie served as chairman of the Anti-Defamation League's national advisory board. He also was one of a few Jewish lay leaders chosen to meet with Saudi Arabia royalty when Israel's contacts with that country were minimal. He was granted a papal audience.

In addition, Donnie served as chairman of the Louisiana Health Care Authority, the Board of Commissioners

for the Port of New Orleans, the Downtown Development District and the United Way. He was also president of the Metropolitan Area Committee, Kingsley House, Touro Synagogue and the Jewish Federation of Greater New Orleans. Donnie also served on the board of directors for the New Orleans Symphony.

His passion was for the city of New Orleans. Though a decided underdog, he ran two very competitive campaigns for mayor falling just short each time. After his attempts for mayor, Donnie returned to his law practice and pursued strengthening black-Jewish relations.

He was extremely interested in the subject because as Tulane Law School Dean John Kramer said, "he felt the bridges ought to be there. He felt the strong minority communities were the Jewish and the black communities, and the last thing that should happen was that they should be turned against each other. He never gave up."

He and his wife Susan raised two talented children, Michelle and Arthur, and always had time for me and my family whenever we visited New Orleans. And when my career took me to the House of Representatives, he hosted receptions in his home, introducing me to his friends.

My most vivid memory of Donnie comes from that leadership institute in the summer of 1958. On one of the first days of the program, we took some time off to play softball. When Donnie came to the plate for the first time, he laid down a perfect bunt and raced to first base. As he reached the bag, he stumbled, landed hard and suffered a concussion. Near the end of the 2-week institute, we played softball again. Donnie now recovered from a serious injury, came back up to bat. On the first pitch, he laid down a bunt identical to the one on the play when he had been hurt, and beat the throw to first. Donnie was not intimidated by adversity. He never backed off from a challenge and he lived his life at full speed.

Donnie Mintz touched the lives of many people. His city, his State and his Nation are better because of him. He will be missed.

#### IN MEMORY OF DONALD MINTZ

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

Mr. LIVINGSTON. Mr. Speaker, my home city of New Orleans lost a great leader and a good man on Sunday when my friend Donald Mintz died in his sleep. Donald was a civic activist who worked unceasingly to improve living conditions in his city and a national Jewish lay leader who strove mightily to help those of different races and faiths understand and work better with each other.

In New Orleans, Donald had been chairman of the Dock Board, the

Downtown Development District and the United Way, and president of the metropolitan Area Committee, Kingsley House, Touro Synagogue and the Jewish Federation of Greater New Orleans, and had served on the board of numerous other civic organizations as well—always with an energy, a flair, a seriousness and a wisdom which helped each organization reach unprecedented achievements. He loved New Orleans, and he sacrificed greatly to serve her.

All of us who knew him, and the all very, very many whose lives were bettered by his efforts, have been enriched by his life and are sorry for his passing.

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#### THE QUINN FAMILY: ANOTHER TRAGEDY CAUSED BY ICWA

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio [Ms. PRYCE] is recognized for 5 minutes.

Ms. PRYCE. Mr. Speaker, last week I came to this floor to announce my hopes that some minor changes can be made to the Indian Child Welfare Act so that it will no longer have the chilling effect it does on adoptions in this Nation and so that it serves the interests of children first.

Last week I told of the heart wrenching story of the Rost family from my own district in Columbus, OH, and their still unresolved battle to adopt the twin girls they have had for almost 3 years now. The girls, unbeknownst to the Rosts, turned out to be 1/32 Pomo Indian due to blood from a great-great-grandparent. The twins and their adoptive parents still fear the day that the courts rule the twins be returned to a dysfunctional abusive environment due to a twisted, inaccurate, yet far too common application of the Indian Child Welfare Act.

Today I want to share with you another of the countless horror stories I have heard from all over our country. This case took place in the State of Washington, where the Quinn family spent 3½ years fighting for custody of their son, Loren.

This couple had worked with a 14-year-old biological mother for 7 months prior to the birth of a baby boy. They were even present to celebrate the birth mother's 15th birthday. The prospective parents attended the birth of the little boy at the invitation of the birth mother and later took him into their home, honoring her wishes. There they loved and nurtured him.

Weeks later, they got the horrible message, the worst fear of all adoptive parents, that nightmare that becomes a reality, that the birth mother had changed her mind and wanted the child back.

Although she had voluntarily relinquished custody of her child, even chosen this couple, she attempted to reverse her decision under the Indian

Child Welfare Act by retroactively enrolling with the Cherokee Nation.

It took 3½ years to finally reach a conclusion in the courts, 3½ years of horror, sleepless nights and worry of the unknown for this family who wanted nothing more than to provide a secure and happy home for the little boy they loved so much.

Mr. Speaker, night feedings, diapers, pediatricians, bottles and baths, birthday parties, first steps, bedtime stories, bedtime prayers, colic, car seats, first words and lullabies, on and on and on, these are the joys of a family. But for 3½ years the normal joy was somewhat subdued, because for 3½ years the future of this family was unknown.

He would have been removed from the only home and family he ever knew, and, Mr. Speaker, many courts have ruled this way. They misinterpret the intent of ICWA, take these children and send them to strange places. Now, we must ask ourselves, is this what is in the best interest of the children involved? Is this what ICWA was intended to do?

Mr. Speaker, not only the legislative history but common sense dictates that the answer is no. Very simple, minor reforms to the Indian Child Welfare Act would clarify these ambiguities. Membership in the tribe would be effective from the date of admission and could not be applied retroactively as in the case of the Rosts and the Quinns and countless others.

Mr. Speaker, ICWA was intended to stop State court abuses of native American children in involuntary placements. It was needed and well intended at the time. But it was not intended to interrupt voluntary adoption proceedings. As it is currently written, ICWA is a factor in every single adoption in this country because it is hard to say, and almost impossible to determine what child may or may not, through some remote part of its heritage, be some part Native American. And who can prepare for a law being applied retroactively, no matter how diligent and careful?

The simple and minor changes to ICWA will preserve the intent of the act, ensuring the culture and heritage of Native Americans, and at the same time protect the rights of birth parents, adoptive parents, and, above all, the children.

Mr. Speaker, I can almost guarantee that every Member in this body has at least one case of a judicial abuse of ICWA in their districts. I urge my colleagues to support these changes. Congress created these ambiguities, with all the best intentions, in 1978. It is time for Congress to correct them and stop the heartbreak.

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

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