

The career of Senator MARK HATFIELD should be an inspirational model to all those who aspire to public service, for to follow in his footsteps is to embrace all that is admirable in the pursuit of elected office and service to the people.

TRIBUTE TO SENATOR WILLIAM COHEN

Mr. EXON. Mr. President, the senior Senator from Maine, BILL COHEN, is among those Senators who have decided to not seek another term in service to their country. Senator COHEN and I both arrived in the Senate in January 1979 and we have served together on the Armed Services Committee ever since.

BILL COHEN's skills as a United States Senator were evident from the beginning. His mastery of detail along with his understanding of the larger implications of legislative policies has made him a universally respected oracle on a wide range of issues. His views are no more revered, perhaps, than those in the area of national defense and foreign policy. I can attest firsthand to how important Senator COHEN has been in furthering our national security interests over the past two decades. There is no aspect of our collective national security policy over this time that has not benefitted from Senator COHEN's contribution. Whether in the area of arms control or military reorganization or shipbuilding, Senator COHEN has displayed an effective ability to analyze problems and propose workable solutions that garnered bipartisan support. This is BILL COHEN's legacy to the United States Senate and the country as a whole.

He has been a renaissance man of sorts during these past 18 years: A bestselling novelist and published poet, an articulate speaker, and a gifted legislator. His departure will certainly deprive the Senate of one of its most meaningful and respected voices. I have no doubt he will continue to be as successful in his future endeavors as he has been as a United States Senator.

TRIBUTE TO SENATOR NANCY KASSEBAUM

Mr. EXON. Mr. President, I rise today to salute one of our departing colleagues and Senator from the neighboring State of Kansas, of course it is our own Senator NANCY KASSEBAUM.

NANCY and I have served together in the Senate over the last 18 years. I have always admired her willingness to look beyond partisan politics and work to solve the problems at hand. She can be proud of the recently passed Health Insurance Reform Act. I have no doubts that this will be seen for a long time as a very important piece of legislation. Finally, people will be able to move from job to job without fear of losing their health insurance.

Senator KASSEBAUM can also be proud in the role she played during the reauthorization of the Higher Edu-

cation Act several years ago. Because of her efforts and those of the Labor and Human Services Committee more of America's young people can seek the higher education they need to fulfill their dreams. NANCY has also been willing to work on a very important issue to me, Impact Aid. With her help and leadership, improvements to this program were made so that the children of our military personnel have better educational opportunities.

Senator KASSEBAUM comes from an honorable Kansas Republican family. Her father Alfred Landon served as Governor and Presidential nominee. Governor Landon and the legacy he left, has been significantly enhanced by the way that his daughter has continued in his footsteps.

Kansas will be losing a great Senator, one who has served her constituents well. Pat and I wish NANCY and her family all the best for the future.

TRIBUTE TO SENATOR HANK BROWN

Mr. EXON. Mr. President, I rise today to pay tribute to Senator HANK BROWN, the senior Senator from a neighboring State, Colorado, who is retiring at the end of this Congress. It seems, out there on the plains, we are dropping like flies.

HANK BROWN's service to the State of Colorado and our Nation has ranged from the U.S. Navy and a tour in Vietnam, to serving in the Colorado State Senate, the U.S. House of Representatives, and the U.S. Senate. More importantly, however, I understand that Senator BROWN played some football while at the University of Colorado. While Nebraskans are not usually humble about football, I humbly acknowledge that the Nebraska record against Colorado from 1958 to 1961 was 1 win and 3 losses.

As the ranking Democrat on the Senate Budget Committee, I have had the privilege of working with Senator BROWN on several budget initiatives. I believe he and I share a commitment to deficit reduction and responsible Federal spending second to none. I appreciate Senator BROWN's hard work in this area and have enjoyed the opportunity to work with him on these most important issues. HANK BROWN possesses one of the keenest senses of humor in the Senate. He is a delightful individual.

I commend HANK BROWN for his hard work in the Senate and his contribution to our Nation and the State of Colorado. I wish him success in all his future endeavors.

Mr. BOND addressed the Chair.

The PRESIDING OFFICER (Mr. GORTON). The Senator from Missouri.

SMALL BUSINESS INVESTMENT ACT AMENDMENTS

Mr. BOND. Mr. President, as chairman of the Small Business Committee, I am working with Senator BUMPERS,

my ranking member. We have agreed that we should pass H.R. 3719, the Small Business Act and Small Business Investment Act amendments, with a substitute.

Senator BUMPERS and I have tried to accommodate all of the concerns of Members, both of the committee itself and of this body. It is vitally important, if we are going to continue to provide funding for small businesses through the SBA programs, that we move on this.

I am advised that there are still some clearances to be obtained on the other side. I serve notice on all my colleagues we are, we hope sometime later today, to proceed to unanimous consent to proceed with this measure so we can continue small business financing efforts.

I acknowledge my colleague from Pennsylvania has been waiting a long time. I will not pursue this any further. But I want all of our colleagues to know that we hope to be able to get consent to pass this bill and send it back to the House for final action, we hope by tonight, because this is vitally important.

The PRESIDING OFFICER. The Senator from Pennsylvania.

PARTIAL BIRTH ABORTIONS

Mr. SANTORUM. Mr. President, I rise today to continue the deliberation here in the Senate of the issue of partial-birth abortions. We have had a discussion over the past several days in the Senate about this issue. I think it is good that we continue the debate. I have asked for a time agreement for tomorrow, and I hope we can get that, from 9 to 2 tomorrow morning and into tomorrow afternoon, and then a vote at 2 o'clock. I know that is being hot-lined right now. I do not know if there has been any objection to that. But I think 5 hours of debate is a reasonable period of time for both sides to get the opportunity to put forward their views on this issue. I think, while we have had some debate, and maybe we will even have some more debate today, I think this is such an important issue that that kind of time is necessary to really have the Senate work its will, for it to be a deliberative process and a deliberative decision based on all the information.

As I said yesterday, there is a tremendous amount of information, frankly even still coming out, about this issue and about the number of these procedures that are performed in this country. I think it is important for all Senators to realize exactly what we are voting on here and its impact, as I said yesterday, not only on what we will tolerate as a country, what lines we will draw as to what is permissible in our society, in our civilization, but what it will say about the quality of life in our country.

While I was sitting here listening to some of the remarks, I thought about what I read last night in the House debate. Member after Member got up and

talked about: Well, you know, we are talking about deformed fetuses—I will talk about that later in my remarks—deformed fetuses, as if, because they are not perfect, they are expendable. I found it sort of ironic that the very people in the House of Representatives who stood up and gave as a rationale for allowing late-term abortions a deformity of a fetus, in many cases—in fact, in most of the cases described by the testimony—not fatal deformities but just deformities, those people who say that a mother can abort a baby because of that deformity are the same people who get up with passion—and I admire the passion—who fight for the Americans With Disabilities Act because they believe people with disabilities can, in fact, contribute to our society and who argue for IDEA because they believe children with mental difficulties or physical disabilities can, in fact, contribute to the educational process of all children.

Yet, when it comes to the very initial right—not the right to go to school, not the right to have a curb cut so your wheelchair can get from street to street, but the right to live, the right to be a citizen of this country—that is where they draw the line; that that is not an issue worth fighting for; that that disability is somehow so great that it is not worth fighting to protect that disabled child from being delivered through this procedure feet first, completely delivered up to the head.

The only thing remaining in the birth canal is the baby's head. A pair of scissors is taken and punctures the base of the skull. A catheter is then inserted into the brain and the brains are suctioned out. That brutal, gruesome, barbaric procedure administered to a baby from 20, 21 weeks on; in some cases, third trimester abortions, late third trimester abortions in some cases. That is OK, because the baby isn't perfect.

Fortunately, in the House of Representatives, many Members who voted against this piece of legislation to ban this procedure had second thoughts, gathered more information, listened to the testimony that was given, listened to the new findings which I talked about yesterday in Richard Cohen's article in the Washington Post where he said when he wrote his original article back in June of last year, "I was under the understanding that late-term abortions were rare and they were only for health and life of the mother reasons, or that the child to be born would have no chance of surviving. But I find that is not the case," he says. He cited an article written by a colleague of his, a physician at the Washington Post, Dr. BROWN.

We have another article written by a woman with the Bergen County Record who said that in New Jersey alone this late-term abortion procedure done, in many cases, on viable babies at 24 weeks and older are not 500 a year, as some of the pro-choice lobbyists would have you believe, like Planned Parenthood and others who conveniently don't keep close track of these things,

but 1,500 a year, just in one particular area of New Jersey alone—1,500 a year.

That fact was not known when the Senate first deliberated. It was an important fact that caused the change of opinion of one Member that was written about by Cal Thomas today in the Washington Times, Marge Roukema. I served with MARGE during the 4 years I was in the House. Marge is a pro-choice moderate Republican from New Jersey. Quoting Mr. Thomas:

Representative Marge Roukema, a pro-choice moderate Republican from New Jersey, decided that instead of voting in lock-step with the rest of her pro-choice colleagues, she would go beyond the sloganeering and the sound bites. Though Mrs. Roukema voted against the original bill banning partial-birth abortion—a procedure in which a fully formed baby is delivered feet first—

Scissors inserted in the head and the brains sucked out—

she switched sides and voted to override President Clinton's veto of the measure.

The reasons Mrs. Roukema gave for her change were as honest as they were profound. She said her concerns about protecting the mother's life had been answered—

In fact, there is a provision in the bill that was inserted by Senator Dole when the bill came through that this procedure would still be permitted if it were necessary to save the life of the mother

putting the lie to pro-choicers' charges that the bill would jeopardize women's lives. She also said she was satisfied that doctors would not be prosecuted if the procedure were performed in dire circumstances.

Mrs. Roukema said, "Over time, I've been reading about this and informing myself. It's a decision that was very difficult to make, but I decided (partial-birth abortion) comes too close to infanticide."

She took the time to weigh the facts. As I said yesterday, I have a tremendous amount of faith—a tremendous amount of faith—in the U.S. Senate and its deliberative capabilities, and I have faith in every one of the Members here who will not be blinded or blocked into a position because they are pro-choice or pro-life.

This is not a pro-life, pro-choice issue. This is an issue about a procedure that is so barbaric and inhumane that if it were performed on an animal, we would be hearing the animal rights activists storming the Capitol today. If it were performed in another country, the human rights people would be saying we should have trade sanctions against them until they stop it. And yet it is performed in this country thousands of times and in many, many cases, as I quoted yesterday from the doctors in the Bergen County Record, in most cases on healthy babies, healthy pregnancies, and healthy women who had no problem with their pregnancy but was purely elective.

Other Members who are pro-choice stood up and took a very difficult position in support of the override of the President's veto.

I give them a lot of credit for doing so, because it is not easy to stand up and draw a line. One such person was a Member from across the river, Mr.

MORAN, who I was elected with when I first came to the House of Representatives back in 1990. I will quote from his statement on the floor of the House just last week:

Mr. Speaker, I am very hesitant to speak on this issue.

I share with Mr. MORAN that I was very hesitant to speak on this issue. I had been a Member of the House for 4 years and have been a Member of the Senate for 2 years. Never once, prior to this issue, did I ever speak on the issue of abortion. I have talked to several of my colleagues over the past few days, now that I have stood here talking about this and they, too, have told me, "You know, RICK, I've never spoken on the floor of the Senate on this issue, but I feel compelled to do it this time." So I give credit to Mr. MORAN, a Democrat, pro-choice.

Continuing his talk:

For one thing, I have been associated with the pro-choice side throughout my legislative career, and I do believe that when the issue of abortion is considered, it really ought not to be a legislative issue; it ought to be a personal decision by a woman with the advice of her physician, within the context of her religion and family. I do not believe that this issue falls within that rubric, within that context of decisionmaking.

He then says he agrees with Roe versus Wade and describes the decision of Roe versus Wade. I will continue quoting:

What we are talking about now, though, goes beyond that third trimester. We are talking about the delivery of a fetus clearly in the shape and with the functions of a human being. And when that human being is delivered in the birth canal, it cannot be masked as anything but a human being.

We should not act in any legislative way that sanctions the termination of that life. And that is why I urge my colleagues to vote to override the President's veto of this legislation.

I know that is not an easy thing to do. I know it is not easy to get up and talk about those issues. What I also know is I know it is not easy for people to listen to talk about this issue.

One of the things that I think probably led me not to speak so much—not so much—at all on the floor of the U.S. Senate about this issue is because it is so uncomfortable to talk about. I was assailed yesterday by one of my colleagues saying, "Well, you never delivered a child, and so you really don't know what it's like, and you really don't have any standing to talk about it."

It is true I never delivered a child, but I have been there for the three deliveries of my children with my wife Karen, and I saw those children born. I had the privilege of cutting the umbilical cord in all three cases and holding that little, vulnerable baby. Two of our children were born premature. We are lucky enough to have a fourth child on the way, and we follow the growth and development of that child.

No, I have never had a baby, but I am a father who understands what life is

about. So while I may not have the standing that some in this Chamber believe I should have, I think I have every right to stand up for those children as a father, as a citizen, and as a Senator. So I will continue to do so.

This is a difficult issue because it pushes us to the edge and makes us so uncomfortable to think about a viable baby, not a blob of tissue an inch long, not a little embryo, but a baby. My wife—as I mentioned, we have three children—but my wife has had a lot more experience with babies than just our three children. For many years she was a neonatal intensive care nurse in Pittsburgh, PA. She worked in the NICU unit, level 3, which is the most severe level, with the babies that are having the toughest time surviving. She worked with 24-week-old babies. She even worked with a 23-week-old baby. She reminded me last night that the eyes were still fused on that baby. That baby is alive today.

She said, yes, it is a struggle for those young babies. But they fought and they fought and they fought, so many of them, and they did survive. What this procedure does to those little babies, if we allow that to happen in this country—well, I hope we do not.

The Senator from California yesterday said that we could get a bill agreed to here in the U.S. Senate just like that if we just had a provision that said, that in addition to protecting the life of the mother, that we added a section that said, “to protect the health of the mother.” I attempted to respond, but I sort of ran out of time. I would like to respond to that.

I will assure the Senator from California that we could not get an agreement on that issue with Members who voted for this legislation. The reason is very simple. No. 1—and I will read for you physician after physician after physician who say that this procedure does not—does not—protect the health of the mother. In fact, they would argue that in fact it greatly endangers the life of the mother, more so than other procedures, No. 1.

No. 2, it also enhances the risk of infertility and the inability to carry a child to term.

So even if you accept—I cannot accept the premise that there is a need for this procedure to save the health of the mother. It is in fact contradicted, and it is in fact more threatening to the health of the mother to do this procedure. So to say this procedure is necessary to do that puts forth a false assumption, and then you are asking me to agree to it. I cannot agree with something that is not true.

Second, what we have seen repeatedly in this country is that health of the mother is in fact not a limitation at all; that health of the mother means, yes, physical health, but also mental health, social health in the sense that if it is a young girl who wants to have this procedure, that we have to worry about her social standing in order to allow this to happen,

and financial health. Health has been broadly defined in this country to the point where it is not a limitation to a procedure at all. I think anyone who argues that fact knows fully well that it is not a limitation. So the underlying premise of the health exception is a faulty one. Secondly, health is not a limitation.

So in either instance, I could not accept an amendment like that because, No. 1, it is not true, because the health is not endangered by doing some other procedure more than it is by doing this one, and, No. 2, it is not a limitation.

Let me read from some obstetricians who have commented on this health issue and life issue.

“I can’t think of any situation where you would have to carry out a specific, direct attack on the fetus,” said Dr. James R. Jones in an April 19 interview at St. Vincent’s Hospital and Medical Center in Manhattan.

Dr. Jones is chairman of the department of obstetrics and gynecology at the New York Medical College in Valhalla, N.Y., and head of obstetrics and gynecology for the hospital.

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“Their intent is fetal death,” Dr. Jones said. “I can’t imagine that being an indicated procedure for the saving of a life or well-being of the mother.” He said it amounted to “simply another elective abortion” and was “practically infanticide.”

In cases of special difficulty, obstetricians can always resort to Caesarean delivery, he said. Even if an obstetrician knows in a particular case that the baby is unlikely to live, he said, its death is not the intent and no direct action is taken to kill the baby.

Dr. Nancy Roemer, who I know has testified before here, and in fact may have been up on the Hill today—I do not know that. I know there were some physicians up here again to try to educate Members of this body who are going to have to make this critical decision, possibly tomorrow afternoon, as to what the medical facts are, not some information thrown out there by advocacy groups attempting to influence the debate, like Planned Parenthood, who put out, “Oh, there’s only a few hundred of these done,” when we find out the facts after the bill was passed and vetoed. The fact is, there are thousands of them done. In fact, as Richard Cohen said in his article in the Washington Post yesterday, nobody knows. Conveniently, those people who perform a lot of the abortions do not want to keep track of these kinds of abortions, do not want to keep track of late second-trimester and third-trimester abortions.

It is inconvenient for their cause of trying to convince the American public that these abortions only occur when they are very early on, and we do not have a baby that looks like a baby. It is not really a baby. At 24 weeks, it is a baby. You can call it what you want, you can try to call it a choice, but it is a baby.

I asked the Senator from California yesterday three times—and I really do not want to be combative. I really want the Senate to try to deliberate thoughtfully, to try to remove some of the emotion that always gets wrapped

up in these debates, obviously, with reason. This is a very emotional subject. I asked her three times, and I will ask her again, because unfortunately she did not answer me any of the three times yesterday. I said, let me give you this set of facts: A partial-birth abortion is being performed—whether it is a normal baby, a perfect baby, or a baby that has some abnormalities—and you have a 24-week-old baby being delivered feet first, everything is delivered, the shoulders are then delivered, and by some mistake of the obstetrician, the head is also delivered. Would it be the choice of the mother and the obstetrician to then kill the baby?

Now, I think most people within the sound of my voice would clearly say, “No.” But if you say no, if it is so obvious, and is it not obvious? Does it not just hit you? Of course not, of course not, absolutely not, not even a question that the doctor at that point, with a baby in its hand, and maybe just in one hand, moving, that that doctor could not kill that baby.

Two or three inches, then, is the difference between what some would say, “Of course not,” to “OK.” Two inches before, “OK,” two inches later, “Of course not.” That is the line being drawn in this country now about life—about life. Is that the line that the U.S. Senate, this great deliberative body, this body that when I talk to people from other countries look at this place and see this country as something they aspire to, something they want to emulate, that we cannot get two-thirds of the men and women of this body to say that 2 inches is too close of a call, that that is too fine a line, that we have gone over the line about what is right in our society?

I think we as a body can do that. I think we as a body can stand up and do the right thing. I think Members who have voted differently on this issue in the past can change their vote based on new information.

Dr. Nancy Roemer said on the claim “medical necessity” that the President has invoked and Members on the other side have invoked, “I am insulted to be told that I am tearing a woman’s body apart by not doing this procedure.” The “tearing a woman’s body apart” line comes from a White House ceremony where the President vetoed this bill. “As physicians, we can no longer stand by while abortion advocates, the President of the United States, the newspaper and television shows, continue to repeat false medical claims to Members of Congress and the public. This procedure is currently not an accepted medical procedure.”

The American Medical Association legislative counsel said it is not a recognized medical procedure. It is done in abortion clinics, as many of the doctors have said here, for the convenience of the person performing the abortion.

A search of medical literature reveals no mention of this procedure, and there is no critically evaluated or peer review journal that describes this procedure. There is currently also no peer review or accountability

of this procedure. It is currently being performed by a physician who is not an obstetrician. It is in an outpatient facility behind closed doors and no peer review.

That is what Dr. Roemer says about the necessity for this procedure and the appropriateness of this procedure. Let me quote another physician who happens to also be a Member of Congress, and that is Dr. COBURN from Oklahoma, who spoke last week on the floor of the House of Representatives.

Mr. Speaker, I have spent the last 18 years of my life, including a great deal of time of the time 2 years while I have been in this Congress, caring for women who deliver babies. I personally have been involved in over 3,000 births that I attended. I have seen every complication and every anomaly that has been mentioned in this debate on partial-birth abortion.

I am not standing here as someone who is pro-life. I am not standing here as someone that is a freshman Republican. I stand here today to make known to Members that they can vote against an override for only two reasons on this bill: One is that they are totally misinformed of the true medical facts; or that they are pro-abortion at any stage for any reason.

The facts will bear this out. That is not meant to offend anybody. If someone feels that way, they should stand up and speak that truth. But this procedure, this procedure is designed to aid and abet the abortionist. There is no truth to the fact that this procedure protects the lives of women. There is no truth to the fact that this procedure preserves fertility. There is no truth to the fact that this procedure, in fact, is used on complicated anomalous conceptions. This procedure is used to terminate mid and late second-term pregnancies at the elective request of a woman who so desired—in some cases, I might add, third-trimester abortions.

This has nothing to do with women's emotional health. This has to do with termination of an oftentimes viable child by a gruesome and heinous procedure.

What we should hear from those who are going to vote against overriding this is that they agree, that they agree that this procedure is an adequate and expected procedure that should be used, and that it is all right to terminate the life of a 26-week fetus, that otherwise the physicians would be held liable under the courts of every State to not save its life should it be born spontaneously.

This debate is not about the health of the women. This debate is about whether or not true facts are going to be discussed in this Chamber on the basis of knowledge and sound science, rather than a political end point that sacrifices children in this country.

That is an obstetrician. I have a letter here signed by 4 obstetricians of an organization called PHACT, which is the Physician Ad Hoc Coalition for Truth. It lists scores and scores of OB/GYN'S, who are against this procedure—and speak in very graphic terms against this procedure—including 123 members of the American College of Obstetricians and Gynecologists. They say the same thing: "This procedure is not necessary to preserve health, fertility, or the life of a mother."

I see the Senator from Oklahoma here. I have more things to say, but I have been on the floor for a while, and I want to give him an opportunity to speak. I will continue talking about this at a later time.

I yield the floor.

Mr. NICKLES addressed the Chair.

The PRESIDING OFFICER. The Senator from Oklahoma is recognized.

Mr. NICKLES. Mr. President, I wish to compliment the Senator from Pennsylvania for his courage in taking on this very sensitive and yet very important issue. It is an issue that we deal with in the Senate, maybe with some reluctance, but it is certainly an issue that deals with life and death. The Senator from Pennsylvania is trying to save the lives of innocent, unborn, almost-born human beings. He is trying to see that the overwhelming opinion of a majority of the American people is upheld—in this case, outlawing the most gruesome type of abortion possible.

I was doing a little homework on this. I compliment the Senator from New Hampshire, Senator SMITH, for his leadership on this issue because he made a lot of us aware that this practice was ongoing—a practice that people who are opposed to this ban, who don't want to see any restriction of abortion whatsoever, say rarely ever happens. I don't think that is the case. As a matter of fact, I have a couple comments that show there are thousands of these abortions performed every year. But in learning a little bit about the practice, it is really gruesome. The doctor—I don't want to call it a doctor. The abortionist has to go to some trouble to make sure the baby is not totally delivered. It is not an easy process. If the baby's head comes out, then you have a live child. Before that, you have a live fetus, by their definition. So they have to hold the baby's head in, in order to kill the baby, extract the brains from the head of the baby, and then remove the dead baby. This is happening thousands of times in our country.

We passed a ban. Congress overwhelmingly passed a ban to stop this gruesome, painful procedure. Unfortunately, President Clinton vetoed the ban. I think he was wrong. Dr. Koop mentioned that he thought maybe President Clinton had bad advice. I think he had bad advice, and I also think he was basically coopted by the groups who call themselves pro-choice. I know a lot of individuals who classify themselves as pro-choice that want to see this procedure stopped. They are offended by this procedure.

Let me make this one comment. Dr. Pamela Smith, an obstetrician at Mt. Sinai Hospital in Chicago, and Director of Medical Education in the Department of Obstetrics and Gynecology at that hospital, testified before the House Judiciary Subcommittee on the Constitution that even when describing the procedure to groups of pro-choice physicians, she found that "many of them were horrified to learn that such a procedure was even legal." That is in the House report 104-267, page 5.

As Dr. Smith further points out, "partial-birth abortion is a surgical technique devised by abortionists in

the unregulated abortion industry to save them the trouble of 'counting the body parts' that are produced in dismemberment procedures."

That was in a letter to U.S. Senators on November 4, 1995. She says in the same letter, "Opponents have insinuated that aborting a live human fetus is sometimes necessary to preserve the reproductive potential and/or life of the mother. Such an assertion is deceptively and patently untrue."

In a July 9, 1995, letter to Congressman TONY HALL, a registered nurse who had observed Dr. Haskell, who has performed over a thousand partial-birth abortions himself, perform several partial-birth abortions, described one such procedure. Again, this is somebody who was assisting the abortionist. She saw the procedure.

The baby's body was moving. His little fingers were clasp together. He was kicking his feet. All the while, his little head was stuck inside. Dr. Haskell took a pair of scissors and inserted them into the back of the baby's head. Then he opened the scissors up. Then he stuck the high-powered suction tube into the hole and sucked the baby's brains out.

That is this procedure. That is gruesome. That is cruel. That is killing an innocent baby that is only seconds or inches away from delivery.

The American Medical Association's Council on Legislation, 12 members, thoroughly considered H.R. 1833 and voted unanimously to endorse the bill. After their action became public, they reconsidered the matter and voted unanimously again to endorse the bill. Although the full AMA Board of Trustees decided to take a neutral stance, the Senate does have the benefit of the carefully considered judgment of the AMA Council on Legislation on the bill. The AMA Legislative Council did not call for more time in which to study the bill. They had all the facts they needed to make a judgment. And so does the Senate. This bill should be passed. The President's veto should be overridden.

Mr. President, some people say that partial-birth abortions are done in order to save the life of the mother, or to protect her health. President Clinton used that as an excuse in his veto. I will give you a quote. According to the Physician's Ad Hoc Coalition for Truth, a coalition of about 300 medical specialists, including former Surgeon General C. Everett Koop, they emphatically state that even in cases involving severe fetal disorders partial-birth abortion is never medically necessary to protect a mother's health or her future fertility. Never. These are the professionals. They say that a partial-birth abortion is never necessary to protect the mother's health or future fertility.

Dr. Martin Haskell—who I spoke about early and who performs partial-birth abortions—one of the major proponents and practitioners of this technique, states that some 80 percent which he has performed were for purely elective reasons. That was in an interview with AMA's American Medical

News, July 5, 1993. His late colleague and fellow proponent of the partial-birth method claimed in material submitted to the House subcommittee that nonelective reasons to perform the procedure include psychiatric indications, such as depression and pediatric indications, that is, the mother is young.

Mr. President, one other comment. Some of the people who have advocated that this procedure should not be banned say it is very rare. I think they are incorrect. The stark fact is that unless this bill becomes law, more innocent unborn children will have their lives brutally ended by the inhumane partial-birth procedure. During last year's debate, the New York Times quoted the pro-choice National Abortion Federation as saying that only about 450 partial-birth abortions are performed each year. However, two lengthy investigative reports published last week in the Washington Post and the Record of Hackensack, New Jersey, reporters for both newspapers found that the procedure is far more common than pro-abortion groups have indicated, and is typically performed for nonmedical reasons.

The Record found, for example, that a single abortion clinic in Englewood, New Jersey, performs at least 1,500 partial-birth abortions per year—three times the number that the National Abortion Federation had claimed occur annually in the entire country. Doctors at the Englewood clinic say that only a minuscule amount are for medical reasons. One of the abortion doctors at that clinic told the Record

Most are Medicaid patients, black and white, and most are for elective, not medical reasons: People who didn't realize, or didn't care, how far along they were. Most are teenagers.

Mr. President, it is unbelievable to me that this unspeakable abortion procedure even exists in this country, much less that we have to take legislative action to ban such a procedure, as well as attempt to override a Presidential veto.

It is further unbelievable to me that anyone in good conscience can even defend the partial-birth abortion procedure. It is a fiction to believe that it is all right to end the life of a baby whose body, except the head, is fully delivered. In order to engage in such a fiction one has to take the position that the curling fingers and the kicking legs have no life in them. Those who subscribe to such a fiction are at best terribly misguided. It is time to end this injustice and the practice of this procedure. I urge my colleagues to join us in voting to override the President's veto.

Mr. President, I agree with my colleague, Congressman TOM COBURN, who has delivered over 3,000 babies. He is still an active obstetrician. He is a professional in this area. He said this procedure is never, never called for. It is never necessary. He knows. The people who are supporting this procedure are saying we should never have any re-

strictions on abortion; that if you can't have this restriction, then you should not have any restriction, period. That means abortions for sex selection. That means abortion on demand for any reason. Abortion is a method of birth control; in this case birth control when the baby's head is only a few inches from delivery; maybe just a few seconds. Maybe the doctor is keeping the baby's head in so that life can be destroyed inside while the baby's head is still in the mother instead of just a few seconds later when it would be recognized as murder.

Mr. President, how can you say when the baby's arms and legs are kicking that it is not a live baby? We need to protect the lives of those innocent children. We need to override the President's veto.

Mr. President, I yield the floor. I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. ABRAHAM). The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. MURKOWSKI. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

THE OMNIBUS PARKS BILL

Mr. MURKOWSKI. Mr. President, I am waiting for one of my colleagues. But in the interim I would like to bring to the attention of the Members the prospects again for addressing the 126 individual bills in the omnibus parks package.

This has been the culmination of some 2 years in the committee of jurisdiction, the Energy and Natural Resources Committee. As a consequence of that effort we are on the eve of initiating an action in this body that would result in the passage of this very important legislation which clearly is the most significant environmental package with some 126 bills that has come before this body.

As a continuation of my previous remarks, the conference-adopted amendments in sum serve to ensure that this legislation will rectify particularly the accumulation of inadequate funding which now totals some \$4 billion necessary to maintain our parks in a manner which is in keeping with the uniqueness and oftentimes the sanctity of those areas.

One of the amendments adopted and totally submitted by the Senator from Arkansas, Senator BUMPERS, which addressed concerns of the National Park Foundation Act, is evidence that that amendment would serve to ensure that the legislation would not lead to unwarranted commercialization of the parks, or abuse by corporate sponsors. The theory, Mr. President, here is that this legislation would be implemented in such a way that it followed very much that patterned after the national Olympic committees which authorize certain very select stipulations with

regard to certification by the Olympic committees of activities that can occur in association with the Olympics.

For example, if a movie is made in one of our national parks, is there any contribution given to that national park to that movie? If there is a picture of an automobile, a new model portrayed in front of Mount Shasta, is there a contribution from Chrysler, Ford or General Motors to that park?

This is the innovative approach that we are hoping to prevail in the National Park Foundation Act to help fund our parks, not to commercialize the parks. We are not going to have the park sponsored by "Joe Blow's Gas Station," or something of that nature, I assure you. It is going to be in keeping with the intention of the park.

Mr. GORTON. Mr. President, will the Senator, while he retains the floor, yield for a question?

Mr. MURKOWSKI. I am pleased to yield to the chairman of the committee of jurisdiction on parks.

Mr. GORTON. Mr. President, I want to say to my dear friend, the distinguished colleague from Alaska, how much I have admired all of the work that he has done as the chairman of the Committee on Energy and Natural Resources, and especially for his dedication to putting together and crafting a bill with a wide-ranging impact on our national parks and on other recreational land, and lands that are appropriate for preservation. I know how much that he wanted also to pass and have included provisions that are very important to him and to the people he represents in Alaska, and to other Members of this body.

I must confess that I felt that his ambitions were as great as they were worthy and that they were very likely to cause this body to not be able to act on many of these matters. As a consequence at the request of a number of Members of both the House and Senate, I have seriously considered whether or not it is appropriate to include in the Department of the Interior portion of our appropriations bill at least some of the important and not so controversial elements of that bill. I do have a particular interest—not that of a constituent interest—in one part of that. The Presidio portion of that bill is very important because the Presidio is by far the most expensive of our national parks and takes up a tremendous amount of the appropriations in which I supervise and oversee and chair in this body. To get the kind of community participation in San Francisco that we have desired to take some of the burdens of the local aspects of the Presidio off our hands so that we can better fund other national parks is important. So that was one element of the bill that we proposed to include.

I have been as delighted, however, as I was surprised at the ability of the Senator from Alaska now to put together a conference committee report which is ready to be reported and debated in the Senate. I simply say to my