

Gordon is a man with these skills and many more as evidenced by his tenure at the USGS.

Dr. Eaton is the 12th director in the 118-year history of the USGS. He has headed the agency for the past 3 years and has guided USGS through one of its most tumultuous periods. Dr. Eaton has led the bureau during a time of Government downsizing and has succeeded in redefining the mission of USGS so it may continue as a preeminent science bureau into the 21st century. When he came to the USGS, it was facing criticism that it had outlived its mission as a Government agency and no longer provided valuable scientific information. Dr. Eaton was able to expand the public's knowledge of the many contributions the USGS makes as well as make the services of the bureau more accessible to the public. Gordon was able to communicate the need for change to employees who felt threatened by and out-of-touch with their constituency.

Dr. Eaton helped the employees of USGS to rethink their position and helped the many different branches of the bureau to better coordinate their services. He made it a grassroots effort at the USGS as he tried to make sure everyone felt included in the changes at the agency. Dr. Eaton solicited the opinions of employees at every level in deciding how the agency could most effectively adapt to a new mission. Dr. Eaton's leadership skill and willingness to face down any challenge will certainly be missed by the many employees at USGS who enjoyed his open-door management style.

Mr. Speaker, I know my colleagues join me in honoring and thanking Gordon Eaton for his achievements in guiding the U.S. Geological Survey into the next century. We appreciate all of his hard work and devotion in making the USGS an efficiently run agency that is able to provide the highest level of service to the American public.

LUPUS, A HARMFUL AND RAVAGING DISEASE

HON. ILEANA ROS-LEHTINEN

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 28, 1997

Ms. ROS-LEHTINEN. Mr. Speaker, recently, Congresswoman CARRIE MEEK and I hosted a forum at Jackson Memorial Hospital to talk about a disease, lupus, that burdens the lives of almost 2 million Americans, striking 1 out of every 185 Americans. Moreover, although this disease can affect individuals at any age, and in either sex, 90 percent of those who suffer from this ravaging disease are women.

Lupus is not an equal opportunity illness. It not only targets women, but African-American and Hispanic women face an increased threat—as many as three times over.

Lupus, whose name comes from the facial rash it produces, is an autoimmune disease, where instead of protecting itself against viruses, bacteria, and other foreign materials, the body makes antibodies against itself. It is in a class of illnesses that includes forms of diabetes, arthritis and, according to recent research, many also include a number of conditions such as Parkinsons. All of these illnesses occur when the immune system ends up attacking the very body it is supposed to defend.

Although this devastating disease is not infectious, rare, or cancerous and it ranges from mild to life-threatening, the reality is that thousands of Americans die with lupus each year. Moreover, while many other chronic diseases make the headlines, lupus affects more individuals than AIDS, cerebral palsy, multiple sclerosis, sickle-cell anemia, and cystic fibrosis combined.

Even though the outlook for lupus patients has greatly improved, there is still a need for increased research. Therefore, I am proud to be a cosponsor of CARRIE MEEK's bill, H.R. 1111, legislation which will increase research funded through the National Institutes of Health from \$33 million last year to \$50 million for the next fiscal year and would make an additional \$50 million available to State and local governments, as well as nonprofit organizations, to assist with providing essential services to low-income individuals with lupus.

While improvements in medication can allow those afflicted to look forward to a normal life span, there is still much work to be done in education and research. It is my hope that this legislation will hasten the day when lupus is nothing more than a bad memory.

I implore my colleagues to take an active role during Lupus Awareness Month and sign onto H.R. 1111, which 84 of my colleagues have already cosponsored, so that those 2 million Americans afflicted with lupus will have a fighting chance of battling this harmful and ravaging disease.

PRIVATE PROPERTY RIGHTS IMPLEMENTATION ACT OF 1997

SPEECH OF

HON. RICK HILL

OF MONTANA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 22, 1997

The House in Committee of the Whole House on the State of the Union had under consideration the bill (H.R. 1534) to simplify and expedite access to the Federal courts for injured parties whose rights and privileges, secured by the U.S. Constitution, have been deprived by final actions of Federal agencies, or other Government officials or entities acting under color of State law; to prevent Federal courts from abstaining from exercising Federal jurisdiction in actions where no State law claim is alleged; to permit certification of unsettled State law questions that are essential to resolving Federal claims arising under the Constitution; and to clarify when Government action is sufficiently final to ripen certain Federal claims arising under the Constitution:

Mr. HILL. Mr. Chairman, I rise as a cosponsor of H.R. 1534, the Private Property Rights Implementation Act. I proudly voted for this bill when it passed the full House on October 23, 1997.

The fifth amendment in the Bill of Rights guarantees the protection of individuals against the power of all levels of government. According to recent studies, between 80 and 95 percent of all individuals trying to defend their fifth amendment rights in Federal court never get a hearing on the facts of their case. They get lost in a bureaucratic maze of administrative and judicial hurdles that waste time and money.

Of those 5 to 20 percent who break through that maze, it takes an average of 10 years be-

fore the merits of their case are even heard. That's 10 years of fighting just to have your fifth amendment claim heard in Federal court. That is 10 years of financial burden and stress for the private property owner in Montana.

Let me give you a specific example from my home State of Montana. There was a plan to develop a condominium project over a 4 acre area. The aim of this project was to provide affordable housing for the community, with plans to develop 34 units at about the average cost of \$85,000 per unit.

That sounds quite simple and certainly beneficial, but with the current process this was not the case. To go through the approval process, the project was zoned residential, went through a planned unit development hearing, numerous reviews, a redrawing of the plans approximately five times, and an extensive hearing process, all before the city commission granted a final approval. This took approximately 1½ years.

However, the city commission approved the project with only 24 units. This completely changed the concept of the project, and proved quite burdensome. After a year and a half of extensive hearings, what recourse did the project directors face? They could appeal, not to a court, but to the city commission who had granted this arbitrary number of 24 units or once again begin a costly and untimely review process.

Without access to a court, the project managers had little choice but to proceed with the city commission's inflexible recommendation of 24 condominiums. This, of course, had dramatic consequences.

What was supposed to be affordable housing units at \$85,000 per unit, ended up costing \$135,000 per unit. Due to structural modifications forced by the commission's approval, this excessive cost undermined the intent of providing affordable housing.

Furthermore, imagine if this were the case for first amendment rights protecting freedom of religion, or fourth amendment rights protecting against illegal search and seizure. I wonder whether those arguing against H.R. 1534 would feel so passionate about protecting the status quo. All Montanans including Montana property owners, deserve equal protection under the Constitution and an equal ability to defend their constitutional rights in Federal court.

The House spoke on behalf of guaranteeing equal protection when it passed this much-needed legislation. I look forward to working with my colleagues further in the hope that the Senate will take up this measure.

TRIBUTE TO W. PETER MCBRIDE

HON. BILL PASCRELL, JR.

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 28, 1997

Mr. PASCRELL. Mr. Speaker, I would like to call to your attention W. Peter McBride of Franklin Lakes, NJ who is being honored this evening as the "1997 Man of the Year" by the Boys and Girls Club of Paterson. This award is presented to Peter in recognition of his outstanding leadership activities throughout the north Jersey area, and his many philanthropic activities in the Greater Paterson community.

Peter was born and lived his early childhood in Paterson. He attended primary school in

Ridgewood and high school at the Delbarton School in Morristown. Peter went to Maryknoll College, a liberal arts college and seminary in Glen Ellen, IL. During college, Peter spent his summers doing community development work in Chicago and Mexico. He graduated in 1967 and opted to continue his education by enrolling in Seton Hall's graduate school of business.

The Vietnam war interrupted Peter's education and he enlisted in the U.S. Army, receiving a commission as second lieutenant. After his tour of duty, Peter entered the family business and has been active, first with his father Nevins and more recently his brother David, leading McBride Enterprises as it developed into one of New Jersey's premier real estate development companies.

McBride Enterprises has built a number of industrial and office parks, including those in Fair Lawn, Glen Rock, Wayne, Totowa, Oakland and Mahwah. Fair Lawn Industrial Park, the first project, became a model for the planned industrial park development. In addition to leading McBride Enterprises, Peter is also president of Urban Farms, Inc., a residential development company which has developed over 2,500 acres in Franklin Lakes and Wayne.

The McBride family roots are in Paterson, established by patriarch John McBride who emigrated from Ireland in 1863. Peter's grandfather, Frank A. McBride, founded a plumbing company in 1898, which, under the leadership of his sons Frank, Nevins, and Joseph, grew to become the F.A. McBride Co., Mechanical Contractors.

The McBride family has continued to maintain an interest in their ancestors' adopted home of Paterson and Passaic County. Several family members have been board members and volunteers at St. Joseph's Hospital, and Peter currently sits on the Board of the Hospital Foundation. Peter is past president and a board member of the Passaic Valley Council of the Boy Scouts of America. He has been one of the organizers of the scouts' annual sports celebrity dinner, which for 15 years has been the major fundraising activity of the council.

Peter is also cochairman of the Annual J. Nevins McBride Golf Outing for Scouting which benefits the youth of Passaic County. His involvement with scouting extends to his family, where his son is a boy scout with Troop 34 in Franklin Lakes. Peter also serves on the Ramapo College Board of Trustees, Most Blessed Sacrament Parish Council, the Archdiocese of Newark Finance Council and the Board of Directors of Hudson United Bank.

Peter lives in Franklin Lakes with his wife, Pam, and children Meredith, Peter, and Annie. Pam is the volunteer architect for "Woman Raise the Roof," a Habitat for Humanity Project in Paterson. Pam and Peter are also mentors for Operation Link-Up at Kennedy High School.

Mr. Speaker, I ask that you join me, our colleagues, Peter's family and friends, and the people of north Jersey in recognizing W. Peter McBride's many outstanding and invaluable contributions to the community and to the Boys and Girls Club of Paterson.

WORLD POPULATION AWARENESS WEEK

HON. BENJAMIN A. GILMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 28, 1997

Mr. GILMAN. Mr. Speaker, this week is World Population Awareness Week. It calls attention to the growing population of mankind and the pressures it puts on the planet. At the current rate, the world's population will double from 5.8 to 11 billion people during our lifetime. Excluding China, 21 million women of childbearing age in the developing world are added each year—equal to the total number of women of childbearing age in California, Texas, New York, and Florida combined.

Population Awareness Week calls attention to our voluntary family planning program. President Nixon launched the U.S. international family planning program in 1969. The program improves the health of mothers and their children by increasing the time between births while reducing unintended pregnancies and abortions. After 30 years, the program helped reduce the average number of children in the developing world from six to four. Modern contraceptive use climbed from 10 to 35 percent. As contraceptive use in countries such as Russia rose from 19 to 24 percent, abortion rates fell from 109 per 1,000 women to 76. It is clear that family planning reduces unintended pregnancies and abortions in many countries. In sum, the Population Council estimates that without family planning programs, there would have been 500 million more people in the world today—almost twice the population of the United States.

The single greatest way to reduce infant mortality is to increase the time between pregnancies. Family planning also helps to reduce abortion. Family planning saves lives and creates greater opportunities for the health, education, and economic future of children.

I want to commend the leaders behind World Population Awareness Week, especially Werner Fornos of the Population Institute. The institute is one of the leading forces in bringing the attention of the Congress to key issues of population, family planning, and the environment.

FRONT-LINE HEALTH CARE WORKERS SHOULDN'T HAVE TO RISK THEIR LIVES TO SAVE LIVES

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 28, 1997

Mr. STARK. Mr. Speaker, along with over 20 original cosponsors, I am introducing the Health Care Worker Protection Act of 1997. This bill is designed to reduce the risk of health care workers from accidental needlesticks. The legislation would ensure that the necessary tools—better information and better medical devices—are made available to our frontline health care workers in order to reduce the injury and death which may result from accidental needlesticks each year.

Although needlestick injuries are considered to be widely under reported, health care workers report more than 800,000 needlesticks and

injuries from sharp products each year. According to the Center for Disease Control and Prevention [CDC] there have been at least 52 actual and 111 possible documented cases of HIV seroconversions among U.S. health care workers resulting from occupational exposures since 1994. Needlestick injuries caused by hollow-bore needles accounted for 86 percent of all reported occupational HIV exposures. Of the needles involved in the reported injuries, 2 percent or roughly 16,000 are likely to be contaminated by the HIV virus.

Imagine what someone must go through when accidentally pricked with a used needle device. Tests must be conducted to determine if the blood on the device contained an infectious agent. If so, the health care worker must undergo tests to see if they have been infected. If the blood contained the HIV virus, one could not be sure for up to 1 year whether an infection occurred.

While you can't put a dollar figure on the psychological toll of a needlestick, if only one employee becomes HIV positive, the direct cost to treat a needlestick injury can average \$2,809 even if there is no infection. If an infection occurs, direct and indirect costs can total more than \$500,000.

The Health Care Worker Protection Act of 1997 requires hospitals and hospital-owned facilities to use safe and approved hollow-bore needle devices as a condition of participation in the Medicare Program. Hospitals would be required to use safe needle devices as approved by the FDA in consultation with an advisory committee comprised of representatives from consumer groups, frontline health care workers, industry representatives, and technical experts. To enhance compliance, \$5,000,000 would be provided for education and training in the use of safety devices.

Support for this bill has come from all quarters: the American Nurses Association, the American Association of Occupational Health Nurses, the Service Employee International Union, American Federation of Teachers, Lynda Arnold's National Campaign for Healthcare Worker Safety, Association of Operating Room Nurses, American Association of Critical-Care Nurses, many product researchers and manufacturers, and most importantly, health care workers. Supporters of the bill share the opinion that this legislation will provide important protections for health care workers in the workplace.

Better information and better devices are the key to reducing injuries from needlesticks. Hospitals must be encouraged to substitute existing needlestick products with products proven to be safe. Nurses, doctors, and other frontline health workers care each day for those individuals we love. They shouldn't have to risk their lives to save lives. I urge my colleagues to support this bill.

CONGRATULATING ST. JOSEPH'S WIC PROGRAM

HON. MARGE ROUKEMA

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, October 28, 1997

Mrs. ROUKEMA. Mr. Speaker, I rise to congratulate St. Joseph's Hospital and Medical Center in Paterson, NJ, on its excellent system of WIC clinics and the work the clinics