

course I have been touched with this in my own family, as the gentleman had mentioned.

I want to thank the gentleman for his interest and for allowing me a few minutes to align myself and associate myself with the gentleman's interests in battling this terrible disease.

Mr. FORBES. Mr. Speaker, I thank the gentleman. I would like to recognize my other colleagues from Long Island: the gentleman from New York [Mr. ACKERMAN], the gentleman from New York [Mr. KING], and the gentleman from New York [Mrs. MCCARTHY], who equally have been working on this issue. We will be taking this floor several days this week to talk in extended terms about the chronic fatigue syndrome. It is a serious illness and one that we as a nation need to deal with in a more aggressive manner.

Mr. ACKERMAN. Mr. Speaker. I rise today to acknowledge Annual International Awareness Day for Chronic Immunological and Neurological Diseases. These illnesses are among the fastest growing health concerns in our country and constitute a large and neglected area in medical research. Chronic fatigue immune dysfunction syndrome [CFIDS] and fibromyalgia syndrome [FMS] are illnesses which affect at least a half million American adults and children. It is imperative that increased funding for research for CFIDS and FMS be approved in a timely fashion.

CFIDS is a serious and complex illness that affects nearly every aspect of an individual's life. It is characterized by incapacitating fatigue, neurological problems and numerous other symptoms. Approximately 1,000 individuals in Suffolk County alone suffer from this disease. One of my constituents, named Anthony Wasneuski, was diagnosed with chronic fatigue syndrome in 1990. Mr. Wasneuski was a furniture salesman in New York City. He was also an accomplished artist who received a scholarship from the Brooklyn Museum. Unfortunately, because of this illness he must now remain at home, and now has difficulty even signing his own name. Mr. Wasneuski's story represents a real life experience behind the cold numbers and statistics of this debilitating disease.

Fibromyalgia syndrome is a chronic, widespread musculoskeletal pain and fatigue disorder for which the cause is unknown. Research studies have indicated that approximately 2 percent of the general population are afflicted with FMS. The majority of FMS patients are female and symptoms may begin in young, school-aged children. Tragically, it takes approximately 3 years and costs thousands of dollars just to receive a diagnosis of the disease.

Chronic fatigue immune dysfunction system and fibromyalgia clearly affect people from all walks of life. As the 1998 appropriations process gets underway, we need to focus upon ways that we can provide more research funding for these debilitating conditions.

Mrs. MCCARTHY of New York. Mr. Speaker, I would also like to take the opportunity to thank my colleague, Mr. FORBES, for organizing this opportunity to speak out on chronic fatigue and immune dysfunction syndrome [CFIDS].

I would like to take this opportunity to talk about a little known but devastating disease:

CFIDS. Once dismissed by doctors, this syndrome is now being taken seriously. Studies vary on how many people are affected by this disease but a conservative estimate is about 390,000 adult cases in the United States.

In the tristate area of New York, New Jersey, and Connecticut, approximately 4,094 to 11,000 people have CFIDS.

CFIDS is truly a terrible disease. It ranges in severity from patients who are just able to maintain a job, and may have to give up other aspects of their lives, to those who are bedridden and unable to take care of themselves.

While CFIDS traditionally affects young women in the prime of their lives, a growing number of children appear to have CFIDS. The fact that this disease is striking young children is particularly disturbing. This disabling illness will have a disastrous effect on the economy by preventing young children from becoming income-earning, tax-paying citizens.

While CFIDS is not known to be a killer, it has no proven treatment and no cure. Moreover, it is difficult and, unfortunately, nearly impossible to get a timely and correct diagnosis.

Because patients go to many different doctors to find a diagnosis, they often are subjected to unnecessary, costly, and potentially harmful treatments.

Mr. Speaker, this must change. Doctors, medical professionals, and those who are entering the medical fields must be educated about CFIDS. Delaying diagnosis is not only harmful to the patient, it is not cost effective. Treating individuals early in the disease process offers more promise for return to normal and productive living.

GENERAL LEAVE

Mr. FORBES. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the subject of this very important special order.

The SPEAKER pro tempore (Mr. SNOWBARGER). Is there objection to the request of the gentleman from New York?

There was no objection.

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

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

HONORING AMELIA EARHART

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

Mr. RYUN. Mr. Speaker, today I rise to honor a great woman, a great Kansas, and a great American. Amelia Mary Earhart was born on July 24, 1897 in Atchison, KS as the grandchild of original Kansas pioneers.

The pioneering spirit never left Amelia as she achieved a collection of firsts and world records in which we should all take pride. These include the

first woman to receive pilot certification, the first woman to fly nonstop across the United States; the first woman to fly solo across the Atlantic Ocean; and the first woman to receive the Distinguished Flying Cross.

Amelia Earhart was an early advocate of commercial aviation and lectured in the 1930's that one day people would fly through the sky every day to get from one place to another.

Earhart's commitment to aviation was equaled by her commitment to advancing equality and opportunity for women. She served as an aeronautical adviser and women's career counselor at Purdue University. She promoted equality for women in public presentations and appearances, but most importantly, Amelia Earhart led by example, by doing things that no one thought possible.

□ 1900

Even in her disappearance, Amelia Earhart was striving to do that which had never been done, to become the first woman to circle the globe. This year marks the centennial celebration of the life and achievements of Amelia Earhart. We recognize this daughter of Atchison, KS, and honor her extraordinary contributions to women, science, aeronautics, and the Nation.

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

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

GENERAL LEAVE

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on the subject of my special order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

THE TRAGEDY OF ALCOHOL-RELATED DEATHS ON OUR NATION'S HIGHWAYS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 7, 1997, the gentleman from Florida [Mr. BILIRAKIS] is recognized for 60 minutes as the designee of the majority leader.

Mr. BILIRAKIS. Mr. Speaker, the National Highway Traffic Safety Administration estimates that two in every five Americans, 40 percent, will be involved in an alcohol-related crash at some time in their lives. I rise today to reflect on the tragedy that drunk driving has brought to victims and their families around the United

States. I was encouraged to learn that from 1990 to 1994, there was a 20-percent decline in alcohol-related deaths on our Nation's roads. However, in 1995, alcohol-related traffic deaths increased for the first time in a decade. These statistics deeply trouble me, especially since our Nation has made a commitment to educate the public on the dangers of driving while under the influence of alcohol.

Mr. Speaker, I yield to the gentlewoman from Oregon [Ms. FURSE].

Ms. FURSE. Mr. Speaker, I am very pleased to be part of this special order, because 45 percent of the fatalities on our Nation's highways are alcohol-related. It is, as the gentleman mentioned, a tremendous problem. One of the things that I was most shocked about was to find that in emergency rooms across this Nation, emergency room personnel are very often not allowed to give information when a person comes in from a traffic accident with a high blood alcohol level, so a wonderful woman from Oregon came to me, a nurse, and she had changed the law in Oregon which said that emergency room personnel may make this information available.

As the gentleman knows, last year we passed a bill here in this House asking for a study to see about just allowing that emergency room personnel to report high blood alcohol levels. What we found in Oregon was absolutely shocking. Sixty-seven percent of the people who came in through emergency rooms with high blood alcohol level, who had been driving, were never charged with drunk driving because they were unable to give this information out.

So, Mr. Speaker, I really recommend what the gentleman is saying, that we need to educate people that this is a major, major problem in our country. We have young people, I believe it is six young people a day, who die on our highways in alcohol-related accidents. So I am hoping this study will show that where we can have emergency room personnel involved with the law enforcement to let people know, let law enforcement know that there has been alcohol involved in an accident, we may be able to reduce this tremendous carnage on our highways.

I really thank the gentleman for holding this special order, because it is, obviously, a major health problem in our country.

Mr. BILIRAKIS. Mr. Speaker, I thank the gentlewoman for her involvement in this and in so many other issues. She has just been so stellar on my Subcommittee on Health on all issues, particularly preventive health care. That is basically what we are talking about here, preventive, the education that goes along with us. I thank the gentlewoman for joining us.

Mr. Speaker, in 1995, more than 17,000 people were killed in alcohol-related traffic crashes, including 2,206 youths. Mothers Against Drunk Driving, MADD, and many other important or-

ganizations, such as "Remove Intoxicated Drivers," RID, Students Against Driving Drunk, SADD, and Campaign Against Drunk Driving, CADD, have been working to protect people from being injured or killed in drunk driving-related crashes.

Mr. Speaker, I yield to the gentleman from Minnesota [Mr. RAMSTAD].

Mr. RAMSTAD. Mr. Speaker, I thank the gentleman for yielding to me.

Mr. Speaker, I rise today in strong support of my colleagues' efforts to bring attention to the tragedy of drunk driving, and to discuss briefly a bill I have introduced with 20 of our colleagues on both sides of the aisle to establish a national commission on alcoholism to deal with this fatal disease in a comprehensive and cost-effective way.

Mr. Speaker, alcoholism killed over 100,000 Americans last year. That is more than all illegal drugs combined. Half of our Nation's convicted murderers committed their crimes under the influence of alcohol. My colleague, the gentleman from Florida, and my colleague, the gentlewoman from Oregon, already discussed the devastation caused by drunk drivers. Alcoholism is truly a painful struggle with a staggering public cost. Untreated alcoholics incur health care costs at least double those of nonalcoholics. In indirect and direct costs together, the public, the American taxpayer, pays at least \$86 billion because of alcoholism.

I recently spoke with a former radio talk show host and city council member from Minneapolis. Her name is Barbara Carlson. Barbara told me the absolutely heartrending story of a young neighbor of hers killed by a drunk driver. It had so affected Barbara that she called her old station and asked for special air time, just to talk about this terrible tragedy and the scourge of drunk driving in this country.

Mr. Speaker, Barbara Carlson put it best when she said we will never reduce the 17,000 deaths that occurred last year alone in alcohol-related crashes unless and until we address the root cause of alcoholism. That is why we are introducing this legislation to create a national commission on alcoholism, to develop a practical, achievable public policy to deal with this costly, fatal disease. Mr. Speaker, we need a national strategy. To deal with illegal drugs, we have the Office of Drug Control Policy. We do not have a concerted national effort to deal with our No. 1 killer, alcoholism.

Let me just explain this bill very briefly, Mr. Speaker. This bill, H.R. 1549, would establish the Harold Hughes-Bill Emerson Commission on Alcoholism, named after two exceptional public servants who everyone in this body knows and who passed away last year; Harold Hughes, a very distinguished Democrat Governor and former U.S. Senator from Iowa, and Bill Emerson, a colleague of ours, a Republican member from Missouri. Both men were passionate advocates in the struggle

against alcoholism, and both men strongly advocated the creation of this commission, and they handed this off to me to chief sponsor.

This temporary commission to deal with the problem of alcoholism will include 12 appointed members and also the director of the National Institute on Alcohol Abuse and Alcoholism. I foresee prevention and treatment experts on this commission, representatives of Mothers Against Drunk Driving, academic and medical professionals, representatives of the business community, recovering people, and Members of Congress.

The commission will be charged with specific tasks, including ways to streamline existing treatment and prevention programs, and develop a national strategy to counter this deadly and costly epidemic. Within 2 years the commission will be charged with submitting its recommendations to the Congress and the President, and then disband. I strongly urge my colleagues to cosponsor H.R. 1549.

Mr. Speaker, only by addressing the underlying problem of alcoholism will we ever reduce the incidence of drunk driving in America. Again, I thank the gentleman for yielding, and for his efforts in this important effort to deal with drunk driving.

Mr. BILIRAKIS. I thank the gentleman for his great work on this issue, Mr. Speaker.

Mr. Speaker, Mr. Tom Carey, who is a resident of my district in Florida and a co-founder of Remove Intoxicated Drivers, RID, is with us tonight. Tom lost his wife to a drunk driver, and has been an inspiration to those who have lost their loved ones to drunk driving.

Over the past 4 days MADD held its National Youth Summit on Underaged Drinking right here in Washington, DC. The event included high school students from each of the 435 congressional districts across the country. These students joined together to develop creative approaches to fight drunk driving. This afternoon the students who attended the summit met with Members of Congress and their staffs to share their suggestions. I am particularly proud to see students involved in such a noble cause, and I am convinced that their efforts this past weekend will go a long way towards saving lives.

Mr. Speaker, I yield to the gentlewoman from New York [Mrs. LOWEY].

Mrs. LOWEY. Mr. Speaker, I want to thank my colleague, the gentleman from Florida [Mr. BILIRAKIS], for coordinating this very important discussion on the problem of drunk driving in America.

As the House sponsor of the 1995 zero tolerance law for underage drunk driving and the current cosponsor of two pieces of legislation that will strengthen our Nation's drunk driving laws, I wholeheartedly agree that Congress must focus more attention on this issue. As we heard tonight, drunk driving fatalities are on the rise for the

first time in a decade. In 1995, the year for which most of the recent statistics are available, more than 17,000 Americans were killed in alcohol-related traffic fatalities.

The sad reality is that our drunk driving laws have failed thousands of families across the Nation. Our criminal justice system has been too lax for too long on drunk drivers. In fact, impaired driving is the most frequently committed violent crime in America. That is an outrage. A license to drive should not be a license to kill.

Back in 1995, Senator BYRD and I launched an effort with Mothers Against Drunk Driving to close a legal loophole in 26 States that allowed underage drivers to drive legally with alcohol in their system, as long as their blood alcohol content did not exceed the State's legal DWI limit. That loophole existed, despite the lethal consequences of teenagers who mixed drinking and driving. In fact, 40 percent of traffic fatalities, as the gentleman knows, involve underage drivers, and they are alcohol-related.

As a result of this law, 39 States have now adopted zero tolerance laws that send a very clear message: If you are under 21, consumption of alcohol combined with driving will be treated under State law as driving while intoxicated, end of story. These laws have saved hundreds of lives across the country, and I am very hopeful that all 50 States will make zero tolerance the law of the land.

Zero tolerance was an important victory in our war on drunk driving, but we must do more, much more. That is why Senator FRANK LAUTENBERG, Senator MIKE DEWINE and I have joined Mothers Against Drunk Driving, highway safety advocates, law enforcement groups, drunk driving victims, in introducing two important pieces of legislation to strengthen our Nation's drunk driving laws.

Using the proven sanctions methods of the 1984 national minimum drinking age law and the 1995 zero tolerance law, these bills will compel States to lower the legal level of driving while intoxicated to a more reasonable level, and strengthen penalties for repeat drunk drivers.

Mr. Speaker, more than 3,700 Americans were killed in 1995 by drivers with blood alcohol concentration below .1. This is the legal definition of driving while intoxicated in 36 States. In recognition of this problem, 14 States, including Florida, California, Virginia, and Illinois, have adopted laws lowering the DWI level to .08. The .08 laws have also been adopted by many industrialized nations. Lowering the DWI level to .08 is supported by the American Automobile Association, the National Sheriffs Association, the International Association of Chiefs of Police, the National Highway Traffic Safety Administration, and our Nation's largest insurance companies. The American Medical Association even recommends .05 DWI.

Why should we lower the DWI standard to .08? First, .08 is a level of intoxication at which critical driving skills are impaired for the vast majority of drivers.

Second, the risk of a crash increases substantially at .08 and above. In fact, a driver with .08 BAC is 16 times more likely to be in a fatal crash than a driver with no alcohol in his system.

Third, Americans overwhelmingly agree that you should not drive after three or four drinks in one hour on an empty stomach, the equivalent of .08 blood alcohol level.

Last, but certainly not least, .08 laws save lives. A study of the first five States to enact .08 found that those States experienced a 16-percent reduction in fatal crashes involving drivers with a BAC of .08 or higher, and an 18-percent decrease in fatal crashes involving drivers with a BAC of .15 or higher.

□ 1715

Overall, the study concluded that up to 600 lives would be saved each year nationwide if every State adopted the .08 standard. Now there are some who are trying to claim that .08 BAC is too low a level of intoxication and that our bill will target social drinkers who drink in moderation. This could not be further from the truth. It takes a lot of alcohol to reach .08 BAC.

According to the National Highway Traffic Safety Association, a 170-pound man with an average metabolism would reach .08 only after consuming four drinks in 1 hour on an empty stomach. A 137-pound woman with an average metabolism would need three drinks in an hour to reach that level.

We should keep in mind that if you have any food in your stomach or you snack while you are drinking, you could drink even more if you choose and not reach .08. That is a lot of liquor. In addition to lowering the legal definition of DWI, we need legislation to establish mandatory minimum penalties to convict drunk drivers and keep them off our roads. We must stop slapping drunk drivers on the wrist and start taking their hands off the wheel.

That is why The Deadly Driver Reduction Act will require States to mandate a 6-month revocation for the first DWI conviction, a 1-year revocation for two alcohol-related convictions, and a permanent license revocation for three alcohol-related offenses.

Studies by the National Highway Traffic Safety Administration show that about one-third of all the drivers arrested or convicted of DWI each year are repeat offenders. Drivers with prior DWI convictions are also more likely to be involved in fatal crashes. This second piece of legislation will close the loopholes in State laws that too often allow convicted drunks drivers to get right back behind the wheel.

Mr. Speaker, last Friday at the National Press Club, Redbook magazine and Mothers Against Drunk Driving honored five mothers who are the foot

soldiers in this battle. These courageous women have vowed to make something good come out of a tragic loss of a child to a drunk driver.

One of those mothers, Mary Aller, is a constituent from Mamaroneck, NY, whose 15-year-old daughter, Karen, was killed by a drunk driver in 1991 who spent only a few months in jail. Mary went on to establish the Westchester County chapter of MADD. She is truly an inspiration to us all.

The evidence, Mr. Speaker, is compelling that adopting .08 as the national DWI standard and establishing mandatory minimum penalties will reduce the carnage on our Nation's roads. Our Government has an obligation to act when lives are at stake, and we owe it to all those mothers to adopt these bills.

I thank my colleague for having this session tonight. I appreciate the opportunity to share some words with you.

Mr. Speaker, I want to commend to all my colleagues' attention the article "Drunk Driving Makes a Comeback" from the May edition of Redbook magazine, and I submit that article for the RECORD.

[From Redbook, May 1997]

DRUNK DRIVING MAKES A COMEBACK

(By Joey Kennedy)

Anyone who knew Dana Ogletree knew he was a devoted father. Whether the 36-year-old Brooks, Georgia, resident was fishing with his five children, taking them to the Six Flags amusement park, or going to car races with his only son, Dana Jr., he was involved with his family. But today Shandra Ogletree, 37, is raising her children (now ages 10 to 20) alone. On December 20, 1995, as Dana was riding to work with a coworker, the car was struck broadside by a 17-year-old boy who had been drinking and also smoking marijuana. Dana died the following morning, after emergency surgery. Also killed were his coworker, David Harris, and the three young children of David's fiancée, whom he was going to drop off at their father's.

"It has been hard," Shandra Ogletree admits. "We think of all the things Dana won't get to see. The birthdays. The graduations. He won't ever get to walk his daughters down the aisle. And my son won't get to have man-to-man talks with his dad." She is also bitter that the driver received a prison term of only ten years—"though he killed five people." Meanwhile, Shandra notes, "I lost my husband of 19 years, my high school sweetheart. And my children lost a wonderful father."

Dana Ogletree was one of 17,274 people who died in alcohol-related traffic crashes in 1995, the last year for which statistics are available. Each of those deaths represents a catastrophe for another American family.

What's shocking to many is that the figure also represents, for the first time in almost a decade, an increase in the number of drunk-driving fatalities compared to the preceding year. The long national campaign against drunk driving has stalled, it seems. While deaths from drunk driving are up, fund-raising for Mothers Against Drunk Driving (MADD) is down, as is the amount of media coverage given to the drunk-driving issue. Efforts to lower the legal blood alcohol concentration from .10 to .08 percent continue to founder in many states, thanks to vigorous lobbying by the liquor and hospitality (restaurant and bar) industries. Nationwide, the number of arrests for driving

while intoxicated went down from 1.8 million in 1990 to 1.4 million in 1995.

Despite these discouraging facts, the anti-drunk-driving campaign—begun by MADD in 1980 and joined by legislators, the law enforcement community, and other public safety groups—can look back on notable successes. Public awareness of the issue has dramatically improved. "There was a time when drunk driving was treated pretty much as a joke, like some kid caught with his hand in the cookie jar," says Dwight B. Heath, Ph.D., an anthropologist at Brown University who studies behavior related to alcohol. "Not anymore." Efforts by MADD and others have led to raising the minimum drinking age to 21 and to so-called zero-tolerance laws that punish underage drinkers who are caught driving with any alcohol content in their blood. "You've heard so much about drunk driving that there is a perception that it's a problem either fixed or almost fixed," says Katherine Prescott, national president of MADD.

But the problem is not fixed, as so many families can attest. In fact, 41 percent of all traffic fatalities involve alcohol. While the anti-drunk-driving message has clearly gotten through to many Americans (see Redbook's national survey, page 93), thousands of husbands, wives, and children are still being killed by those who party hard and get behind the wheel. "There's still a segment of our population that thinks it's perfectly appropriate when you drink, to drink all you can," says Susan Herbel, Ph.D., vice president of the National Commission Against Drunk Driving. Researchers who conducted a recent large-scale national survey of drinking-and-driving behavior estimated that there were 123 million incidents of drunk driving in the U.S. in 1993.

Is there any way to jolt legislators and the public out of their complacency, make drunk driving a hot issue again—and make the roads safer for our families? Anti-drunk-driving advocates are urging action on a number of fronts.

GET THROUGH TO THE GUYS

If drunk driving is, as MADD says, a "violent crime," then who is committing it? Says Dr. Herbel, "Drunk driving is very much a male problem." Men are four times more likely than women to drive after they've been drinking, one study found. And the segment of the population most likely to drink and drive is made up of white males between the ages of 21 and 34, in blue-collar jobs, with a high school education or less, according to a study by the Harvard School of Public Health.

How to stop them? Strict law enforcement—sobriety check-points, saturation patrols by police departments—does change drinking-and-driving behavior in the short term. But Dr. Herbel points out that these efforts require a huge commitment of resources by state and local police, and their effects taper off unless they are kept up consistently.

"There are those who feel you can rely on enforcing laws to solve the drunk-driving problem, but I don't agree with that," she says. "Until drunk driving gets to be a behavior that is just not socially acceptable, we're not going to stop it." Dr. Herbel believes the anti-drunk-driving message should be modeled after the antismoking campaign, with its many community-awareness programs and education efforts that start in grade school.

Employers could play a role as well through education efforts and even spot-checks of the status of employees' drivers' licenses. "The men who are most likely to drink and drive usually work, and their jobs are important to them," Dr. Herbel says.

"Employers should make it clear that drinking and driving is not acceptable." Better yet, employers could refer at-risk workers to counseling programs—so long as local communities cooperate by making such programs readily available.

The best way to reach at-risk men may be through their wives or girlfriends. Focus groups have found that men aged 21 to 34 are more likely to be influenced on the drinking-and-driving issue by the women in their lives than by public service announcements, bartenders, or male friends, according to Bob Shearouse, national director of public policy at MADD. Experts are unsure how to translate this finding into a public-awareness campaign, however. The Harvard study on at-risk men found that some of their wives and girlfriends "described fear of verbal or even physical retribution" for trying to stop drinking-and-driving behavior. "For the unlucky woman involved with a man who has a tendency to be violent, especially after drinking, intervening could be dangerous," note MADD's Prescott. "You have to be careful about advising women to do that."

LET THE MEDIA SEND THE MESSAGE

While a certain segment of males may be the most likely to drink and drive, they obviously aren't the only culprits; the gospel about drunk driving must be preached to everybody. And Jay Winsten, Ph.D., director of the Center for Health Communication at the Harvard School of Public Health, says the message is fading and deaths are up for one reason: "The mass media is paying far less attention to this problem than it was several years ago."

Since the issue of drunk driving was widely covered in the eighties and early nineties, it stands to reason that there would be fewer news stories on the issue now. After all, why should journalists report on a story that already feels familiar to much of the public? Because doing so saves lives, Dr. Winsten says. He cites a period of high media attention in 1983 and 1984—a time when MADD was fresh on the national scene—that was accompanied by a drop in alcohol-related deaths. In 1986, Dr. Winsten says, deaths went up and remained fairly level until 1988, when the Harvard School of Public Health recruited the entertainment industry to help promote the notion of the designated driver (an idea imported from Scandinavia). During the next four television seasons, more than 160 episodes of prime-time shows, including Cheers, L.A. Law, and The Cosby Show, featured designated drivers in some way, and networks sponsored public-service announcements. The result? A 26 percent decline in drunk-driving fatalities over that four-year period.

"These days, we're getting designated-driver mentions in about a half dozen episodes per season," says Dr. Winsten. "The public has bought the concept of the designated driver, but they have to make the decision to use it over and over and over again. And they rely in part on cues and reminders from the media."

MADD's Prescott acknowledges that her organization is no longer a "hot topic" with the media. "It's as though our having becoming credible and being successful hasn't helped us with the media. Now, we're like all the other charities." Further crowding MADD's issue are major news stories that thrust other worthy causes, such as car-air-bag safety, into the spotlight. "That's been a major topic of conversation in Washington. Now, the last thing I want to do is offend anyone who has lost a child," emphasizes Prescott, who herself lost a son to drunk driving. "But we're talking about a dozen deaths in 1995, when we know that more than 17,000 people died in 1995 because of drunk driving."

As advocates for a variety of causes, from breast cancer research to recycling, have discovered, those who want coverage for their message must find ways to make it feel fresh. Dr. Winsten thinks that, for drunk driving, a debate over "social host responsibility" might serve that purpose. "Should you be liable for a civil lawsuit if your party guest kills someone on the way home, as is already the case in some states?" he asks. "People disagree on this issue, but it doesn't matter as long as the issue of drunk driving is being discussed."

One of the ways MADD will bid for a higher profile this year is to focus on drinking by people under age 21. "Our current environment makes it acceptable for underage people to drink, to walk into a store and buy liquor even though it's illegal," Prescott says. "We think this youth initiative will get the public's attention. Underage drinking has to be dealt with by communities, schools, churches, and homes." MADD will kick off its effort this month by hosting a National Youth Summit on Underage Drinking in Washington, D.C. Student delegates from each of the nation's 435 congressional districts will discuss possible solutions to the underage-drinking problem and deliver recommendations to members of Congress.

And in June, the National Highway Traffic Safety Administration hopes to stir public debate when it launches Partners in Progress, an ambitious program that has brought together numerous groups to develop strategies to curtail drunk driving. Their goal: to reduce yearly alcohol-related fatalities to no more than 11,000 by the year 2005.

TAKE ON THE ALCOHOL LOBBYISTS

Anti-drunk-driving advocates have also been tangling with the liquor and hospitality industries over the issue of lowering the legal blood alcohol concentration limit from .10 to .08 percent, an effort that has thus far been successful in only 14 states (see "How to Save Hundreds of Lives This Year," page 92). In practical terms, .08 means that an average 160-pound man can still have four drinks in one hour on an empty stomach before he would reach the legal limit for driving—a level that seems surprisingly lenient to many people. Dr. Herbel says the liquor and hospitality industries are fighting hard against the .08 limit because they see it as a step toward zero tolerance—that is, making illegal any amount of alcohol in the bloodstream of someone who is driving—which could, obviously, have a big impact on their businesses. "Those industries believe that, as soon as .08 passes in all states, somebody will start a movement for .06 or .04," says Dr. Herbel.

While that battle is being waged, anti-drunk-driving advocates are pursuing other legislative remedies: the Crime Victims' Bill of Rights, sponsored by Senator Dianne Feinstein (D-CA), which would ensure that victims of all kinds of crime, including drunk driving, have certain basic rights; and the Deadly Driver Reduction Act, which would entail license revocation for drunk-driving offenders.

The boy who killed Dana Ogletree was an underage drinker. "Where did he get that beer?" asks Shandra Ogletree, angry that the details haven't come out. "Did someone sell it to him? Or did he have an older friend buy it for him?"

Until everyone who might be responsible for a drunk-driving accident—not only the drinker, but store clerks, friends—recognizes his or her role, the problem won't be solved, Shandra argues. And thousands of families will continue to suffer the consequences.

Mr. BILIRAKIS. Mr. Speaker, I thank the gentlewoman for sharing in

this very important special order and for all of her work and research and the study on this subject. We oftentimes ask ourselves, what is the proper role of Government? Certainly, we on this level have not really done enough on this subject, and we need to continue to look at it and do more.

Mr. Speaker, I recognize the gentleman from California [Mr. CAPPS].

Mr. CAPPS. Mr. Speaker, I thank the gentleman for yielding, and I certainly want to commend him for holding this very important special order to call attention to the problems of underage drinking and drunk driving.

Mr. Speaker, few tragedies bring as much pain to families and communities as fatal accidents caused by drunk driving, especially when young people are involved. The community of Santa Barbara, which I am very proud to represent, was struck by this plague over the weekend when 3 college students were killed when their truck veered off Gibraltar Mountain road.

Alcohol was a factor in this accident, and all 3 were under the legal drinking age. My heart truly goes out to the grieving family and to the friends of these young people, many of whom I know personally. Nothing that we can say or do today will bring them back, but we must all try to learn important lessons from this terrible loss of life.

Mr. Speaker, it is sometimes useful for us in Congress to share personal stories from our own lives in order to advance important policy objectives. The issue of drunk driving has had a profoundly personal impact on my own life. On May 23, I will commemorate the 1-year anniversary of a horrible car accident that nearly claimed my life and the life of my beloved wife Lois.

Returning home from a campaign appearance, our car was struck by a drunk driver. I had to be cut from the wreckage with the "jaws of life." I suffered serious injuries that required surgery and months of rehabilitation. This coming week, next week, my family and friends will gather together for a celebration of gratitude for all those who saved us, helped us heal, brought us back to life.

I will always be grateful to the police, to the rescue personnel, to the doctors, the nurses, the physical therapists, family, and others who brought us back to life. Without them, I would never be standing here in this great Chamber this evening.

But tragically, many families are not as fortunate as we were. And that is why it is so important to convene events like MADD National Youth Summit. This week, hundreds of young people, including Amy Yglesias from Santa Maria, CA, which I am also very proud to represent, have come to this Nation's capital for this unprecedented summit meeting. Here, they will discuss and develop solutions to the problems of underage drinking and drunk driving.

Back home in our district, MADD is also sponsoring important events. This

past Sunday, for example, my wife and daughter and I ran in a MADD-DASH, a 5-mile benefit run near Highway 154, the very road on which our accident occurred.

Congress can pass important laws on this subject. We can pass laws on the drinking age, on alcohol accessibility, on alcohol advertising. But only when our young people are fully engaged in the battle themselves will we have a chance to succeed.

I commend Mothers Against Drunk Driving and all those who worked to make this week's summit a reality and for putting together innovative events in our districts.

Mr. Speaker, I know my colleagues on the floor this evening all join me in pledging to work toward the day when our communities will no longer suffer the heartbreaking pain brought on by drunk driving accidents that claim the lives of young people and too many of our citizens.

Mr. Speaker, I thank the gentleman for the leadership he is giving to this effort.

Mr. BILIRAKIS. Mr. Speaker, I thank the gentleman for sharing his own personal story with us. I am not sure that there are too many Members of Congress who do not have similar stories to tell either about close friends or family members.

Mr. Speaker, Mothers Against Drunk Driving should also be commended for the Youth in Action Campaign, which is dedicated to educating students about the dangers of drinking and driving. I mentioned a statistic earlier that more than 17,000 individuals died in 1995 from alcohol-related crashes. It is all too easy for us to forget that this number is not just a statistic. These were 17,000 people who also had stories. They had families and friends who cared for them and loved them dearly.

One of those stories happened in Spring Hill, FL. On December 22, 1995, Monica Nicola and her 2 daughters Danielle, 9 years old, and Stephanie, 8 years old, went to the mall to have their pictures taken with Santa Claus. After having their pictures taken, Monica was driving her daughters home when a van in front of her car suddenly swerved. By the time Monica realized that the van was swerving, it was too late to react. A car had crossed the centerline, missed the van and hit Monica's car head on.

When she regained consciousness, Monica realized that she had a broken leg. She could see Danielle, who suffered a broken arm and bruises, but she could not see 8-year-old Stephanie. Stephanie was pinned down, out of sight, and died immediately at the scene.

Stephanie was not the only one who tragically lost her life in a terrible accident. A passenger who was riding with the drunk driver also died. Monica and the man who caused the accident were airlifted to the hospital together. The man's breath smelled so strongly of alcohol that it was overpowering.

It turns out that the driver had a number of accidents since 1982, several DUI's, no license, and no insurance. But none of that stopped him from driving that night. In January of 1997, the driver was sentenced to 40 years, 40 years in prison, but not before the Nicola family had to endure an entire year without justice.

Today the Nicola family, John, Monica, and Danielle, reside in Pinellas County, FL, my county. The Nicolas are not alone in their suffering, but their story is so very important for all of us to hear. It awakens us to the fact that there are real people behind the statistics we hear so often.

Drunk driving knows no social or economic boundaries. Indeed, I am sure that we all know, as I said earlier, of a relative, friend, or celebrity who at one time or another got behind the wheel of a car after one too many drinks.

Many Floridians may recall the story of Olympic diver Bruce Kimball and the night he killed two teenagers in Brandon, FL. Ironically, Bruce Kimball has experienced both sides of a drunk driving collision, first as the victim and then as the offender.

For those of you who are not familiar with this story, let me take a few minutes to review this tragic story. Bruce Kimball won a silver medal in diving at the 1984 Summer Olympics. Just prior to the 1988 Olympics, he had a few drinks and got in his car to drive. The Houston Chronicle wrote an article on Bruce in October of 1994 which recounts his story. To paraphrase the Chronicle, his father Dick was, and still is, the diving coach at Michigan, and so Bruce Kimball gravitated naturally to that sport. Bruce blossomed quickly, eventually winning 14 Junior Olympic national titles, and at 17 stamped himself as one of this country's top prospects with a fifth-place finish at the 1980 Olympic trials. The following October, as he was driving friends home, his van was hit head on by a drunk driver and suddenly Bruce was fighting not only for his future, but for his life as well. His skull was cracked. Every bone in his face was broken. His spleen was ruptured. His liver was lacerated. His left leg was broken. His bleeding was torrential, and 14 hours of reconstructive surgery was needed to put him back together.

Yet, a mere 9 months later, he returned to diving. He was often referred to as "the Comeback Kid." And when he won a silver medal in platform diving at the 1984 Games of Los Angeles, he stood as a true profile in courage.

As he trained in Florida for the 1988 Olympic trials, he was still considered the second best diver in the world. Those trials were less than 3 weeks away on the night of August 1, when Bruce Kimball roared down a dark and narrow street in Brandon behind the wheel of a speeding sports car.

About 30 teenagers were gathered at the end of that dead-end street in a place they called the spot, and in an instant Kimball plowed into them, killing 2 of them and injuring 4 others. His

blood alcohol level, a prosecutor later claimed, was .2, which was twice the legal limit under Florida law. His speed at impact was estimated at 75 miles per hour.

Kimball was sentenced to 17 years in prison, but in November 1993, after undergoing extensive drug and alcohol rehabilitation at four different Florida institutions, he was released after serving 5 years. After being released, Bruce started a part-time job in a Chicago high school coaching diving. Two times Bruce Kimball has had the opportunity to rebuild his life. Unfortunately, the victims of this tragedy will never have that chance.

Mr. Speaker, the stories about Stephanie Nicola and Bruce Kimball remind us that drunk driving can affect anyone's life. Yet, what is most unfortunate is that these terrible events did not have to occur. They could have been avoided had the drivers taken responsibility for themselves and not driven their cars while impaired.

These drunk drivers are not evil people, Mr. Speaker. They are just irresponsible. They go out on the town to have fun. They have a few too many drinks and, believing that they are okay to drive, turn the ignition on and zoom off.

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If they are lucky, they make it home. But all too often something terrible happens, someone gets hurt or, even worse, someone gets killed.

Last week a North Carolina jury held a drunk driver Thomas Jones to the highest level of accountability for killing two Wake Forest University students. The jury sentenced Mr. Jones to life in prison for his actions.

I believe that this verdict, Mr. Speaker, is evidence that Americans are no longer willing to tolerate this type of irresponsible behavior.

Much of this change in attitude is in large part due to the grassroots organizations throughout the United States which have taken the lead in educating students and parents about the dangers of drinking and driving. Groups like MADD, CADD, SADD, and RID have made tremendous progress in promoting responsibility and raising awareness about the dangers of drunk driving. These grassroots organizations have pushed for legislative changes regarding drunk driving.

In my home State of Florida, they played an integral role in lowering the legal blood alcohol content from .10 to .08. According to the Centers for Disease Control, States that have lowered the legal blood alcohol content to .08 have experienced a significant decline in the proportion of fatal crashes relative to other States which have not adopted these laws.

Other examples of success by grassroots campaigns in Florida during the past 10 years include raising the legal drinking limit to 21 years of age and instituting mandatory license revocation for anyone caught drinking and driving.

However, Mr. Speaker, I am convinced that the most significant accomplishment by drunk driving opponents has been, as mentioned earlier, the nationwide awareness and acceptance that drinking and driving is a serious problem. I want to commend all of those who have given their time and energy to make this cause very worthwhile.

Mr. Speaker, we must continue our fight to end this terrible problem which affects so very many of us. We in Congress have a moral obligation to join together with grassroots organizations in raising the awareness about the dangers of drunk driving. I thank my colleagues for joining me in this special order to strengthen our commitment and resolve to keep our Nation's roads safe from drunk drivers.

I have a number of facts here. I call it the Fact Sheet on Alcohol-Impaired Driving. This is from the Centers for Disease Control, dated May 13, 1997. I am going to submit that as a part of the RECORD in the interest of time here this evening.

Mr. Speaker, I yield to the gentleman from Ohio [Mr. STRICKLAND].

Mr. STRICKLAND. Mr. Speaker, I thank the gentleman for yielding to me. I am happy to join the gentleman tonight. I want to thank him for taking the time and the effort to bring this critical problem to our awareness.

Young people unfortunately oftentimes do not plan ahead as they should. They sometimes act impulsively when they should not. As I have visited many high schools in my district, recently have been encouraged to see banners decorating the hallways and the lobby areas reminding young people that, as prom season approaches, this is a very critical time. It is a time when they need to be sensitized to the dangers of drinking and driving.

I would like to say that I am encouraged as I have seen high schools especially making special efforts to see that prom night is a time of safety as well as entertainment and enjoyment for our young people. And they have done that by not only trying to educate the young people regarding the dangers of drinking and driving but also making after-prom activities available which in some cases last all night in a safe and secure and well-supervised setting.

I think the gentleman is right. The greatest effort that we can make in terms of keeping our young people safe during this prom season is to educate them to the dangers and then to take those steps necessary to make sure that their activities are well supervised. Nearly every year in my State of Ohio, we read some tragic story about young people who have gone to the prom and then had a tragic accident. I am hopeful that this year in my State and in my district as well as across the country that the efforts that the gentleman and others are making to raise this issue in terms of public awareness will prevent such a tragedy from hap-

pening. I am happy to join the gentleman and to thank him for his efforts.

Mr. BILIRAKIS. Mr. Speaker, I thank the gentleman from Ohio, who is a very busy and active member of my Committee on Commerce. And I also thank the gentleman for reminding us that this is prom season. We have talked about MADD and SADD and RID and CADD, et cetera. There are other organizations out there that have helped. But one of the things that has really pleased me is for instance Busch Gardens down in Tampa, FL, and so many other private entities, if you will, have gotten really involved and have invited the young people into their facilities during this period of time so that they can have a good time and not have to travel long distances and go from one location to another for their proms. All of that is helping. Of course what we do here is going to be of great help, too. I thank the gentleman.

Mr. Speaker, I yield to the gentleman from Indiana [Mr. SOUDER].

Mr. SOUDER. Mr. Speaker, I appreciate the gentleman's leadership on this issue. In addition to commenting on this, there is another related matter I want to raise tonight. I appreciate the gentleman yielding some time.

I met earlier today with Michael Larrance from Hamilton High School in my district who is out here for the conference. He has formed a group at his high school of students who are committed not only to trying to combat alcohol abuse but also drug abuse, teen pregnancy and other issues and the need to stress abstinence in these areas.

I worked recently to put together a play that he has taken to other schools, too, to try to address this. I think it is very important that we encourage efforts among the students themselves to combat this. Having a son 17 who is a junior in high school and a daughter who is 19, I am very concerned when they have hit prom season and a lot of the spring seasons and the various trips that they go on, about what they and their friends, and you always worry about who they are riding with, not only their behavior.

I also know that my friend, Senator Tom Wyss, in Indiana has been battling hard with open container laws and various things in Indiana that have been huge fights because there is a lot of money that goes into trying to keep us from putting difficult standards on. But the zero tolerance type of policies a lot of schools are putting in, efforts of police forces to crack down on this, is not only good for our kids but for the rest of us. It is frightening to think of somebody who is alcohol drenched or drug crazed driving down the highway, and you are minding your own business and all of a sudden your life is taken out of your hands because of someone else's behavior.

One of the things I visited over 20 years in the last 6 months, talking

about particularly narcotics abuse but including alcohol and tobacco abuse, and one of the things that I have become concerned with is a bill that we are dealing with later this week regarding narcotics. I am afraid and I am sorry to announce this, but apparently our war against drugs is over. That is the good news. Unfortunately, if this bill we are working on later this week on international issues survives the legislative process, the drug producers and the drug shippers will have won instead of our Nation, because we are now going to give up the current drug certification process.

Many Americans will wonder what I am talking about. Section 490 of H.R. 1486 ends, repeat, kills off provisions in current law which require the President to certify to Congress if a country produces illegal drugs or ships them to kill U.S. children. In place of the current law, the bill the House is considering replaces drug certification with a pile of loopholes and exceptions that are virtually certain to mean no country, including Mexico, will ever be decertified for U.S. foreign aid.

Here is what section 490 does. It allows the President to, and I quote, "to the extent considered necessary by the President," end quote, to hold back foreign aid or instruct the U.S. representative at the World Bank to vote against loans to countries if a series of conditions suggested in the legislation are violated.

Just to be sure that the law is absolutely weak, the legislation allows the President to ignore even the new and timid standards if acting against a pro-drug country, including Mexico, will, and I quote again, "affect other United States national interests."

When I read this provision in the bill, I thought to myself, what a nice gift this will be for President Clinton's weak-on-drugs choice to be U.S. Ambassador to Mexico to take with him. We are looking at appointing an ambassador to Mexico who believes in so-called medicinal use of marijuana. There is no medicinal use of marijuana.

There is a medicinal use of THC, which is found in other drugs. It is a back-door effort to legalize drugs. If the policy of the Congress is not to stand up when we send an ambassador to Mexico who is supporting back-door legalization and we take out the drug certification process, what message is this to the kids? We are telling them on one hand, do not drink, do not do drugs. On the other hand, what we are saying is, if trade is more important and all of us, and I know in Florida it is important, in Indiana it is increasingly important. Nobody is saying that trade is not important, nobody is saying we do not have huge immigration questions to deal with. At the same time, we cannot be so concerned about risking some trade or irritation as we work through this that we back off our focus on the drug war.

So I hope to have more to say on this later this week. But I wanted to take

this opportunity to come down and say that sometimes we only talk about marijuana and cocaine, and we forget that alcohol is the No. 1 problem among teens. But we also need to understand as a Nation that these things are closely interrelated, and abusers of one are abusers of another. We need to send a clear, concise, consistent message across the board that we stand against this abuse. It is critical for our country, for the future of our young people. It is important in our international policy. We cannot send our children the message that money is more important to us than our lives and safety and their own character development which gets impaired when you use any kind of narcotics, whether it is alcohol, marijuana, cocaine, heroin.

I know in Florida we have had an outburst of the heroin problem, too. We need to look at all these things. I commend the gentleman again tonight for his efforts on drunk driving and all those teens and parents who have been involved in SADD and MADD and those who have been particularly affected by this. Nothing is more tragic than to talk with somebody, as we have had in all of our districts and all over the country, somebody who has lost a life—lost a mother, a father, or lost one of their cherished children because somebody could not handle the alcohol and somebody was not responsible and because of that, somebody else is dead.

I thank the gentleman for his efforts and thank him for yielding me time tonight.

Mr. BILIRAKIS. Mr. Speaker, I thank the gentleman for reminding us that these drugs, if you will, and alcohol are certainly very interrelated. And our wars, in terms of trying to protect our young people, must include both drugs as well as alcohol and other ills that are really out there, so many of them.

I thank the gentleman for his great work on this subject.

Mr. PAPPAS. Mr. Speaker, just a few weeks ago, several of my colleagues and I came to the floor to discuss the increasingly growing problem of juvenile crime in our Nation. All too many of the stories and statistics that I heard my colleagues discuss stemmed from alcohol abuse.

Alcohol abuse among our Nation's youth has indeed become a very serious problem. According to a recent Washington Post-ABC News survey of teens and parents, alcohol abuse was identified as the biggest drug problem facing young people today. I have also seen several studies and reports that reveal that possibly more than half of the country's population that is over the age of 12 is currently using alcohol.

Let me just repeat that: more than 50 percent of the Nation's teenagers use alcohol. We are talking about 8th, 9th, and 10th graders.

Among other things, this is the same age when many young people are first learning to drive. Simply stated, the two do not mix. We cannot begin to tackle the problems of drunk driving without at the same time addressing underage drinking.

For the past few years, I have stood on the steps of the Somerset County Courthouse in a candlelight vigil as the names of victims of drunk driving are read. I pray that next year fewer names are read off.

We are all probably aware of the tremendous peer pressure that so many young people face today. But this week, students from across the country gathered in Washington for the National Youth Summit To Prevent Underage Drinking. These students discussed ideas and made recommendations to curb this problem.

The idea of students and elected officials working together to tackle this problem has been very successful in Somerset County, NJ. While serving as a Somerset County freeholder, I helped form the Somerset County Youth Council in which I asked local school principals to recommend young people to come together and form a council to advise the local elected officials about the pressures facing our youth and strategies for addressing those needs.

This youth council became involved in a wide variety of youth related efforts such as substance abuse prevention ideas, self-esteem building projects, peer leadership programs, and community service and civic projects.

I am also proud to say that I have been involved for a number of years in the 4-H program, and have always felt that this program goes a long way in directing our Nation's youth in positive directions.

I applaud the efforts of the students that came to Washington this week. I wish them well as they return home to share their efforts and recommendations with their classmates and friends. I also want to call upon the Nation's elected officials, leaders, teachers, and parents to encourage these efforts and provide a positive model for these youngsters.

Maybe, if we all put our shoulders to the same wheel, we can work to create a brighter future for America.

NAFTA UPDATE

The SPEAKER pro tempore (Mr. SNOWBARGER). Under the Speaker's announced policy of January 7, 1997, the gentlewoman from Ohio [Ms. KAPTUR] is recognized for 60 minutes as the designee of the minority leader.

Ms. KAPTUR. Mr. Speaker, I am pleased to be the first speaker this evening in a special order devoted to the North American Free Trade Agreement, NAFTA. Tonight we are going to talk about, since the agreement was signed and passed over the objections of many, many of us here in the House, passed in January 1994, what have been the repercussions in our country and what have been the repercussions in the other two nations on the continent, Canada and Mexico, that are participating in this agreement with us?

This past week we saw our President travel to Mexico and to other nations of Latin America to promote additional nations being added to the NAFTA accord. And the question many of us have in the Congress today is, based on the results of the existing NAFTA, the flaws inherent in that agreement, why would anyone want to