□ 1300

We know without a doubt that for every \$1 we put into prenatal care, much of it is nutritional services to make sure that women are healthy, that babies are healthy. For every \$1 we put into prenatal care we know we save more than \$6 immediately in intensive care costs, many times related to low birthweight babies.

The WIC Program works. It is one that makes sense. It ought not to be a partisan issue. I would strongly urge that my colleagues in the majority come back with a process that we can all support to guarantee WIC funding.

I also need to respond as a member of the Committee on Agriculture for just a moment, because in addition to providing direct nutritional food and services for women and children to guarantee that they are healthy and have a good start in life, this is also a wonderful opportunity to provide additional markets for agricultural products.

Michigan is strong in agriculture. We have more agricultural products that we grow than almost any other State in the Union. We are very proud of the fact that Michigan farmers have expanded markets for fresh produce through the farmers market nutrition program, which in Michigan we call Project Fresh. This is a way for our farmers to provide fresh vegetables, fresh fruit, to women and children who are in need of that, and it also allows them to have another market for their goods, so it works on all accounts.

It is good for agriculture, it is good for families, it saves costs on health care, and I am very hopeful and urge that our colleagues who are determining the way to proceed on the rules regarding WIC funding will come back with an open process that we can embrace in a bipartisan way to guarantee that one of the most cost-effective and one of the most commonsense programs provided through Government, the WIC Program, is allowed to continue in a way that would allow our women and children in this country to be healthy.

WILL COCKROACHES BECOME PROTECTED UNDER THE ENDANGERED SPECIES ACT?

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

Mr. KNOLLENBERG. Mr. Speaker, I think we should stop the presses. It appears that the EPA has their facts wrong again. After weeks of chatter about proposed new clean air standards and their urgent necessity, this week we find out that the EPA has been given some incorrect or bogus data, certainly very questionable.

First, they cried that 20,000 people are killed every year by PM 2.5 pollution. Then it was revised to 15,000. The EPA Administrator, Ms. Browner, pa-

raded before the Committee on Appropriations and my subcommittee to tell us how important these tough standards are and why they were needed.

Now we find out it is not 20,000, not even 15,000 lives that are at stake, that we are not even clear as to how many there are. In fact, scientist K. Jones, whose name appears along with some commentary in yesterday's Congress Daily, suggests that because of inadequate research, that EPA's first revision of their data now shows it could be below 1,000, less than 1,000 people are affected by the finer particulate matter pollution.

What is the EPA going to do now that this information has emerged? I believe they are hell-bent on imposing tougher clean air standards on our communities, businesses, and residences, even though the air quality across the country, across America, has improved immensely since we began this quest. After Mr. Jones, a scientist, caught them in their first mistake, how can we really trust the EPA data now when billions of dollars in costs are at stake for our communities?

I believe we have to get the facts straight before asking our local communities to pay up for costly regulatory reform. Also I might add, in addition, this week the New England Journal of Medicine, which is often quoted certainly by EPA as their source, has, it seems, driven another stake into the EPA drive to impose costly tougher air quality standards on

After hearing about how many children, for example, are hurt by PM 2.5, this Nation's most respected health journal reports that cockroaches are more of a problem than the air. That is right, cockroaches. The study, and it was not just a short-term study, it was for 10 years, focused on children and found that those exposed to cockroaches are more likely to suffer from asthma. They are over three times more likely to be hospitalized, and 80 percent more likely to have unscheduled doctor visits for asthma. Yet the EPA says it is not the bugs, it is the air. Our communities, businesses, and people are still going to be stuck with the EPA's bill.

I just hope as we rid our communities of the roaches to fight asthma, they do not become protected under the Endangered Species Act.

Let us get the facts straight before we impose new air standards on our communities. One scientist suggests there should be a 5-year moratorium, a 5-year study, before we present any facts, any conclusions.

The EPA seems determined in spite of the conflicting data to move ahead. They seem to have a sense of urgency that is wrapped up in the willingness to accept anything, any information that will justify their personal proposal, their own idea, about what is the proper proposal. They ignore, along the way, common sense and cost as part of the equation.

DEVASTATION CAUSED BY FLOOD-ING OF THE RED RIVER IN NORTH DAKOTA

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

Mr. POMEROY. Mr. Speaker, I represent the State of North Dakota. I am the only Representative in Congress that North Dakota has. It is my responsibility to advocate for North Dakota at a time when we are reeling from the worst natural disaster we have ever experienced.

Many of the Members are aware of the pain that we have suffered in light of the floods of the Red River this spring. The national media coverage has documented the destruction of the city of Grand Forks, N.D. These pictures, I believe, tell what words cannot in terms of just what a devastating event this was.

This is a street sign at the corner of Fourth Street and Eighth Avenue. You can see the water right up to the bottom of the sign. At this juncture the water was literally in excess of 6 feet, flooding neighborhoods, street after street after street. Even in areas of town that were not hit with this depth of water, the water still was sufficient to fill basements and come up on the main floor. We are still dealing with the devastation that flood water causes to homes and personal belongings.

At a time when we thought things could not get any worse, they did get worse. Fires broke out in downtown Grand Forks, destroying our historic business district. Eleven buildings burned. A fireman who fought the fire explained it this way. He said it was so unusual, because water is usually the fireman's friend. "In this instance it prevented us from stopping the destruction of these buildings. We were simply incapable of getting our equipment to the fire. Then when we dove below the water to hook up the hoses to the hydrants, water pressure had failed and we had to stand by and watch the buildings burn.'

The net result was reflected by this picture, a business district in smoldering ruin, a city standing in water. The water has receded, and the picture that we would see in Grand Forks if we drove around the neighborhoods today is of huge mounds; not mounds of snow that we often see during some of our winters, but mounds of wet, wrecked sheet rock removed from basements and main floors, commingled with belongings, belongings that now appear just as rubble but before the flood were baby pictures, wedding pictures, letters from relatives that may not even be living any longer, priceless family mementoes, the things that make a house a home, all destroyed in the water's wrath.

That has left the people of Grand Forks, N.D. in a very terrible situation. We have literally hundreds of homes in the flood water, and I commend the city leaders because they are

stepping up to the plate, and they are not going to reconstruct everything just as it was, to face the threat of flooding in the future. They want to remake this community. But in order to do that, we need to get on with the program that buys homes in the floodway and pays owners the cash they deserve so they can get on with their lives.

That would have been permitted under the Thune amendment to the disaster bill, had the rule passed. Had the rule passed, we would be debating that right now, and we would be that much closer in terms of getting relief

back to those who need it.

Immediately following the disaster there was an outpouring of support across the country the like of which we have never seen in North Dakota. It was followed by the visit by the President of the United States on a Tuesday, the Speaker of the House on a Friday, and the majority leader of the House on the following Monday. Leaders of both political parties came into the area, expressing concern and support for the people as they tried to rebuild their lives. Those people are dealing with some problems that we cannot even imagine. We have to get after this disaster bill in order to address them.

Let me read to the Members a question presented to the city commission the other night at a tumultuous city commission meeting attended by more than 1,100 displaced homeowners: "What am I supposed to do? I have no place to live, I can't make my mortgage payment, I'm commuting 90 miles one way to work, my kids are living with relatives. Will I have a place to live in 3 months, 6 months, a year?" The only answer the mayor and city commissioners could give is, we do not know. Congress is deliberating a disaster package.

I hope that we do not stray from the initial inclination to make a strong bipartisan response in support of people who need help, people who have been devastated with natural disasters, including the floods in Grand Forks. I hope we can rise above the temptation that often so afflicts this body of falling into partisan recriminations and dealing with everything but the thing that ought to be before us. What is before us is disaster relief to people who need it. I urge both parties, all Members of this body, to to pass a disaster supplemental bill just as fast as possible. My people really need the help.

INTERNATIONAL CHRONIC TIGUE IMMUNE DYSFUNCTION SYNDROME AWARENESS DAY

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

Mr. FORBES. Mr. Speaker, I rise today again to ask my colleagues to join with me in recognizing that Monday, May 12, was International Chronic Fatigue Immune Dysfunction Syndrome Awareness Day, a long name for a disease that is relatively new and still unknown to too many physicians around the world.

Last night on this floor I provided a brief overview of the problems facing chronic fatigue syndrome, or CFIDS, and the dilemma that this debilitating disease poses for so many people. Now I would like to put more of a human face on this malady and share a few of the struggles of some of the individuals that I am privileged to represent on Long Island, a place that has an inordinate number of cases of chronic fatigue syndrome.

Mr. Speaker, as I stated last night, we have several individuals in our area of Long Island that do have an inordinate number of cases in that region. It is absolutely heartbreaking for me to talk with parents and children and neighbors and spouses, too many children, frankly, who suffer from the enduring pain and pervasive weakness brought on by chronic fatigue syndrome.

As Members can imagine, to see vibrant, energetic people stricken with a mysterious ailment that medical professionals frankly have not been able to figure out how they can cure, and too many, too many doctors believe does not exist or may be caused by some other malady is sad and it is confounding.

It makes these people who are suffering from this disease very, very angry, frankly, because it is enough to know that you are bone tired, that every joint in your body hurts, that you cannot lift your head off the pillow anymore, and to be basically dismissed by supposedly intelligent, well-trained physicians that it is depression, or it is something you just need to snap out of.

When we talk to these folks, we understand the very important dilemma that they face. I refer, for example, to Alison Burke, who comes from Coram, Long Island. She is a mother with two children, and she has been stricken with chronic fatigue syndrome. Unfortunately, the high preponderance of these cases actually affect women who are in their thirties, and too many children, as I said previously.

Before chronic fatigue syndrome Alison was an energetic mom with two children. She worked 30 hours a week for a dentist. Then one day she woke up feeling absolutely ill, like she had the flu. She went to the doctor and she had some tests taken, and they all came back normal. He told her she was fine, and he basically said, just snap out of it. Get over your depression. At this point she was just so very weak she could not even walk to the bathroom.

Instead of getting better, her symptoms seemed to get worse. It took all of her energy to just get out of bed and try to take care of her 2-year-old child. Her friends and her family even were getting angry and annoyed at her, wondering, why are you constantly bedridden? Why are you so tired? Why can you not go on with your normal duties?

Finally she found out that chronic fatigue syndrome might, and this was through a newspaper article, might just be the cause. She began attending group meetings, and from those meetings found a doctor, one of the rare doctors, frankly, who understood this disease.

□ 1315

Barry Feinsod of Holtsville, Long Island, his wife was also stricken with chronic fatigue syndrome, and he wrote to me to say that for 6 years his wife has been unable to work. They have gone from doctor to doctor. She cannot even perform some of the most basic duties associated with living a normal life. It has destroyed the family's expectations and dreams for the future, and it has really posed a vexing problem.

Jeannette Crocken of Medford, Long Island, wrote me about her son Jason, who is also afflicted with chronic fatigue syndrome at the age of 10. Doctors did not know what was wrong, and, again, they spent 2 years going from physician to physician and testing that chronic fatigue was maybe the possibility. He has lost his hair, muscle pain, sore throat. It is this kind of vexing dilemma, Mr. Speaker, that really poses a great problem for the people affected and afflicted by this disease.

We spend tens of millions of dollars in very good research over at the National Institutes of Health for all kinds of diseases, hundreds of millions of dollars. Yet chronic fatigue syndrome has only gotten a paltry \$5 million, and there are well over, I would suggest, 2 million people, I have been told; and the number may be actually three times that who have just had the disease but not been diagnosed.

We need to do a better job of researching the symptoms. We know only that it sends the immune system into overdrive, Mr. Speaker. When we see the immune system being shut down, as it is by HIV positive and AIDS, we have to step forward as a nation. We need to do likewise and double the funding for chronic fatigue syndrome.

CONGRESSIONAL SUPPORT FOR SUCCESSFUL INS PILOT PROGRAM

The SPEAKER pro tempore (Mr. GIB-BONS). Under a previous order of the House, the gentlewoman from California [Ms. SANCHEZ] is recognized for 5 minutes.

Ms. SANCHEZ. Mr. Speaker, I rise today to express my strong support for an INS pilot program in the city of Anaheim, CA, which has successfully identified and deported criminal aliens in city detention facilities in my congressional district.

Yesterday the Immigration and Claims Subcommittee held a hearing to receive testimony regarding the program. The chief of police of the city of Anaheim testified about the success the city has had in removing criminal aliens from my congressional district.