

and the West, and heading toward the East Coast, and has become the new drug of choice, is coming through Mexico.

Mexico has failed to cooperate. They have failed to extradite. They have failed to put radar on their borders. They have failed to allow our DEA agents to go there. They have denied allowing our DEA agents to protect themselves by arming themselves. They have also subverted our attempts to have a solid maritime agreement. They have also left vetted units, which we have trained in Mexico City.

They are not doing the job. They do not deserve our certification, and they deserve this week to be decertified for these actions.

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

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

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

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

UNITED STATES ONLY ADVANCED NATION NOT TO PROVIDE HEALTH CARE FOR ALL ITS PEOPLE

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

Mr. DAVIS of Illinois. Mr. Speaker, today, like every day in America, 788 babies will be born at a low birthweight. They will start life at risk. We rank 18th in the industrialized world in the percentage of babies born at dangerously low birth weight.

Let me put it another way: No industrialized country in the world does worse. Our infant mortality rate is 8.4 per 1,000 live births. We rank 18th in the industrialized world in infant mortality.

Sometimes it takes a poet to put our feelings into words when we hear such statistics. Gwendolyn Brooks, poet laureate of Illinois, penned this question: "What shall I give my children who are poor, who are judged the least wise of the land?"

Mr. Speaker, we keep asking the question, "What shall we give our children?" We are the only advanced Nation in the world that does not provide health care for all of its people.

According to the GAO, some 10 million children, 1 in 7 in the United States, are uninsured, the highest level since 1987, before Medicaid expansions for children and pregnant women. One

child in four in the United States is now covered by Medicaid. The percentage of children with private insurance reached the lowest level in 8 years: 65.6 percent.

How do we describe the emotion of seeing a child suffering a severe asthma attack; turning blue while their chest and stomach attempts to breathe? Yet more than half of the uninsured children with asthma will not see a doctor this year. Some of them will die from asthma, a preventable disease.

How do we describe the cries of a child with an ear infection? Only a parent knows the feeling of helplessness that comes when you cannot relieve your child's pain. Yet one-third of the uninsured children with recurrent ear infections never see a doctor. Many suffer permanent hearing loss.

Only 75 percent of preschoolers are getting the recommended vaccinations. Some 1 million still need one or more doses. In many of our big cities, like Chicago, the immunization rate is less than 65 percent.

What shall we give our children?

Twelve percent of child deaths are excess deaths. Excess is the medical term meaning that these deaths were preventable. How can a Nation such as ours accept 12 percent excessive deaths?

What shall we give our children?

Almost 45 percent of all 3- and 4-year-olds from low-income families participate in center-based care. By every measure of health care status, low birth weight, prematurity, infant mortality, likelihood of injury, malnutrition, incidence of infectious disease, poor children fare worse than any others. However, only Head Start routinely provides preventive health and dental care treatment.

It is estimated that the \$54 billion cut from the safety net last year will push more than 1 million additional children into poverty and millions more will be pushed even deeper into poverty.

The poet June Jordan warned us "Our children will not survive our habits of thinking, our failures of the spirit." If all of the promise of democracy is to mean anything, if all of the incredible wealth we have accumulated is to mean anything, if all of the work, the struggle, the suffering, the dreaming, the devotion that make this country what it is today is to mean anything, then we must answer the question: "What shall we give our children?"

Let us give them a chance. Let us at least make their health a right and not a privilege. Let us make sure that in this Congress every child will have access to quality health care when he or she is sick, regardless of the ability of their parents to pay. Let us make sure that every mother receives prenatal care regardless of ability to pay. Let us make sure that every child receives preventive care regardless of the ability of their parents to pay.

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A guarantee of quality accessible health care for every child cannot be the full answer to the question, but we must give our children nothing less.

SOCIAL SECURITY

The SPEAKER pro tempore [Mr. STEARNS]. Under a previous order of the House, the gentleman from South Carolina [Mr. SANFORD] is recognized for 5 minutes.

Mr. SANFORD. Mr. Speaker, I had the good fortune this past weekend of going to the bipartisan retreat in Hershey, PA. There we discussed many issues, many problems common to the Congress, but one thing that we did not discuss was a thing called Social Security.

What is interesting about this issue is that not only is Congress not talking about it right now but the White House is not talking about it. Yet by anybody's definition, Social Security is on its way toward bankruptcy because what the trustees have said, and let me say that again, what the trustees have said, not what Republicans have said, not what Democrats have said, not what Ross Perot has said, but what the trustees have said is that if we do nothing, Social Security will go bankrupt in 2029 and it will begin to run deficits in 2012 such that either current benefits have to be cut by about 14 percent at that time or payroll taxes have to be raised by about 16 percent.

Any of the young folks that I talk to say, "I don't like the idea of payroll taxes going up by another 16 percent." Any of the older folks I talk to say, MARK, the idea of cutting benefits by 14 percent is just not acceptable."

And so what you are struck with is, is there another way out? I think that brings us to some very good news that there is another way out because what has been tried in a host of places around the globe, whether it is in a number of countries in South America or whether it is with changes being made in Australia or with changes being made in Great Britain or in a number of countries or even States within our own country, what folks have tried is the idea of personal savings accounts. When you switch from a system of sending your money to Washington and then hoping it comes back 30 or 40 years later to instead a series of personal savings accounts, wherein it is a public-private partnership, it is still a mandatory savings, it is still watched by the Government. Again, if one wants to, I guess, go gambling, you would go to Las Vegas, you would not use these accounts, so it is controlled, but by having money in your own personal savings accounts, a number of very good things seem to happen. One is that you save Social Security because again by the trustees' own numbers, the current rate of return for most people out there working

today and paying into Social Security is 1.9 percent. If you let somebody earn more than 1.9 percent on their retirement savings, then consequently they end up with more at the end of the day and can retire with more, again have more each month day in and day out in their retirement years which is what I hear from most people working today as something that they would very much like.

Another benefit that I think is worth mentioning is that you can choose for you when you want to retire. In my home State of South Carolina, we have a fellow by the name of STROM THURMOND who wants to work until he is 100. I say go for it. Yet I have got a lot of other friends who say, "You know, work is fine, MARK, but fishing is even better. I would like to retire when I'm 50."

With a personal savings account, you could do that. Why should a Congressman or a Senator or a bureaucrat in Washington choose for you when you want to retire? Yet with a pay-as-you-go system, that has to happen, because for one person to retire early while the other person was working would mean one person subsidizing the other and that could not happen.

Or, for that matter, another benefit, I think, of personal savings accounts would be moving it off the political playing field. Right now seniors very intently listen to all those political ads as one politician points his finger at the other saying what the other one is going to do with his Social Security check for good reason and, that is, Washington controls it. If you move that control out of Washington again back to the individual, you would not have to listen to those ads.

Another great benefit again of personal savings accounts. Let me stress here, what we are talking about is a voluntary program. I do not believe that you should go out and yank the rug out from underneath seniors. What we are talking about is leaving Social Security the way it is for people that are retired and simply giving people the choice. If one wants to stay on existing Social Security, do that and if you do not, that is fine, too. But by doing that, another one of the benefits would be saving more. We have a very low savings rate in this country. It is around 3 percent. In China it is around 40 percent. In Singapore it is in the mid 30's. In Chile it is about 30 percent. It is actually about 29 percent. A host of places around the globe have higher savings rates which means that they can invest more in, whether it is a chain saw or whether it is a plant that makes American workers more productive, and that is something that we need to be cognizant of and watch out for.

Again, this is not anything that is going to happen anytime soon in Congress. It is not even being talked about in Congress. But I think for us to avoid the avalanche that is coming our way, we need to begin talking about it.

Again what we need to begin talking about is a way of transitioning from Social Security and leaving seniors alone. I do not think we should ever yank the rug out from underneath seniors, but again transitioning to a system that would allow young people the choice.

HEALTH INSURANCE FOR CHILDREN

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

Mr. PALLONE. Mr. Speaker, for several weeks now I have been coming to the House floor on a daily basis to talk about the need for this Congress to enact legislation that would ensure every child in the country has access to health insurance. Many of my statements have focused on how the Republicans were blocking progress on the various Democratic proposals to provide health insurance to the Nation's 10 million uninsured children. I stress that again, 10 million uninsured children in this country.

It is now 3 months into the 105th Congress and literally we have really barely done a thing. Today was just another indication of that. Just last week, the House Republicans basically put together an agenda. It appeared in the Washington Times, and I talked about it a little bit this morning. Again, much of this agenda is just a rehash of what the Republicans had been talking about since they took control of the Congress back in 1994.

Most importantly, nowhere in this 12-point agenda is there a plan to pass a health insurance plan or a health coverage plan for children. Despite the fact that these 10 million children remain uninsured, despite the fact that the congressional Democrats have expressed a willingness to work with the Republicans to fashion a bipartisan agreement, the GOP still could not find it in its heart to make children's health insurance a congressional priority.

I do not know why they left this out of their agenda. I find it truly disturbing. I will continue to mention it. Over the last several weeks there has been a steady stream of studies, visits by children's organizations, and media reports detailing the problem with the lack of health insurance coverage for children. Yet, still nothing from the Republican leadership.

This week we had 4 different children's organizations, the March of Dimes, the Children's Defense Fund, the Child Welfare League, and the National Association of Children's Hospitals, had been and are still making visits to congressional offices all over the Capitol. They are not limiting their visits to Democratic officials. They have, Mr. Speaker, been urging all Members of Congress to do some-

thing about the growing number of children who do not have any kind of health coverage at all.

With respect to stories in the newspapers, and they continue to grow, in yesterday's USA Today there was a lead story on the front page which really did a very good job of outlining the problem with the 10 million kids in the country that lack health insurance. The article talks about various proposals floating around the Congress that address the problem. It provides many details about the nature of the problem, including the observation that 86 percent of uninsured children live in families with one working parent, 63 percent live in two-parent families, 500,000 of the uninsured are infants younger than 1 year old, and 65 percent live in families with annual incomes of \$25,000 or less. A lot of interesting information here that shows increasingly that this is a problem that affects primarily working families, two-parent families, people whose incomes are not as low as one might expect.

Another disturbing trend noted in this article and others within the last few weeks is the decline in employer-based coverage. Between 1985 and 1995 the percentage of children covered by private employer-based coverage has dropped 12 percent, from 65 percent to 53 percent. This decline in worker-based coverage is an indication that working parents are finding it increasingly more difficult to purchase insurance for their children.

I think a lot of people increasingly, or many people think that if you are working, particularly if both parents are working, that they are going to be covered through their employer by a health insurance policy for the kids. Increasingly, that is simply not the case.

The article in USA Today also provides examples of those struggling to live without health coverage for their kids. I like to use examples because, as much as we talk about statistics, it is always better to have specific examples where you can bring the problem down and show how it affects an individual.

I wanted to mention in the USA Today article a person named Dee Sweat of Liberty, MT. She works at a salary of \$14,000 a year. She does not have health insurance for her 15-year-old daughter. Paying out of pocket, in the last year she paid \$1,700 or 12 percent of her yearly salary for medical treatment for her daughter. She has not been able to take her daughter to the dentist for 5 years. Five years without going to the dentist. I repeat that. She simply cannot afford health insurance. I wonder how many in this body have gone 5 years or would even contemplate letting their children go 5 years without going to the dentist.

The working parents that are mentioned in this USA Today article, who oftentimes earn too much money to qualify for Medicaid but not enough to afford health insurance for the kids, are the individuals the Democrats are