

about 50 percent of the world's tropical forests are located in four countries—Indonesia, Peru, Brazil, and the Congo—and these countries have in the aggregate over \$5 billion of U.S. debt outstanding.

The Tropical Forest Conservation Act gives the President authority to reduce or cancel U.S. A.I.D. and/or P.L. 480 debt owed by any eligible country in the world to protect its globally or regionally important tropical forests. These "debt-for-nature" exchanges achieve two important goals. They relieve some of the economic pressure that is fueling deforestation, and they provide funds for conservation efforts in the eligible country. There is also the power of leveraging—one dollar of debt reduction in many cases buys two or more dollars in environmental conservation. In other words, the local government will pay substantially more in local currency to protect the forest than the cost of the debt reduction to the U.S. Government.

For any country to qualify, it must meet the same criteria established by Congress under the EAI, including that the government has to be democratically elected, cooperating on international narcotics control matters, and not supporting terrorism or violating internationally recognized human rights. Furthermore, to ensure the eligible country meets minimum financial criteria to meet its new obligations under the restricted terms, it must meet the EAI criteria requiring progress on economic reforms.

The Tropical Forest Conservation Act is a cost-effective way to respond to the global crisis in tropical forests, and the groups that have the most experience preserving tropical forests agree. It is strongly supported by The Nature Conservancy, Conservation International, the World Wildlife Fund, the Environmental Defense Fund and others. Many of these organizations have worked with us very closely over the last two years to produce a good bipartisan initiative.

I am delighted that H.R. 3196 includes these funds that will be used to preserve and protect millions of acres of important tropical forests worldwide in a fiscally responsible fashion.

IN RECOGNITION OF JEFFERSON THOMAS, A MEMBER OF THE "LITTLE ROCK NINE"

HON. DEBORAH PRYCE

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 9, 1999

Ms. PRYCE of Ohio. Mr. Speaker, I rise today to congratulate Jefferson Thomas, a resident of the Far East Side of Columbus, on receiving the Congressional Gold Medal. Mr. Thomas was a member of the so-called "Little Rock Nine," a group of African-American high school students who first crossed racial barriers at Central High School in Little Rock, Arkansas forty-two years ago. President Clinton bestowed the medal on Thomas and the other eight members of the "Little Rock Nine" today in a ceremony at the White House. The Congressional Gold Medal is the nation's highest honor for a civilian. Previous recipients of the award include such notable figures as George Washington, Nelson Mandela and Rosa Parks.

In the summer of 1957, the city of Little Rock, Arkansas made plans to desegregate its

public schools. However, on September 2, the night before classes were to begin, Arkansas Governor Orval Faubus called out the state's National Guard to surround Little Rock Central High School and prevent any African-American students from entering the school. He stated that he was trying to protect citizens and property from possible violence by protesters he claimed were headed in caravans toward Little Rock. A federal judge granted an injunction against the Governor's use of the National Guard to prevent integration, and the troops were withdrawn on September 20.

When school resumed on Monday, September 23, Central High was surrounded by Little Rock policemen. Approximately one thousand people assembled in front of the school. The police escorted the nine African-American students into a side door of the building immediately before classes were to begin. Two days later, President Eisenhower dispatched the National Guard in an effort to maintain order and protect the "Little Rock Nine." Throughout their first year at Central High School, the nine civil rights pioneers received death threats and were the subject of violent acts. Through it all, they remained stoic and focused, realizing that the eyes of the nation were upon them in their quest for equality. In May of 1958, Ernest Green became the first African-American graduate of Little Rock Central High School.

Jefferson Thomas is to be commended for his courage in the face of overwhelming adversity. Little did he know that his bravery over forty years ago would have a lasting historical impact. His determination, and that of the other members of the "Little Rock Nine," paved the way for the desegregation of all schools, and helped make equality in education a reality for all students. Mr. Thomas is truly a source of inspiration to the citizens of Ohio and the rest of our nation.

"NOW AND TOMORROW"

HON. PATSY T. MINK

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 9, 1999

Mrs. MINK of Hawaii. Mr. Speaker, I am inserting an article by Sally-Jo Keala-o-Ānuenue Bowman that tells the story of one recipient of a Native Hawaiian Health Scholarship, which is funded by Congress under the 1988 Native Hawaiian Health Care Act. This article provides compelling testimony on the value of this important program.

[From Island Scene (Summer 1999)]

NOW AND TOMORROW: A HAWAIIAN SOCIAL WORKER IN WAI'ANAE BRINGS TOGETHER HER WORK AND CULTURE

(By Sally-Jo Keal-o-Ānuenue Bowman)

Wai'anae Valley. A breeze through the crimson bougainvillea at Kahumana Residential Treatment Center offsets the noon-time sun.

In the parking lot, even before Julie Ann Lehuānani Oliveira opens her car door, Kenneth Panoke waves to her, and his sun-browned Hawaiian face breaks into a pukal-toothed grin. Oliveira, 28, is young enough to be his daughter.

But he meekly follows her into the main building, rubber slippers slap-slapping the tile floor. He holds her hand while she talks with the center's medical director. Later he

clears her lunch plate when she finishes an informal conference.

Social worker Oliveira is on her Wai'anae rounds. Panoke, who has bipolar disorder, is glad to tag along. They're old friends from 1993, when he was a State hospital patient and she was a practicum student from the University of Hawai'i School of Social Work. Panoke had been in and out of the State hospital all his adult life.

Neither Panoke nor Oliveira is from Wai'anae, but this Leeward O'ahu community with its entrenched reputation for the classic Hawaiian problems of poverty, drugs, crime, and life-threatening diseases, offers Oliveira a chance to serve her own people. To Panoke, Wai'anae is a place to heal.

Oliveira's road to social work started on Maui, where she grew up in a Hawaiian-Portuguese family. Because her mother, Hazel Makahilahila Oliveira, was widowed at age 26, she counseled her five daughters to excel in school so they could be independent. Oliveira had known since she was 8 that she would join a helping profession. She earned a bachelor's degree in business administration before earning a master's in social work from the University of Hawai'i to be able to provide both direct and administrative services.

Her father's uncle, Lawrence Oliveira, was like a grandfather to Oliveira. When Uncle Lawrence was dying in Hāna in 1997, he told Oliveira to promise him she'd return home and take care of her community, her people. "We talk about how Hāna is so small that everyone knows each other, and the people have a hard time talking about their troubles. He told me that's where I could help."

These views meshed with the idea behind the Native Hawaiian Health Scholarship Program, which fully funded Oliveira's master's degree.

The goal of the scholarship program is to train Hawaiians to treat Hawaiians. The hope is that scholarship grads will return to work in their home communities.

The health of Hawaiians as a people is not good. They have the highest rates of diabetes and heart disease, and the lowest life expectancy of any ethnic group in Hawai'i. One contributing factor is that sometimes, because of cultural differences, Hawaiians are reluctant to seek health care. Hawaiian physicians and other health care workers help open the door, especially when these professionals grew up in those communities. That's why priority is given to applicants from under-served areas with large Hawaiian populations, such as Hāna, Wai'anae, and Moloka'i.

The scholarship program, federally funded through the 1988 Native Hawaiian Health Care Act, has awarded 82 full scholarships since 1991. In exchange, recipients—doctors, dentists, nurses, dental hygienists, social workers, public health educators, clinical psychologists, nurse midwives—promise to work in a Hawaiian community one year for each year of their professional training. Eight have stayed in their jobs beyond the required time, some in their home communities.

Oliveira remained in Wai'anae when she finished her obligation in 1997 at Hale Na'au Pono, the Wai'anae Coast Community Mental Health Center.

She began at the mental health center as a clinician in 1995, soon becoming head of the Adult Therapy Division. There, she recruited four other scholarship recipients—a move that boosted mental health service in Wai'anae and bounded the new professionals in their mission to help fellow Hawaiians.

"The most beneficial part of the scholarship is not the financial assistance, but the networking with other students and having encouraging mentors," Oliveira says. "I

know that many of the opportunities I have are a direct result of the scholarship program."

Hardy Spoehr, executive director of Papa Ola Lōkahi, the administrative branch of the Native Hawaiian Health Care systems, says: "All the scholarship students come out of their special Hawaiian seminars with a sense of Hawaiian culture that others may not have. They become aware of culturally appropriate ways, such as how to approach kupuna [elders]. By 2002—when Federal funds are up for reauthorization—we'll have at least a hundred Hawaiian health professionals in the field."

In 1985, "You could count on two hands the number of Hawaiian physicians in Hawai'i," Spoehr says. "If these scholarships can continue for a total of 20 years, we'll build a pipeline of health services for 50 years—and make major changes in Hawaiians' health status."

The idea of how powerful a rich presence of Hawaiians in health care could be first came to Oliveira while she worked with Hale Na'u Pono, then bloomed big on a trip she arranged in 1997 for some of her women mental health clients. They spent three days on Kaho'olawe, the limited-access island that is still in transition from being a military practice bombing target to a re-sanctified cultural resource for Hawaiians. Oliveira saw metaphors for both her clients and herself.

"I talked to them about how the breakdowns in their lives were like Kaho'olawe's destruction," she says. "Their recovery will take their families' help. Nobody can do it alone. Kaho'olawe represents that. You can't be by yourself—it's contradictory to the Hawaiian perspective."

Oliveira is convinced that such cultural experiences are essential to the recovery of Hawaiian health. She also knows the major obstacle: funding.

Her new mission is to develop ways of documenting cultural approaches to solving mental health problems, to help ensure such programs will not forever be relegated to "fighting for funding scraps."

In 1997, to start a doctoral program in social welfare at the University of Hawai'i, she shifted her role at Hale Na'u Pono from directing day-to-day operations to consulting. She also began consulting at Wai'anae's Hui Hana Pono Clubhouse program and facilitating a women's group in the community for the Ho'omau Ke Ola drug and alcohol treatment center.

She is currently a consultant for the Native Hawaiian Health Care Systems (one office of which is on the Wai'anae Coast), and for the Kuhumana Residential Treatment Center. She is also conducting research with the UH Department of Psychology to look at the impact of managed care on the severely mentally ill.

Farrington Highway is a fact of life, as Oliveira commutes from her Waikiki home to Wai'anae.

There's much to be done. This is confirmed by Annie Siufanua, clinic intake coordinator at the mental health center. "On the Wai'anae Coast, we don't have anger management training, or programs for sex abuse or domestic violence," says Siufanua. "One psychiatrist comes three days a week. Sometimes you can't get an ambulance—there are only two for 65,000 people. The entire health care outlook is getting worse."

That doesn't deter Oliveira. "Our mission is to improve the health status of native Hawaiians. It's worth it if you can make a difference in even one person's life." She says, pausing. "But you pray at night that in 10 years the daughter of your client won't be in the clinic for the same thing."

By the time Oliveira finishes a Wai'anae day, the sandy beaches border the highway

gleam gold in the sinking sun. Already in her short career, she has served Wai'anae well. The community has also served her. It's here she developed her idea that "there's not enough for us Hawaiians at the policy level. That's why we have a hard time getting the funding we need."

Driving home, she keeps one eye on the road, the other scanning the mountains and the sea in this community where she has learned so much. "I couldn't have asked God to put me in a better place to prepare me to go home to work in Hāna," she says.

And that preparation is already paying off. Julie Oliveira has recently begun providing individual and family therapy in Hāna two weekends a month.

CELEBRATING THE FIFTH ANNIVERSARY OF DEATH VALLEY NATIONAL PARK

HON. JERRY LEWIS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 9, 1999

Mr. LEWIS of California. Mr. Speaker, I rise today to celebrate the fifth anniversary of the creation of Death Valley National Park, which protects and provides public access to some of the most dramatic scenery in the United States in a pristine desert environment that is unmatched in the world.

Death Valley became the largest national park in the lower 48 states when it was changed from national monument status and expanded to 3.3 million acres in 1994. More than 1.3 million people travel to the park now, and the historic Furnace Creek Inn remains open year-round—even through 130-degree summer days.

This spectacular park includes the lowest point in the Western Hemisphere—Badwater, at 282 feet below sea level—and mountain peaks over 11,000 feet tall. Much of the park is breathtakingly desolate wilderness, but visitors can also relive the time of the Gold Rush through ghost towns and the internationally famous Scotty's Castle.

In the past five years, the park staff has grown to include an archeologist, a botanist and hydrologist to research and protect the unique natural resources. The staff has successfully begun a multi-year effort to capture and remove the more than 500 burros who were introduced by miners, and who compete for scarce food and water with native wildlife like the Desert Bighorn Sheep. Non-native vegetation is also being removed.

The staff has also restored and improved historical resources like Scotty's Castle, and installed 60 new wayside interpretive exhibits, with plans for 50 more.

The park service has made efforts to ensure compensation and flexibility for private owners who property was included in the park, although some problems remain. We must urge the park service to make resolution of those inholder problems a top priority in the years to come.

Mr. Speaker, I ask you and my colleagues to join me in congratulating Park Superintendent Dick Martin and his staff for creating a world-class national park in this unique natural environment. Their efforts have ensured that the treasures of the desert can be viewed by many more visitors—and protected for all those who will come in the future.

TRIBUTE TO SERGEANT THOMAS J. SHANLEY

HON. PETER J. VISCOSKY

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 9, 1999

Mr. VISCOSKY. Mr. Speaker, at a time when crime concerns are on every citizen's mind, those who have dedicated their lives to law enforcement are to be commended. I would like to make a special commendation to Sergeant Thomas J. Shanley, a devoted law enforcement officer from Indiana's First Congressional District. Sergeant Shanley retired from the Schererville Police Department in September of this year after 21½ years of dedicated service. Sergeant Shanley will be honored by his family, friends, and members of the Schererville Police Department at a testimonial dinner Friday, November 12, 1999 at Teibel's Restaurant in Schererville, Indiana.

Thomas Shanley joined the Schererville Police Department on February 28, 1978 and graduated from the 51st class of the Indiana Law Enforcement Academy in July of 1978. He began his duties at the Schererville Police Department in the Patrol Division where in February of 1980 he was promoted to 1st Class Patrolman. Five years later he was promoted to the rank of Corporal and in 1989 was promoted to Sergeant. During his career with the Schererville Police Department, Sergeant Shanley served as a Certified firearms Instructor, an Instructor for the citizens Policy Academy, Coordinator for the Field training program, and Coordinator for the Department Training program. He was most recently elected President of Training Coordinators for the Northwest Indiana Law Enforcement Training Center.

While Sergeant Shanley has dedicated considerable time and energy to his work with the Schererville Police Department, he has never limited the time he gives to his most important interest, his family. He and his wife Kathryn have one son, Patrick, age 10.

On this special day, I offer my heartfelt congratulations to Sergeant Shanley. His large circle of family and friends can be proud of the contributions this prominent individual has made to the law enforcement community and the First Congressional District of Indiana.

Mr. Speaker, I ask that you and my other distinguished colleagues join me in commending Sergeant Thomas Shanley for his lifetime of service and dedication to the people of Northwest Indiana and the citizens of the United States. Sergeant Shanley can be proud of his service to Indiana's First Congressional district. He worked hard to make the Town of Schererville a safer place in which to live and work. I sincerely wish him a long, happy, healthy, and productive retirement.

INTRODUCTION OF A DISCHARGE PETITION FOR A MEDICARE PRESCRIPTION DRUG BENEFIT

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 9, 1999

Mr. STARK. Mr. Speaker, I rise today to introduce a rule for a discharge petition to force