requiring the United States Sentencing Commission to amend the federal sentencing guidelines to provide for mandatory minimum sentences for crimes related to the manufacture, importation, exportation, and trafficking of methamphetamine and ecstasy. While I of course do not condone the manufacture, use, or distribution of these two dangerous and illegal controlled substances, I also strongly believe that sentencing for federal criminal offenses should be left to the discretion of federal judges and that they should be permitted to take into account the facts and circumstances surrounding each individual case.

HONORING THE ROTH LIVING FARM MUSEUM

HON. JOSEPH M. HOEFFEL

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES Wednesday, September 27, 2000

Mr. HOEFFEL. Mr. Speaker, I rise today to honor the Roth Living Farm Museum which has been designated a National Historic Site by the U.S. Department of the Interior.

Located in North Wales, Pennsylvania, the Roth Museum was founded in 1993 as a non-profit organization thanks to a generous donation to the Delaware Valley College by Mrs. Edythe Roth. The museum is an historic farm of 20 acres anchored by a restored 1832 farmhouse and barn to provide visitors with a unique look into the history of U.S. agriculture.

The Roth Living Farm Museum provides an educational experience to all who visit the facility. Visitors to the farm can see sheep shearing, antique farm equipment displays, early-American and farm crafts, and resident draft horses, cattle, sheep, goats, chickens, rabbits, and duck. Homegrown produce, sean decorations and firewood are available for sale. In addition, interactive demonstrations are created to provide visitors the opportunity of learning about 19th Century farming.

I am pleased to celebrate this significant honor with the college community and all of Montgomery County. We are fortunate to have the Roth Living Farm Museum in our community and especially honored to have it receive this important designation.

TRIBUTE TO ANDRE A. GALIBER, SR., MD

HON. DONNA MC CHRISTENSEN

OF VIRGIN ISLANDS

IN THE HOUSE OF REPRESENTATIVES Wednesday, September 27, 2000

Mrs. CHRISTENSEN, Mr. Speaker, I rise to pay tribute to Dr. Andre Anthony Galiber, Sr., who passed away this week. Dr. Galiber was a great leader of the medical profession, particularly in the field of Radiology, an ideal family man, an outstanding citizen and a great hu-

manitarian in my district, the community of St.

Croix and the entire U.S. Virgin Islands.

Dr. Galiber earned his Medical Doctorate in 1957 and completed a diagnostic and therapeutic radiology residency in 1963. His distinctive medical career began with an internship at the Howard University's Freedmen's Hospital, here in Washington, D.C. He also served as a

Captain in the U.S. Medical Corps and was

the Chief Radiologist at Fort Benjamin Harrison Army Hospital in Indianapolis, Indiana.

Dr. Galiber opened his private Radiology office in 1967 and became the first full-time, board certified Radiologist, in the Virgin Islands. He was and remained the only regional Fellow of the American College of Radiology. Dr. Galiber became the Director of the Radiology Department at the Charles Harwood Hospital during the 1960's and 1970's, and became the Director of the Radiology Department when the hospital relocated to the new Governor Juan F. Luis Hospital and Medical Center, serving in that capacity until his "so-called" retirement in 1984.

Dr. Galiber volunteered as a consultant at the new St. Croix Hospital and provided most of the technical training and professional services during the initial ten year growth period of clinical ultrasound. He performed and interpreted the first echocardiograms on St. Croix and was the first Radiologist licensed in Computer Tomography. He was a FDA accredited mammoradiologist and had been performing mammographys since he opened his practice in 1964.

His untiring dedication to St. Croix was also directed at strengthening and advocating on behalf of the medical community. He was an active member of the Virgin Islands Medical Society for almost forty years, serving as President, Executive Secretary, Treasurer, Delegate to the American Medical Association, as well as Delegate to the National Medical Association.

Dr. Galiber also served as President of the Croix Hospital Medical staff, was an elected officer Virgin Islands Medical Institute and presented, coordinated and monitored seminars for his peers. He was also the principal supporter of advanced diagnostic imaging capabilities at the Governor Juan Luis Hospital. Recently, he drafted legislation that was proposed by the Virgin Islands Medical Institute, to encourage Virgin Islands physicians training in the United States, to become licensed in the Territory. Most notably, he was a mentor and ardent supporter of students pursuing health science careers, of which I was one.

Hurricane Hugo introduced several generations of Virgin Islanders to the devastation a hurricane could inflict. While most of the populace remained stunned in the aftermath, Dr. Galiber salvaged his radiological equipment, established electrical power and a safe habitation of the sesential medical operations and within him edays after the hurricane had passed, he was essentially ready to provide services to his patients.

Dr. Galiber was a charter member of the St. Croix Power Squadron. He became a trustee for most of the schools on the island of St. Croix including St. Mary's Catholic School, Country Day School, Good Hope School and St. Dunstan's Episcopal School. Dr. Galiber was also the chairperson of the St. Croix Continuing Medical Education Committee which certified all eligible programs to do post-graduate training for physicians, and a member of the Eta lota lota Chapter of Omega Psi Phi Fraternity.

As an entrepreneur, Dr. Galiber in 1974 became the Project Development Coordinator/ Secretary Treasurer, of the first Medical Office Condominium in the Virgin Islands. He was one of seven owners of Medical offices in Island Medical Center Associates, and supervised the management of the entire complex along with managing and practicing his own radiology office at the same time.

Dr. Galiber was an avid reader of non-fiction and a history buff of World War II, greatly admiring the deeds of Winston Churchill. For recreation he enjoyed golf, tennis, traveling, dancing, and classical music.

He and his wife were Members of Friends of Denmark, an organization that strives to maintain the links established by more than two centuries of Danish rule. He and his wife also joined the Landmark Society, which preserves and promotes the various influences in our unique architecture that has developed over the centuries, and our local cultural traditions. He was also a member of the Virgin Islands Lung Association and the St. George's Botanical Garden.

Dr. and Mrs. Galiber were also collectors of original art by local artists even collaborating in commissioning many of the items he eventually bought. He insisted on authenticity and accuracy, in the depiction of what to us now seems the simpler times of just a few decades ago. One such piece, that was the result of his direction, was selected by the Census Bureau, in its desire to have minority oriented art, as the poster for the Virgin Islands. The painting was a work-in-progress then entitled "Good Day Ladies", when first viewed by the Galibers. The new name "Mr. Collins", and other items of the painting were changed, to accurately correspond to names and events of the time.

Dr. Galiber was the recipient of many honors, including the Distinguished Physician in 1986 by the Virgin Islands Medical Society and the American Cancer Society's Honoree in 1999.

On June 9th of this year, the Governor Juan F. Luis Hospital and Medical Center conducted a dedication ceremony of the Andre A. Galiber, Sr., FACR, Radiology and Cardiovascular Laboratory Suite. The unit was dedicated in honor of his significant contributions to diagnostic imaging. He was also recognized at that ceremony for implementing the terminal digit filing system that is still used today. Some of his peers recognized that he singlehandedly established the Radiology Departments at both the Charles Harwood and Juan Luis Hospitals and that due to him, the hospitals will soon have MRI capabilities. His legendary diagnostic skills were praised and appreciation was shown for the tireless work he performed in other areas of hospitals.

His children consider themselves to be proud "Virgin Islanders" and claim that their father taught them to contribute their service to the West Indian community and to work to gether as a family. He encouraged them to develop their individual talents and actively fostered their personal development. He and his namesake, Andre Junior, won golf tournaments. Two others Dante and Cecile, played tennis at the Pan American Games. Lisa, a world renown fashion model, is multilingual and has a development consulting firm in San Diego. his daughter Cecile, a Banker and licensed realtor, heads the Financial Trust Company in St. Thomas.

His wife of forty-four years, Edith Lewis Galiber, is a retired Director of Pubic Health Nursing in St. Croix. All four of his sons are involved in the field of medicine, one as a cardiologist, two are radiologist and the other is their business manager, and also a trained and registered Technologist in ultrasound.

Dr. Andre Galiber's death on September 24, 2000, ended an illustrious life and work, but the contributions to his community, its culture and the field of Radiology live on.

Mr. Speaker, I salute Dr. Andre A. Galiber for his dedicated service to his country, his profession and the Territory of the U.S. Virgin Islands. I thank his wife Edith, his seven children and fifteen grandchildren, for sharing him with us.

INTRODUCTION OF HEATHER FRENCH HOMELESS VETERANS ASSISTANCE ACT OF 2000, H.R. 5311

HON. LANE EVANS

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES Wednesday, September 27, 2000

Mr. EVANS. Mr. Speaker, I am proud and honored today to introduce the Heather French Homeless Veterans Assistance Act of 2000. The homeless veterans of our nation have no better friend, no better advocate than Miss America 2000. During the past year, Heather has given generously of her time, talent, energy and self to challenge this nation to meet the unmet needs of our homeless veterans. The value of her advocacy for our nation's homeless veterans this past year cannot be calculated-it is priceless. From coast to coast and border to border, Heather has taken her message of our national responsibility to provide homeless veterans the assistance they need and deserve. It is an honor for me to, in some small way, recognize what Heather French has done and what she means for our homeless veterans and our nation. The legislation I introduce today is intended to recognize and honor Heather French, but it is not a ceremonial measure.

Nearly four decades ago, President John F. Kennedy challenged our nation to send a man to the moon and return him safely to earth before the end of a decade. He said we would do it not because it was easy, but because it was hard. Our nation spent billions of dollars, some \$21.3 billion in 1969 dollars, to meet this challenge. Today, the cost would be an estimated \$110 billion. The crew of Apollo 11, Armstrong, Aldrin, and Collins, will always be American heroes. The men and women who have served this nation in uniform and who are now homeless are also American heroes. They are the real survivors.

If we were capable of achieving that goal set by President Kennedy nearly 40 years ago, then we are capable of achieving this goal now—before the end of a decade eliminate homelessness among veterans. We must honor the service of our women and men who have served in uniform by providing the resources and opportunity they need to regain their future and again become productive citizens. This is our challenge. Like generations before us, we can and will succeed.

Let us never forget that every homeless veteran in America today served as a member of our Armed Forces. Today's homeless veterans were the once eager, excited and maybe a little frightened young men and women who came forward to serve our nation in uniform. In real terms, they defended our nation. They were our national defense. They came forward by the tens of thousands to serve our country.

It is time for our country to come forward to fully provide the services they now need.

The Heather French Homeless Veterans Assistance Act of 2000 is comprehensive legislation. It contains both innovative and proven programs. It provides, for example; expanding successful grant programs, extending the authority of the Department of Veterans Affairs (VA) to provide dental care, and authorizing individual grants to veterans at risk for homelessness. Mr. Speaker, I ask that a summary explanation of the Heather French Homeless Veterans Assistance Act of 2000 be included in the RECORD following my statement.

Some may question the need for enacting comprehensive homeless veterans legislation. They may ask, "Don't programs to help homeless veterans already exist?" The answer is a qualified yes. VA offers a wide array of special programs and initiatives designed to help homeless veterans live as self-sufficiently and independently as possible. VA's specialized homeless veterans treatment programs have grown and developed since first authorized in 1987. In addition, other federal and community based programs exist throughout the nation to offer support and provide assistance to homeless veterans. Homeless veterans are receiving assistance and support from many programs that have demonstrated their effective-

The question then remains, "Why are veterans still homeless?" The answer is simple. We have not done enough. The problem is not ineffective programs. The problem is too few programs and too many homeless veterans. If our goal is to end homelessness among veterans, we must do more. Existing programs must be continued and expanded when possible. New programs must be established.

For some, the first question will be, "How much will this cost?" The question that should be asked instead is, "What are the costs of failing to end homelessness among veterans? What are the costs of failing to provide what they need to regain their future and again become productive citizens and members of society?"

I strongly support the specialized programs of the Department of Veterans Affairs intended to meet the needs of homeless veterans. These are worthwhile, effective programs. For fiscal year 2000, the total amount expected to be spent supporting these programs is \$152.5 million dollars. This is clearly not pocket change, but neither is it enough funding. In fact, it is far from enough.

Over the course of a year, 345,000 homeless veterans will experience nearly 126 nights of homelessness. To meet the needs of nearly 126 million nights of homelessness among veterans a year, \$152.5 million really isn't very much. In fact, the total spending this year for VA's specialized programs for homeless veterans amounts to approximately \$1.25 per day, per homeless veteran. No matter how effective or efficient, \$1.25 per day, per homeless veteran can't be expected to be enough. On average, this is about \$450 per year, per homeless veteran.

The Homeless Veterans Reintegration Program (HVRP), of the Department of Labor, provides even less support. The purpose of HVRP is to assist homeless veterans gain employment and become or move toward self-sufficiency. Again, HVRP is a good program which has demonstrated its effectiveness. But how effective can HVRP be in eliminating

homelessness with an annual budget of \$10 million? If the homeless veteran population is 345,000, HVRP can spend, at the utmost, less than \$30 per year, per veteran, on average.

For some, eliminating homelessness among veterans is simply a question of economics. A formerly homeless veteran who becomes a computer programmer earning \$40,000 a year is a contributing member of our society who will repay many times over in taxes the assistance he or she received. It is in our national economic interest to once again use the skills and values learned in military service and to productively use new skills to benefit everyone.

For me, this is not simply a question of economics. Morally, there is no other choice that we can make. We must make use of the full arsenal of programs and tools to help homeless veterans regain their self-worth, their dignity, their pride and their self-sufficiency. We can end homelessness among veterans if we have the will to do so. As the richest nation on earth, we can afford to do no less.

President Reagan once asked, "If not us, who? If not now, when?" I ask these same questions today. We cannot afford to wait any longer. More importantly, America's homeless veterans cannot afford to wait any longer.

If we simply maintain the status quo, over the next decade there will be more than one billion nights of homelessness among veterans. Let me repeat that—more than one billion nights of homelessness among veterans over the next decade if we simply maintain our current efforts. If our economy should falter, even slightly, that number of homeless veterans would undoubtedly increase dramatically.

The most recent assessment of the Community Homelessness Assessment, Local Education and Networking Groups (CHALENG) was issued in May 2000 by the Department of Veterans Affairs. That assessment reported that there were an estimated 344,983 homeless veterans during 1999, an increase of 34 percent above the 1998 estimate of 256,872 homeless veterans.

Veterans continue to constitute a significant and disproportionately greater percentage of homeless men than their non-veteran peers. Twenty-three percent of the homeless male population are veterans while thirteen percent of the general male population are veterans.

The CHALENG assessment issued in May 2000, by the Department of Veterans Affairs (VA), also reported there is a need now for more than 110,000 additional beds to meet current needs of homeless veterans. Those additional beds will not be enough, however. Food, clothing, social services, medical services, job training and readiness programs and so much more will also be needed. It can be done and we must do it.

This same assessment of the needs of homeless veterans issued by the Department of Veterans Affairs (VA) reported VA and community partnerships during 1999 were responsible for establishing 4,943 total beds for homeless veterans which included emergency, transitional and permanent beds. If 5,000 additional beds are provided annually to meet the needs of homeless veterans, more than two decades will be required to meet the current need for additional beds to serve homeless veterans. According to an informal cost estimate provided by VA, \$1 billion will be required to establish the new beds now needed by homeless veterans.