

their Emergency Room as a Level II Trauma Center.

Mr. Speaker, I am proud to honor the hard work and determination of the staff of Parkview Medical Center. The compassion illustrated by staff members will be reflected in the hearts of patients for years to come. I would especially like to recognize Chief Executive Officer C.W. Smith and former Chief of Staff Dr. Janice Elaine Kulik for their unrelenting dedication to the medical treatment of patients and coordination of all Parkview activities. Congratulations to Parkview Medical Center on your recent milestone and I wish all the best to the staff.

JIM CIRILLO, MANAGER OF THE RAYBURN BUILDING SPECIAL ORDERS DELI, WINS HOSPITALITY MANAGER OF THE YEAR AWARD

HON. ROBERT W. NEY

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Friday, July 26, 2002

Mr. NEY. Mr. Speaker, the House has an award winner amongst its workforce. Mr. Jim Cirillo, an employee of one of the House food service contractors Guest Services, Inc. (GSI), won the 2002 Capital Restaurant & Hospitality Award for "Hospitality Manager of the Year." Jim is manager of the Rayburn Building Special Orders Deli and Pazzos Pizza. This annual award given by the Restaurant Association of Metropolitan Washington and the Washington, DC Convention and Tourism Corporation was presented to Jim at the industry's annual Awards Gala on Sunday, June 23, 2002 in Washington D.C.

One of five nominees from facilities in the Washington D.C. Metropolitan area, Jim won top honors for his superior service and extraordinary management skills as the manager of two facilities in the U.S. House of Representatives. Guest Services' President/CEO, Gerry Gabrys commented, "Members of Congress and their guests and staff have gone out of their way to recognize Jim's attitude and superior service on many occasions."

In a survey of customer satisfaction last fall, the Rayburn Special Orders deli was found to have the highest satisfaction rating amongst GSI's eleven business locations within the House. Recently, Jim developed two innovative websites where Members of Congress and their staff can conveniently and effortlessly place their food orders.

On behalf of the House of Representatives, I'd like to recognize Jim for this outstanding and well-deserved award, and for Jim's service to the House and his customers. Thank you Jim and keep up the great work!

RECOGNIZING THE WORTHINGTON, OHIO POOCH PARADE

HON. PATRICK J. TIBERI

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Friday, July 26, 2002

Mr. TIBERI. Mr. Speaker, I would like to recognize the Pooch Parade held in Worthington, Ohio. The Pooch Parade is an annual event

dedicated to the strengthening and educating of the unique relationship between dogs and the people who love them. In addition, the Parade helps create awareness of the growing number of homeless pets, the groups who work to find homes for them to end pet overpopulation and the valuable work of the hundreds of dog rescue groups and their volunteers.

In 1989 Robert Haas had the idea of organizing a parade of dogs and their people in Worthington, Ohio. He envisioned an event that would draw thousands, provide a fun time for all, and be a great vehicle for increasing public awareness of homeless pets and pet overpopulation.

In 2000, that idea became the Pooch Parade. In April of that year, approximately 800 dogs and 5,000 people participated in the Parade. Rescue groups were there with dogs looking for a "forever home." There were vendors with an assortment of dog-related items. People and dogs had a great time and an annual event was born. In 2001, the Pooch Parade attracted approximately 2,500 dogs and 8,000 people as well as more rescue groups and vendors. The 2002 Pooch Parade was attended by over 3800 dogs, 9000 dog-lovers and 50 rescue groups making the Worthington Pooch Parade the largest official Pooch Parade in the country.

The theme for the 2002 Parade, held in April, was "America's Best Friend." Ohio search and rescue dogs that worked in New York after the 9/11 terrorist attacks were honored.

I congratulate all of those involved with the Pooch Parade for their dedication to the issues of homeless pets, pet overpopulation and rescue dogs, and wish the Parade many more years of success.

HONORING BILL LAIRD FOR HIS COMMITMENT TO YOUTH

HON. BART GORDON

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Friday, July 26, 2002

Mr. GORDON. Mr. Speaker, I rise to speak today about a distinguished member of my district who is being honored by an organization that has had an immeasurable impact on America. Bill Laird, a retired employee of Willis Corroon, is Junior Achievement's National Middle School Volunteer of the Year.

He has volunteered for nine years and taught 25 JA classes in that time. Mr. Laird always goes above and beyond his classroom duties, using his work and life experiences as a way to educate young people about business, economics and the free-enterprise system.

The history of Junior Achievement is a true testament to the indelible human spirit and American ingenuity. Junior Achievement was founded in 1919 as a collection of small, after school business clubs for students in Springfield, Massachusetts.

Today, through the efforts of more than 100,000 volunteers in classrooms all over America, Junior Achievement reaches more than four million students in grades K-12 per year. JA International takes the free enterprise message of hope and opportunity even further to nearly two million students in 113 countries.

Junior Achievement has been an influential part of many of today's successful entrepreneurs and business leaders. Junior Achievement's success is truly the story of America—the fact that one idea can influence and benefit many lives.

Mr. Speaker, I wish to extend my heartfelt congratulations to Bill Laird of Franklin for his outstanding service to Junior Achievement and the students of Tennessee. I am proud to have him as a constituent and congratulate him on his distinguished accomplishment.

HONORING TAKIRA GASTON

HON. JOHN B. LARSON

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Friday, July 26, 2002

Mr. LARSON of Connecticut. Mr. Speaker, I rise today to honor and pay tribute to Takira Gaston of Hartford, Connecticut. On July 4, 2001, Takira was playing at her family's Fourth of July cookout like any 7 years old would be on hot summer afternoon. However, this typical American scene was shattered in an instant by the sound of gunshots. Two drug dealers were exchanging gunfire when one of the bullets struck Takira in the face.

Takira survived and has faced numerous surgeries, with more to come. She has handled the pain and fear with courage that is rare in such a young person. Her brave fight was chronicled by Tina Brown of the Hartford Courant on the one-year anniversary of the shooting. This moving story describe Takira's perseverance and I wish to submit it for the RECORD.

No child should have to go through the ordeal that Takira has gone through. I ask my colleagues to join with me in honoring Takira's courage and continuing to work to rid our cities of the violence that plagues them.

[From the Hartford Courant, July 4, 2002]

THE COURAGE TO HEAL

(By Tina A. Brown)

NEW HAVEN.—After riding the toy cars and playing "Donkey Kong" on the computer, Takira Gaston flashes a bright smile that makes others in the pediatric surgery center forget the protruding scars on her face.

She's having a good day on this sunny Thursday despite being at Yale-New Haven Hospital for her second round of reconstructive surgery. She's thinking about splashing in her family's above-ground pool and jumping on the trampoline in her backyard, a safe place in a new neighborhood where gunfire is seldom heard.

After playing, Takira takes time to think of someone else. Someone like her, who was shot in the face.

Takira tells her adoptive mother, Delphine Gaston-Walters, that she wants to visit New Haven police Officer Robert Fumiatti, who's recovering at Yale-New Haven after being shot last month by a suspected drug dealer. They talk briefly with Fumiatti, whose head is stabilized by a metal halo. He calls Takira "courageous" and reaches out to shake her hand. But her good mood vanishes. She's scared. She refuses to shake his hand and backs out of his hospital room.

"They are not going to touch my face," she says, with anger in her eyes, as she returns to the surgery center. Deep down, she knows she has no choice, but that doesn't stop her from launching into an hour-long temper tantrum.

Such are the shifting emotions of an 8-year-old girl trying to recover from a stray bullet that tore through her face—and awoke people to the violence in the city—on July 4, 2001. The men responsible for her shooting, Anthony Carter and Maurice Miller, were convicted this spring. But for Takira, the physical and emotional scars continue to heal, in fits and starts.

TAKING A GAMBLE

Unlike a light-skinned person with a bullet wound, Takira faces another obstacle to her healing simply because she happens to be dark-skinned.

She is prone to keloids, an excessive growth of scar tissue common among African Americans. The skin disorder has left thick, shiny scar tissue in the areas where the bullet cut through her cheek and where surgeons cut under her chin to piece her face back together.

She has returned to surgery to have the keloids removed, a gamble that her doctors and Gaston-Walters believe is worth taking. If the surgery is successful, Dr. James C. Alex, director of the division of facial plastic and reconstructive surgery at the Yale School of Medicine, is hopeful that the remaining scars left on Takira's face will gradually blend in with her otherwise perfect skin tone. But there's a 50 to 80 percent chance the keloids will return, just as bad or worse.

Takira has drifted into drug-induced sleep just before 3 p.m., as she is rolled through the double doors, draped in a cornflower blue paper sheet.

The sheet covers her up to the lower half of her chin, which is facing up toward the satellite dish-shaped lights. As the clock on the wall marks 3:11 p.m., Alex sits on Takira's left side and Dr. Bruce Schneider sits at her right.

Alex begins the delicate process of cutting out the scars and sewing Takira's face back together, much like a master quilter. Nurse John Breslin hands him a scalpel to cut around the U-shaped scar under Takira's chin. Schneider swabs the blood where Alex has cut, and applies medicine to limit the bleeding.

The scar, thick and wide, is in the same spot that Alex and Schneider cut open last July, when they pulled up the skin over her lip line, to expose her shattered jawbone, broken teeth and bullet fragments. The area was cleaned and rebuilt and a metal plate has been serving as her temporary jawbone while the bone grows back.

With methodical movements, Schneider, an oral surgeon and formerly chief resident at the Hospital of St. Raphael in New Haven, uses a small metal tool with two prongs to grasp the outer skin tissue. Alex examines the inner tissue and tests the area for nerve activity. Together, for another 25 minutes, they work on both sides of Takira's face, slowly cutting around the inner tissue of the worst scar.

Alex begins sewing together the inner skin using blue sutures, which look like dental floss, though fine as hair. The goal is to sew the tissue together without gripping it too hard, Alex instructs. "We are trying not to create tension on the skin. This will give you a more favorable scar. You will always have a scar."

Another 30 minutes pass. Alex and Schneider pull up the outer skin, and prepare for another "close." Again, they start sewing from opposite sides. A local pain reliever is applied to the scar tissue now sewn together and shaped like a thin cornrow-like braid. Rather than sew in a straight line, they create a ridge-like skin overlay, so that if Takira's new scar expands, it will push down flat rather than bubble up into a keloid, Alex says.

At 5:11 p.m., two hours after they opened it, the first scar under Takira's chin is nearly done. Their work is covered with antibiotics and an oily liquid that makes the bandages stick like glue.

Once the chin is finished, they move on to smaller scars on her neck, where incisions were cut to make way for a breathing tube in her throat. Next, they cut out the scars on her cheek, and repeat the process of sewing up the inner tissue and the outer skin, covering them with antibiotics and lotion.

Surgery is over at 6:58 p.m., three hours and 47 minutes after it began.

NIGHTMARES RETURN

Takira, her mother and the surgeons won't know for several months whether the keloids will return.

But it was a risk they took because Takira didn't want the scars to continue giving ammunition to the meanspirited children who call her scarface. Gaston-Walters, a dutiful parent, wants to protect Takira from those kinds of mental scars.

But for Takira, the pain and fear associated with the surgery make it hard to envision the outcome.

"Come on Missy, be nice," Gaston-Walters tells Takira four days after the surgery. "It's time for the stitches to come out."

Takira is trying to hit Dr. Alex, who wants to remove the stitches from her chin, cheek and neck at a record pace to prevent new scars from forming. But first he has to endure the fight of the tough-spirited little girl. Gaston-Walters grasps Takira's hands to restrain her, and Takira is promised a trip to Chuck E. Cheese's if she behaves. But she continues to cry, scream and fight.

She is given a sedative, and she goes to sleep. She appears at peace, but at home since the surgery, she wakes up at night frightened by her dreams. The nightmares had stopped about eight months after the shooting and the family's move to a quieter neighborhood, but the surgery has brought it all back again.

Takira is lying on her side when she wakes up in the examining room. Alex has finished taking out the stitches on her cheek and chin and is working on her neck when she flinches. She returns to a fighting posture, but avoids a full-blown tantrum when Alex reassures her that the procedure is nearly over.

He applies the oily liquid that smells like evergreen to each scar before placing white strips of tape, which act like sutures, on her face.

Removing keloids through surgery is risky, according to experts who have used a number of techniques to remove the scar tissue, including surgery, radiation and herbal creams.

"The keloids are like cancer that gets bigger and bigger," said Dr. Tom Geraghty, a plastic surgeon from Kansas City who has spent the past 24 years removing keloids from patients in Bolivia and the Dominican Republic.

Some patients develop the scarring from a bug bite, others from burns and other injuries that are untreated. Geraghty has seen a boy with a burn on his chest develop a keloid "thick as armor" and plenty of girls with keloids "the size of a grapefruit" as a result of ear-piercing.

No one can say yet why people with darker complexions are more likely than lighter-skinned people to get keloids. When children like Takira are afflicted with keloids, Geraghty supports the decision to remove the scars through surgery.

"Poor baby. Surgery is always a gamble, but a good gamble if you have no choice," he said. "If it were my daughter, I'd do it."

SPLASHING AROUND

Almost two weeks after the surgery, Takira got her wish to play in the water. The

portable pool hasn't been blown up yet, but she, her brother John and twin sister, Takara, take turns playing with the garden hose in a make-believe game of carwash.

There is no talk of the white bandages that still cover the lower half of Takira's face. The scar on her cheek is no longer covered and seems to be healing normally, no sign of a new keloid.

"Dr. Schneider said it was OK for her to get wet," Gaston-Walters said.

After the bandages are off, Gaston-Walters will apply an expensive over-the-counter herbal ointment to each of Takira's wounds, hoping to prevent excessive scarring.

None of that is on Takira's mind as she waits for her turn to rinse off the gold-colored pickup parked in the driveway. The game on this hot summer day, just three days before the anniversary of the shooting, is more about getting wet than washing cars. "You wet me," Takira yells to Takara, who hands her the hose.

You wet me too," Takara says.

They yell this loud enough for Gaston-Walters to hear. She laughs aloud as Takira and the others stand, dripping wet, outside the front door of the small Cape-style house. "They do this all of the time. They've changed clothes three times today already."

More surgery looms next year to remove the metal plate from Takira's jaw. For now, things are back to normal for Takira and her family.

AS THE ADA ENTERS ADOLESCENCE, ITS PROMISE REMAINS UNFULFILLED BUT WITHIN REACH

HON. STENY H. HOYER

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Friday, July 26, 2002

Mr. HOYER. Mr. Speaker, today, we commemorate the 12th anniversary of the landmark Americans With Disabilities Act, the most sweeping civil rights legislation since the Civil Rights Act of 1964.

We do so with pride, as we measure our progress. We do so with sadness, as we mourn the recent passing of Justin Dart Jr., the ADA's "father" and an indefatigable soldier of justice. And we do so with deep concern, as the courts continue to issue decisions that limit the ADA's scope and undermine its intent.

Twelve years ago today, the first President Bush signed the ADA into law, hailing it as the "world's first comprehensive declaration of equality for people with disabilities."

As the lead House sponsor of this historic law, I knew it would not topple centuries of prejudice overnight. But I knew that, over time, it could change attitudes and change hearts, and unleash the untapped abilities of our disabled brothers and sisters.

The ADA sent an unmistakable message: It is unacceptable to discriminate against the disabled simply because they have a disability. And it is illegal.

The ADA, which enjoyed overwhelming bipartisan support, prohibits discrimination against the more than 50 million disabled Americans—in employment, in public accommodations, in transportation and in telecommunications. It recognizes that the disabled belong to the American family, and must share in all we have to offer: equality of opportunity, full participation, independent living and economic self-sufficiency.