

Give them a desire, Sir, to seek Your divine guidance and direction in all their deliberations. Reach deep into their innermost emotion and intellect to bring them together in unity and act as one. Enable them to set aside personal desires to see Your divine will and way for this great Nation.

May they, and we, always be mindful, the future of our Nation, our lives, our very being rests in Thy eternal hands.

Bring them together in a spirit of humility and love for Thee and these United States of America.

We pray these petitions in Jesus' name. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Indiana (Mr. PENCE) come forward and lead the House in the Pledge of Allegiance.

Mr. Pence led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

SUPPORT BORN-ALIVE INFANTS PROTECTION ACT

(Mr. PENCE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PENCE. Mr. Speaker, it is said that the Almighty sets before us blessings and curses, life and death, and that we are to choose life so that we and our children might live.

This week on this floor, in this Chamber, in this country, our Congress will have the opportunity to say "yes" to life by supporting the Born-Alive Infants Protection Act.

In this act, we essentially firmly state that a child that is extracted from the womb and is alive is a person under the law entitled to all of the due process protections of our Constitution. Many may believe that this legislation is unnecessarily divisive and not required. But according to testimony before the Subcommittee on the Constitution, two nurses testified, Mrs. Stanek and Mrs. Baker from the Christ Hospital in Illinois, that in their hospital there are abortion practices that include inducing labor and allowing a born-alive child simply to die.

It is important this week on this occasion that Congress and America choose life. Let us today support the Born-Alive Infants Protection Act and the transcendent value of human life that is encompassed therein.

SAVE SOCIAL SECURITY FIRST

(Mr. WYNN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WYNN. Mr. Speaker, I rise this afternoon to lament the late great lockbox. You remember the lockbox. That was our promise not to spend Social Security trust funds on anything other than preserving the solvency of Social Security. Well, this administration's budget breaks into the lockbox. It obliterates the lockbox.

The Congressional Budget Office reports that the Republican budget spends \$179 billion from the Social Security trust fund on other programs. You will hear quickly that this is because of the war. That is not true. The deficit that is forcing us to break into the Social Security trust fund, 43 percent of it is due to tax cuts, tax cuts for the very wealthy, tax cuts for corporations like Enron who stand to gain \$254 million in tax breaks. I think that is wrong.

When we had a surplus a year ago and when we did not have a war, tax cuts made sense. But now today, facing a war, facing a deficit, we cannot afford these tax cuts. It breaks a promise that we made to the working families of America, and I believe it is just plain wrong.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on each motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

Any record votes on postponed questions will be taken after debate has concluded on all motions to suspend the rules but not before 6:30 p.m. today.

BORN-ALIVE INFANTS PROTECTION ACT OF 2001

Mr. SENSENBRENNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2175) to protect infants who are born alive.

The Clerk read as follows:

H.R. 2175

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Born-Alive Infants Protection Act of 2001".

SEC. 2. DEFINITION OF BORN-ALIVE INFANT.

(a) IN GENERAL.—Chapter 1 of title 1, United States Code, is amended by adding at the end the following:

"§ 8. 'Person', 'human being', 'child', and 'individual' as including born-alive infant

"(a) In determining the meaning of any Act of Congress, or of any ruling, regulation, or interpretation of the various administrative bureaus and agencies of the United States, the words 'person', 'human being',

'child', and 'individual', shall include every infant member of the species homo sapiens who is born alive at any stage of development.

"(b) As used in this section, the term 'born alive', with respect to a member of the species homo sapiens, means the complete expulsion or extraction from his or her mother of that member, at any stage of development, who after such expulsion or extraction breathes or has a beating heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, regardless of whether the umbilical cord has been cut, and regardless of whether the expulsion or extraction occurs as a result of natural or induced labor, cesarean section, or induced abortion.

"(c) Nothing in this section shall be construed to affirm, deny, expand, or contract any legal status or legal right applicable to any member of the species homo sapiens at any point prior to being 'born alive' as defined in this section."

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 1 of title 1, United States Code, is amended by adding at the end the following new item:

"8. 'Person', 'human being', 'child', and 'individual' as including born-alive infant."

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Wisconsin (Mr. SENSENBRENNER) and the gentleman from New York (Mr. NADLER) each will control 20 minutes.

The Chair recognizes the gentleman from Wisconsin (Mr. SENSENBRENNER).

GENERAL LEAVE

Mr. SENSENBRENNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and to include extraneous material on H.R. 2175, the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

Mr. SENSENBRENNER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the purpose of this bill, the Born-Alive Infants Protection Act, is to protect all infants who are born alive by recognizing them as a person, human being, child or individual for purposes of Federal law. This recognition would take effect upon the live birth of an infant, regardless of whether or not his or her development is sufficient to permit long-term survival and regardless of whether or not he or she survived an abortion.

It has long been an accepted legal principle that infants who are born alive are persons and thus entitled to the protections of the law. Many States have statutes that explicitly enshrine this principle as a matter of State law and some Federal courts have recognized the principle in interpreting Federal criminal laws. However, recent changes in the legal and cultural landscape appear to have brought this well-settled principle into question.

In its July 2000 ruling in *Stenberg v. Carhart*, the United States Supreme Court struck down a Nebraska law banning partial-birth abortion. In doing

so, the Carhart court considered the location of an infant's body at the moment of death during a partial-birth abortion, delivered partly outside the body of the mother, to be of no legal significance. Indeed, two members of the majority, Justices Stevens and Ginsburg, went so far as to say that it was, quote, "irrational," unquote, for the Nebraska legislature to take the location of the infant at the point of death into account. Thus, as Justice Scalia noted in dissent, the result of the Carhart ruling is to give live-birth abortion free rein.

Following *Stenberg v. Carhart*, the United States Court of Appeals for the Third Circuit made this point explicit in the case of *Planned Parenthood of Central New Jersey v. Farmer* when it struck down New Jersey's partial-birth abortion ban. According to the Third Circuit, under *Roe v. Wade* and *Carhart*, it is nonsensical and based upon semantic machinations and irrational line-drawing for a legislature to conclude that an infant's location in relation to his or her mother's body has any relevance in determining whether or not an infant may be killed.

The logical implications of *Carhart* and *Farmer* are both obvious and disturbing. Under the logic of these decisions, once a child is marked for abortion, it is wholly irrelevant whether the child emerges from the womb as a live baby. That child may still be treated as though he or she did not exist, and would have not the slightest rights under the law, no right to receive medical care, to be sustained in life, or to receive any care at all. If a child who survives an abortion is born alive and had no claim to the protections of the law, there would be no basis upon which the government may prohibit an abortionist from completely delivering an infant before killing it or allowing it to die. The right to abortion, under this logic, means nothing less than the right to a dead baby, no matter where the killing takes place. Thus, the *Carhart* and *Farmer* rulings have essentially brought our legal system to the threshold of accepting infanticide itself, making it necessary to firmly establish the "born alive" principle in Federal law.

The Born-Alive Infants Protection Act is designed to repudiate the destructive ideas that have brought the born-alive rule into question, and to firmly establish that, for purposes of Federal law, an infant who is completely expelled and extracted from his or her mother and who is alive is, indeed, a person under the law.

This bill draws a bright line between the right to abortion and infanticide, or the killing or criminal neglect of completely born children. The bill clarifies that a born-alive infant's legal status under Federal law does not depend upon the infant's gestational age or whether the infant's birth occurred as a result of natural or induced labor, cesarean section, or induced abortion.

Thus, the Born-Alive Infants Protection Act protects the legal status of all

children born alive and affirms that every child who is born alive has an intrinsic dignity which does not depend upon the interests or convenience of anyone else.

I urge my colleagues to support H.R. 2175.

Mr. Speaker, I reserve the balance of my time.

Mr. NADLER. Mr. Speaker, I yield myself such time as I may consume.

We today consider legislation reaffirming an important principle which is enshrined in the laws of all 50 States and unquestioned in law, that an infant who is born and who is living independently of the birth mother is entitled to the same care as any other child similarly diagnosed regardless of whether labor was induced or occurred spontaneously. It has never been particularly clear to me why we need to legislate that which most Members of Congress and the general public already understand to be the law; but if the majority is interested in restating well-settled law, there is no harm to that.

The same measure passed last year as an amendment to the Patients' Bill of Rights legislation in the Senate by a vote of 98-0, which is about as uncontroversial as something can get. Certainly it proved to be less controversial than the Patients' Bill of Rights.

I am pleased that the majority has made a serious effort in this draft of the bill to make clear that this bill has nothing to do with matters related to abortion, even going so far as to add subsection (c) further clarifying that point. Whatever concerns some may have had that this bill might be some clever way to undermine the rights protected under *Roe v. Wade* have, I think, been eliminated. Unless someone attempts to disrupt this effort by dragging the abortion debate back into it, I have little doubt that the bill will pass without much controversy.

I would like to address the concern that our Republican colleague, the gentlewoman from Connecticut (Mrs. JOHNSON), has enunciated most eloquently.

□ 1415

That is the standard of care employed by neonatologists when faced with a nonviable newborn or clearly critical ill or massively deformed newborn. These are difficult medical issues and often horrendous circumstances which confront families hoping for the gift of parenthood.

I am aware of the fact that these are complex issues with which doctors, hospitals, families and courts grapple every day. What is important to remember is that this legislation, by its plain meaning and by the stated intent of the authors, does not intrude into these difficult decisions or change the standard of care required by law.

As the committee's report makes clear, "The protections afforded newborn infants under H.R. 2175 for purposes of Federal law are consistent

with the protections afforded those infants under the laws of the 30 States and the District of Columbia that define a live birth in virtually identical terms. Like those laws, H.R. 2175 would not mandate medical treatment where none is currently indicated. While there is debate about whether or not to aggressively treat premature infants below a certain birth weight, this is a dispute about medical efficacy, not regarding the legal status of the patient. That is, the standard of medical care applicable in a given situation involving a premature infant is not determined by asking whether that infant is a person. Medical authorities who argue that treatment below a given birth weight is futile are not arguing that these low-birth-weight infants are not persons, only that providing treatment in these circumstances is not warranted under the applicable standard of medical care. H.R. 2175 would not affect the applicable standard of care, but would ensure simply that all born-alive infants, regardless of their age and regardless of the circumstances of their birth, are treated as persons for purposes of Federal law."

I do not want to trivialize the concerns of neonatologists, but I was gratified by the testimony that we received from the majority witnesses at our subcommittee hearing on this legislation, which indicated that, while an infant may be considered "born alive" under this legislation, this proposed law would not in any way substitute the medical judgment of Congress for the judgment of doctors on the scene or interfere with the painful decisions that families must make under the most difficult of circumstances. We must respect families and not have the big hand of government make their worst moments even more unbearable. I trust the sponsors of this legislation are in agreement on this point.

There has been some debate over the question, and the gentleman from Wisconsin mentioned this, whether there is some sort of recognized legal right to a dead baby when a parent intends to abort a fetus. My colleagues well know that the line drawn by the Supreme Court is that of viability within the womb, and that outside the womb the normal laws governing the appropriate care of newborns, taking into account the prognosis made by a trained health care provider, apply. This bill reinforces the law as we know it to be. It does not change it in any respect.

I hope that we can agree for once to avoid the overheated rhetoric, deal with the bill in front of us and not some other unrelated grievance. As the Hippocratic Oath states, it will "do no harm." If we must put on a show for some of the antiabortion extremists, let us get over it and get back to dealing with the real problems this country has.

I want to say also with respect to the comments of the gentleman from Wisconsin of, the question of born alive, of

a right to a dead baby, has been joined into question only in the fevered imaginations of some in the antichoice camp. But there is no harm in assuaging their concerns, there is no harm in making clear that the law is what we always know it to be. There is no right to a dead baby in an attempted abortion. There is no right, it is against the law, it is murder, to kill an infant born alive. The cases that were cited did not deal with a baby born alive under the definition in this bill, which is also the definition of the laws of most of the States, it dealt with a baby prebirth.

So there is no problem with this bill, it has nothing to do with abortion, it does not do harm to neonatology, and I see no harm in passing the bill. I see no good in passing the bill either, except that it will satisfy the concerns of some people about some recent Supreme Court decisions, and that is a useful enough thing, so we can get back to debating the real issues.

I urge my colleagues to vote for this bill.

Mr. Speaker, I reserve the balance of my time.

Mr. SENSENBRENNER. Mr. Speaker, at the risk of not quitting while I am ahead, I yield 6 minutes to the gentleman from Ohio (Mr. CHABOT), who will tell the Members what good this bill will do.

Mr. CHABOT. Mr. Speaker, I thank the gentleman from Wisconsin for yielding me time, and also for his leadership in moving forward on this important piece of legislation.

Last summer, over 70 original cosponsors joined with me in introducing H.R. 2175, the Born-Alive Infants Protection Act. The purpose of this bill is to respond to recent legal and cultural developments and protect all infants who are born alive by recognizing them as a "person, human being, child or individual" for purposes of Federal law.

Recent court decisions have called into question the rights entitled to newborn babies. Under the logic of the Supreme Court's decision in the *Stenberg v. Carhart* case, the long-accepted legal principle that infants who are born alive are persons entitled to the protections of the law has been called into question, bringing our culture and legal system closer than ever believed possible to accepting infanticide.

By failing to recognize as legally significant the location of an infant's body at the moment it is killed during an abortion, the Court's ruling opened the door for future courts to conclude that the location of an infant's body at the moment it is killed during an abortion, even if fully born, has no legal significance whatsoever.

The principle that born-alive infants are entitled to protection of the law is also being questioned at one of America's most prestigious universities. Amazingly, Princeton University bioethicist, Peter Singer, argues that the life of a newborn baby is "of no greater value than the life of a

nonhuman animal at a similar level of rationality, self-consciousness, awareness or capacity to feel." Thus, "Killing a disabled infant is not morally equivalent to killing a person. Very often, it is not wrong at all."

Think of that.

If such logic is allowed to go unchecked, the end result will be legal and moral confusion as to the status of newborn infants that are on the outskirts of viability or were marked for abortion prior to their unintended birth.

As chairman of the Subcommittee on the Constitution, I presided over hearings during which the subcommittee received credible and disturbing testimony that such confusion already exists. According to eyewitness accounts, live-birth abortions are being performed on healthy infants as late as the 23rd week of pregnancy, and beyond, that suffer from nonfatal deformities resulting in live-born premature infants who are simply allowed to die, sometimes without the provision of warmth or nutrition.

Our subcommittee was told of a living infant who was found in a soiled utility closet; another who was found naked on the edge of a sink; and another infant who, horribly, was wrapped in a disposable towel and thrown in the trash, only to be later found after falling out of the towel and onto the floor.

One witness, Nurse Jill Stanek, told the subcommittee about a live-birth abortion performed on a healthy infant at more than 23 weeks of gestation, and stated, "If the mother had wanted everything done for her baby, there would have been a neonatologist, pediatric resident, neonatal nurse, and respiratory therapist present for the delivery, and the baby would have been taken to our neonatal intensive care unit for specialized care. Instead, the only personnel present for this delivery were an obstetrical resident and my co-worker. After delivery, the baby, who showed early signs of thriving, was merely wrapped in a blanket and kept in the Labor and Delivery Department until she died 2½ hours later."

In my hometown of Cincinnati, a woman delivered a living 22-week-old baby girl after going through with the first steps of an unsuccessful partial birth abortion procedure. Reportedly, the attending emergency room physician placed the live baby in a specimen dish and asked that the baby be taken to the lab. The medical technician, Shelly Lowe, refused after she saw the baby girl gasping for breath. Instead, she held the baby, whom she named Hope, for 3 hours, singing to her and stroking her cheeks, until she died. Ms. Lowe has said that she "wanted her to feel that she was wanted; that she was a perfectly formed newborn entering the world too soon through no choice of her own."

Had any of these newborns been assessed for their likelihood of long-term survival, medical research suggests

that there is a strong chance that they would have survived. Infants born alive at 23 weeks currently have almost a 40 percent chance of sustained survival; those born at 24 weeks, a greater than 50 percent chance of survival; and those born at 25 weeks now have an 80 percent chance of survival. With medical technology rapidly improving, these survival rates will only improve.

The definition of "born alive" contained in H.R. 2175 was derived from a model definition of "live birth" that was promulgated by the World Health Organization in 1950 and is, with minor variations, currently codified in 30 States and the District of Columbia.

Like those laws, H.R. 2175 would not mandate medical treatment where none is currently indicated. While there is debate about whether or not to aggressively treat prematurely born infants below a certain birth weight, this is a dispute about medical efficiency, not regarding the legal status of the patient.

H.R. 2175 would not affect the applicable standard of care, but would only ensure that all born-alive infants, regardless of their age and regardless of the circumstances of their birth, are treated as persons for purposes of Federal law.

I urge all Members to support this bill of compassion that says that all of America's children are precious and deserving of the most basic dignities afforded human life.

Mr. NADLER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, just a few brief comments. The gentleman from Ohio mentioned the hearings that were conducted on this bill and the testimony of Nurse Jill Stanek. It is very interesting that two hearings were held on this bill, two separate years, with the exact same witnesses. The majority could not find more than one witness, Nurse Stanek, to describe these allegedly horrible things that are occurring.

The majority's witness, Dr. Bowes, said even in the situations described by majority witness Nurse Jill Stanek, Dr. Bowes, the majority witness stated, "I don't think this legislation changes medical care for those babies."

The fact is, we cannot guarantee that in a country as large as this, where the laws of all 50 States and the District of Columbia already say what this bill would say, that we cannot guarantee no one violates the law. We cannot guarantee it. Nonetheless, the majority has not been able to point to one prosecution.

Now, it may be, assuming that what Nurse Stanek described actually happened, most of her testimony was hearsay, but assuming it was true, maybe the authorities in that county should have prosecuted.

But the fact is, the courts have been very clear, there is no such thing as the right to a live-birth abortion. A baby born alive is a human being under the terms of the law in all 50 States and the District of Columbia. This bill

merely restates that, so we have no problem with that.

But we should not get into the rhetoric, we should not get into the overheated rhetoric of the few who wish to suggest that viable, healthy infants are being allowed to die in our Nation's hospitals. It is simply not true. If it is true, then people ought to be prosecuted for murder, and the fault, if it is true, lies with the prosecuting authorities wherever that may happen.

So I do not think there is a big problem here. The court decisions that were cited all referred to babies or to fetuses really still in utero. Once outside of the mother's body, they are babies, there is no legal right to kill them. God forbid. It would be murder. This bill does not change that. There is no harm in restating it, I think. I think we have taken care of the concerns of the neonatologists about the standard of care.

So I support the bill simply to put at rest the fevered apprehensions about nonexistent threats. But let us not overstate those nonexistent threats, and if they are existent, they ought to be prosecuted. If the majority really knows of such cases, I hope they get on the cases of whoever the district attorney is and say, why are you not doing something about them, because it is already against the law, unless, of course, the descriptions of those cases are not as stated. But if they are as stated, the law already makes that murder. This bill retains that as murder.

It is a harmless bill. It is a bill that does nothing, but is harmless. And why not put people's fears at rest? So I still urge people to support the bill. But we should not get carried away and imagine that under the guise or name of "abortions" any of this nonsense is going on, because if it is going on, it is murder under the law today.

Mr. Speaker, I reserve the balance of my time.

Mr. SENSENBRENNER. Mr. Speaker, I yield 2 minutes to the gentlewoman from Pennsylvania (Ms. HART).

Ms. HART. Mr. Speaker, I rise also in support of the Born-Alive Infants Protection Act.

The law would require that babies born alive be treated as babies. It seems simple. I agree with the gentleman that should be the way it is today. But, unfortunately, our society has blurred this issue and some have made it, one, an issue of the parents' interest, or in this case, lack of interest in a newborn. Babies now born at 23 weeks generally survive. Some born even earlier have survived.

Some critics of the legislation argue it is not necessary because what was alleged by one of our witnesses and several others that we have spoken with does not happen.

□ 1430

It currently does happen. It clearly does happen. We would not be dealing with this issue if it did not happen.

Ms. Stanek was just one of the individuals we spoke with through the committee. She brought with her other people who had also witnessed this type of action in a hospital, no less; a place where people go to receive care. Unfortunately, babies involved in induced-labor abortions were left to die, even though those children were born alive. It is every instance that will be covered, however. A child born alive, whether the labor is induced or not, should be treated as a child.

It seems like it should not be necessary for us to make this law. However, it was stated earlier today that viable, healthy infants are being permitted to die according to those of us who support this legislation. If we remove those adjectives, viable and healthy, that seems to except that infants who maybe are not healthy are being left to die.

Is it okay for us to allow unhealthy or maybe even unviable infants to be left to die on a cold shelf abandoned in some kind of cart in a hospital? It is not. This society must stand up for those who are the weakest. It is our responsibility as Members of the House to do so. That is why we support the Born-Alive Infant Protection Act, and I urge all of my colleagues to support it as well.

Mrs. JONES of Ohio. Mr. Speaker, I rise today to oppose H.R. 2175, the Born-Alive Infants Protection Act of 2001.

Many individuals who support a woman's right to choose have argued that this bill is harmless because it restates existing law. I oppose this bill because it mischaracterizes current abortion rights law and may create confusion among physicians who provide emergency care to pregnant women. Concerns have been raised that H.R. 2175 would obligate physicians to provide care beyond recognized standards, and that failure to adhere would raise the issue of liability. More importantly, I oppose this bill because it is yet another attempt to chip away at a woman's right to choose.

Pro-life advocates have opposed and attempted to erode reproductive rights in a number of ways: by imposing waiting periods, by denying women information about their own health choices, by restricting or removing funding for contraception and family planning efforts, and at the most radical by terrorizing physicians and clinic workers. The current Administration has signaled its intent to pursue this line of advocacy.

In April 2001 the Bush Administration proposed to remove contraceptive coverage for federal employees. Only a groundswell of opposition restored this benefit, which the Office of Management and Budget found added nothing to the cost of federal health benefits. Again in 2002, the Bush Administration has proposed to end contraceptive coverage for federal employees, even though ending such coverage would violate Title VII, the federal law prohibiting sex discrimination in the workplace. In addition, the Administration has proposed cutting Title X funding family planning programs that provide critical family planning and related health services to millions of low-income families.

Make no mistake—advocating on behalf of women's health care and reproductive rights

entails stating the core issue of reproductive rights: Who gets to decide? Who decides what a woman does with her own body?

Access to birth control and abortion is part of the larger struggle for access to health care for all women. In 1973 the Supreme Court legalized abortion. Yet today, 20% of women who want to have an abortion cannot obtain one. Lack of funding, restrictive legislation, and campaigns of terror and harassment by the antiabortion movement have severely eroded abortion rights.

While public attention has focused on restrictions of women's choices through legislation and judicial decisions, abortion services have been undermined in more basic ways. Through harassment and violence directed at doctors and other health care providers, as well as medical schools and hospitals, anti-choice forces have discouraged both the teaching and provision of abortions. As a result, abortion services have been eliminated in large parts of the country and a critical shortage of abortion providers and services has developed. As with all other attacks on access to abortion, these restrictions have the greatest impact on low-income women, rural women, and women of color.

A number of solutions support reproductive rights:

- Opposing hospital mergers with institutions that prohibit reproductive health services;

- Developing the role of non-physician clinicians as women's healthcare providers, including nurses, midwives, nurse practitioners, and physicians assistants in abortion;

- Increasing abortion training for medical residents;

- Increasing awareness of reproductive choice and abortion access as a public health issue and encouraging research in the field;

- Creating innovative public education campaigns;

- Publishing directories of reproductive health and abortion providers in English, Spanish, and other languages where women lack access to information and health services;

- Creating coalitions of like-minded organizations which have an interest in women's reproductive health and abortion, such as: American Civil Liberties Union, NARAL, NOW, National Lawyer's Guild, National Women's Law Center, and numerous health care providers and unaffiliated activists.

In the 1986 case *Thornburgh v. American College of Obstetricians & Gynecologists*, Justice Harry Blackmun stated "Few decisions are more personal and intimate, more properly private, or more basic to individual dignity and autonomy, than a woman's decision whether to end her pregnancy. A woman's right to make that choice freely is fundamental."

The terrorist events of 2001 focused our country on fundamental values such as freedom, commitment, and tolerance. Bills such as the Born-Alive Infants Protection Act of 2001 ultimately seek to curtail the freedom of choice held dear by the majority of the American public. We cannot afford to ignore challenges which seek to restrict the freedom of women to control their reproductive capacity, their decision to bear children, and the shape of their destiny.

Mr. WATTS of Oklahoma. Mr. Speaker, there are some things in life that are beyond the realm of sanity. There are some things that are just so heinous—so cruel—they surpass verbal description. The bill before the

House today addresses such an instance. We are considering a measure to ban the killing of an infant after the baby has been delivered.

The Born-Alive Infants Protection Act of 2001 states that anytime the word "person," "human being," "child" or "individual" is written in law or regulations, it will include every infant member of the species *homo sapiens* who is born alive at any stage of development.

Infanticide has no place in a civilized society. All children should be welcomed into life. I commend the sponsors of this legislation for bringing to light an injustice to innocent children and urge my colleagues to once again pass this bill.

Mr. SOUDER. Mr. Speaker, as a cosponsor of the Born-Alive Infants Protection Act, I strongly support its passage. This bill would firmly establish that, for purposes of federal law, an infant who is born alive is, indeed, a person and is entitled to the protections of the law. This concept has been a standing legal principle, spelled out in many state statutes and recognized by some federal courts in interpreting federal criminal laws. However, recent changes in the legal and cultural landscape appear to have brought this well-settled principle into question and have made it necessary for the Congress to ensure that this principle becomes law.

A significant change in how the law defines a person occurred with the U.S. Supreme Court's decision to strike down a Nebraska law banning partial-birth abortion. Partial-birth abortion is a procedure in which a doctor delivers an unborn child's body until only the head remains inside of the mother, punctures the back of the child's skull with scissors and sucks the child's brains out before completing the delivery. The Court's decision found that the location of an infant at the time of death—delivered partly outside the body of the mother—is of no legal significance. The Court's decision implies that a partially born infant's entitlement to the protections of the law is dependent upon whether or not the partially born child's mother wants him or her.

The Born-Alive Infants Protection Act was also introduced partly to respond to testimony that "live-birth abortions" are performed around the country. A registered nurse from Illinois testified before Congress that she witnessed pregnant mothers being prematurely induced and delivering living premature infants that were then left to die without any medical attention. The hospital where this occurred defended its actions by saying that the newborns were intended for abortion. In other instances, babies whose lungs are insufficiently developed to permit sustained survival are often spontaneously delivered alive, and may live for hours or days, while some are born alive following deliveries induced for medical reasons.

The Born-Alive Infant Protection Act would ensure that any infant born alive is treated with the dignity and respect of a human being and given appropriate medical attention regardless of whether he or she is completely extracted or expelled from her mother and breathes, regardless of whether or not her lung development is believed to be, or is in fact, sufficient to permit long-term survival. The infant will be considered to be alive if she has a beating heart, a pulsation of the umbilical cord, or definite movement of the voluntary muscles, regardless of whether the umbilical cord has been cut, and regardless of

whether the baby was born as a result of natural or induced labor, Caesarean section, or induced abortion. I believe we must pass this bill to protect the lives of the unborn and prematurely born.

Mr. TIAHRT. Mr. Speaker, I rise today in strong support of the Born-Alive Infants Protection Act. In 2000 this legislation passed the House overwhelmingly, by a vote of 380–15. I am hopeful that today my colleagues will again vote to protect all infants who are born alive.

It saddens me that we have come to the point where we need federal legislation to assert that an infant who is completely expelled or extracted from her mother and who is alive is a person under the law. I strongly believe that the unborn should have the same protection under the law, but unfortunately not all of my colleagues agree. Many of you, however, agree that a baby who is born alive is a person and should not be killed or left to die.

Many states have approved the practice of "live-birth abortions." Infants born alive as a result of an unsuccessful abortion are killed or left to die, some babies are partially born only to be killed, and in so-called "therapeutic abortions" physicians use drugs to induce premature labor and deliver children still alive and then simply allow them to die. According to nurses at Christ Hospital in Oak Lawn, Illinois, physicians have used the "therapeutic abortion" procedure on infants with non-fatal deformities, such as spina bifida and Down Syndrome. Many of these babies have lived for hours after birth, with no efforts made to determine if any of them could have survived with appropriate medical assistance. Those who swear to save lives are instead leaving living, breathing, kicking, screaming babies to slowly die on their own.

A registered nurse from Illinois testified before Congress that she witnessed pregnant mothers being prematurely induced and delivering living premature infants that were then left to die without any medical attention. The hospital where this occurred defended its actions by saying that the newborns were intended for abortion. There is no defense for leaving innocent babies to die.

As a father of three beautiful children and a strong defender of human life, I am embarrassed that we live in a country where babies are abandoned and left to die. I urge you to vote in favor of this important legislation so that all the beautiful children who come into this world are treated as the human beings they are.

Mr. JEFF MILLER of Florida. Mr. Speaker, I rise in strong support of H.R. 2175. Every infant deserves to be fully entitled to all protections of our laws, no matter the likelihood of long-term survival. This legislation will ensure that the deplorable practice of infanticide will never occur again in this country.

We have many serious issues to tackle here in Washington, few as important as the right to life. I am pleased to see that this issue is no longer on the backburner. It is reassuring that we in the House are making strides toward legislation that will reduce abortion rates here and abroad.

Since the legalization of abortion in 1973, countless victims have paid the ultimate price. The landscape of American society changed with the *Roe vs. Wade* decision, which has resulted in societal corruption and a moral decline in our nation.

Life is a fundamental human right. We must preserve the sanctity of this right and we must not rest until its place in the moral fabric of our nation is restored. The unborn child has no voice and cannot protect itself. It is our responsibility to ensure their voices are heard and their right to life is protected.

I urge my colleagues to vote in favor of H.R. 2175 and take a stand for what we know to be ethically decent.

Mr. CRANE. Mr. Speaker, as an original cosponsor to the legislation before us, I rise in strong support of H.R. 2175, the Born-Alive Infants Protection Act.

While it has long been accepted as legal principle that infants born alive are entitled to the protection of law, recent court decisions have cut back this fundamental right. The purpose of this legislation is to firmly establish under law that an infant who is completely expelled or extracted from his or her mother and who is alive, is considered a person for purposes of federal law. This recognition takes effect upon birth, irrespective of whether the baby survived an attempted abortion.

This legislation will make illegal "live-birth" abortions, a practice so barbaric in nature and tragic in outcome that it is almost inconceivable that they occur. Unfortunately, testimony received by the Subcommittee on the Constitution indicates that in some jurisdictions, once a child is marked for abortion, it may become irrelevant whether that child emerges from the mother's womb as a live baby. In other words, some live-born premature infants may be treated as a nonentity, and allowed to die.

I thank my friend from Ohio, Congressman CHABOT, for introducing this vital piece of legislation, and I strongly urge all my colleagues to cast an "aye" vote on final passage.

Mr. WELDON of Florida. Mr. Speaker, I rise in strong support of H.R. 2175, the Born-Alive Infant Protection Act and I am a proud cosponsor of this bill.

This legislation is long overdue. For too long the youngest and most vulnerable of children have not been protected. This bill corrects this and brings protection to these children. It ensures that all children who are born alive are to be considered a human being.

This bill would grant protection from being killed to all babies that show signs of life such as a heartbeat, breathing or muscle movement once they are outside the mother's womb.

I commend the Chairman for bringing this bill to the floor today, and I urge all of my colleagues to support its passage. It is critical that we value all human life and this bill moves us in that direction.

Mr. NADLER. Mr. Speaker, I yield back the balance of my time.

Mr. SENSENBRENNER. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mr. STEARNS). The question is on the motion offered by the gentleman from Wisconsin (Mr. SENSENBRENNER) that the House suspend the rules and pass the bill, H.R. 2175.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mr. SENSENBRENNER. Mr. Speaker, on that I demand the yeas and nays. The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

MESSAGES FROM THE PRESIDENT

Messages in writing from the President of the United States were communicated to the House by Ms. Wanda Evans, one of his secretaries.

ENHANCED BORDER SECURITY AND VISA ENTRY REFORM ACT OF 2002

Mr. SENSENBRENNER. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 376) providing for the concurrence by the House with amendments in the amendment of the Senate to H.R. 1885.

The Clerk read as follows:

H. RES. 365

Resolved, That, upon the adoption of this resolution, the House shall be considered to have taken from the Speaker's table the bill H.R. 1885, with the Senate amendment thereto, and to have concurred in the Senate amendment with the following amendments:

(1) Amend the title so as to read: "An Act to enhance the border security of the United States, and for other purposes."

(2) In lieu of the matter proposed to be inserted by the amendment of the Senate, insert the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the "Enhanced Border Security and Visa Entry Reform Act of 2002".

(b) **TABLE OF CONTENTS.**—The table of contents for this Act is as follows:

Sec. 1. Short title.

Sec. 2. Definitions.

TITLE I—FUNDING

Sec. 101. Authorization of appropriations for hiring and training Government personnel.

Sec. 102. Authorization of appropriations for improvements in technology and infrastructure.

Sec. 103. Machine-readable visa fees.

TITLE II—INTERAGENCY INFORMATION SHARING

Sec. 201. Interim measures for access to and coordination of law enforcement and other information.

Sec. 202. Interoperable law enforcement and intelligence data system with name-matching capacity and training.

Sec. 203. Commission on interoperable data sharing.

TITLE III—VISA ISSUANCE

Sec. 301. Electronic provision of visa files.

Sec. 302. Implementation of an integrated entry and exit data system.

Sec. 303. Machine-readable, tamper-resistant entry and exit documents.

Sec. 304. Terrorist lookout committees.

Sec. 305. Improved training for consular officers.

Sec. 306. Restriction on issuance of visas to nonimmigrants who are from countries that are state sponsors of international terrorism.

Sec. 307. Designation of program countries under the Visa Waiver Program.

Sec. 308. Tracking system for stolen passports.

Sec. 309. Identification documents for certain newly admitted aliens.

TITLE IV—ADMISSION AND INSPECTION OF ALIENS

Sec. 401. Study of the feasibility of a North American National Security Program.

Sec. 402. Passenger manifests.

Sec. 403. Time period for inspections.

TITLE V—FOREIGN STUDENTS AND EXCHANGE VISITORS

Sec. 501. Foreign student monitoring program.

Sec. 502. Review of institutions and other entities authorized to enroll or sponsor certain nonimmigrants.

TITLE VI—MISCELLANEOUS PROVISIONS

Sec. 601. Extension of deadline for improvement in border crossing identification cards.

Sec. 602. General Accounting Office study.

Sec. 603. International cooperation.

Sec. 604. Statutory construction.

Sec. 605. Report on aliens who fail to appear after release on own recognition.

Sec. 606. Retention of nonimmigrant visa applications by the Department of State.

Sec. 607. Extension of deadline for classification petition and labor certification filings.

SEC. 2. DEFINITIONS.

In this Act:

(1) **ALIEN.**—The term "alien" has the meaning given the term in section 101(a)(3) of the Immigration and Nationality Act (8 U.S.C. 1101(a)(3)).

(2) **APPROPRIATE COMMITTEES OF CONGRESS.**—The term "appropriate committees of Congress" means the following:

(A) The Committee on the Judiciary, the Select Committee on Intelligence, and the Committee on Foreign Relations of the Senate.

(B) The Committee on the Judiciary, the Permanent Select Committee on Intelligence, and the Committee on International Relations of the House of Representatives.

(3) **FEDERAL LAW ENFORCEMENT AGENCIES.**—The term "Federal law enforcement agencies" means the following:

(A) The United States Secret Service.
(B) The Drug Enforcement Administration.
(C) The Federal Bureau of Investigation.
(D) The Immigration and Naturalization Service.

(E) The United States Marshall Service.
(F) The Naval Criminal Investigative Service.

(G) The Coastal Security Service.

(H) The Diplomatic Security Service.

(I) The United States Postal Inspection Service.

(J) The Bureau of Alcohol, Tobacco, and Firearms.

(K) The United States Customs Service.

(L) The National Park Service.

(4) **INTELLIGENCE COMMUNITY.**—The term "intelligence community" has the meaning given that term in section 3(4) of the National Security Act of 1947 (50 U.S.C. 401a(4)).

(5) **PRESIDENT.**—The term "President" means the President of the United States, acting through the Assistant to the President for Homeland Security, in coordination with the Secretary of State, the Commissioner of Immigration and Naturalization, the Attorney General, the Director of Central Intelligence, the Director of the Federal Bureau of Investigation, the Secretary of Transportation, the Commissioner of Customs, and the Secretary of the Treasury.

(6) **USA PATRIOT ACT.**—The term "USA PATRIOT Act" means the Uniting and Strengthening America by Providing Appro-

priate Tools Required to Intercept and Obstruct Terrorism (USA PATRIOT ACT) Act of 2001 (Public Law 107-56).

TITLE I—FUNDING

SEC. 101. AUTHORIZATION OF APPROPRIATIONS FOR HIRING AND TRAINING GOVERNMENT PERSONNEL.

(a) **ADDITIONAL PERSONNEL.**—

(1) **INS INSPECTORS.**—Subject to the availability of appropriations, during each of the fiscal years 2002 through 2006, the Attorney General shall increase the number of inspectors and associated support staff in the Immigration and Naturalization Service by the equivalent of at least 200 full-time employees over the number of inspectors and associated support staff in the Immigration and Naturalization Service authorized by the USA PATRIOT Act.

(2) **INS INVESTIGATIVE PERSONNEL.**—Subject to the availability of appropriations, during each of the fiscal years 2002 through 2006, the Attorney General shall increase the number of investigative and associated support staff of the Immigration and Naturalization Service by the equivalent of at least 200 full-time employees over the number of investigators and associated support staff in the Immigration and Naturalization Service authorized by the USA PATRIOT Act.

(3) **AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated such sums as may be necessary to carry out this subsection, including such sums as may be necessary to provide facilities, attorney personnel and support staff, and other resources needed to support the increased number of inspectors, investigative staff, and associated support staff.

(b) **WAIVER OF FTE LIMITATION.**—The Attorney General is authorized to waive any limitation on the number of full-time equivalent personnel assigned to the Immigration and Naturalization Service.

(c) **AUTHORIZATION OF APPROPRIATIONS FOR INS STAFFING.**—

(1) **IN GENERAL.**—There are authorized to be appropriated for the Department of Justice such sums as may be necessary to provide an increase in the annual rate of basic pay—

(A) for all journeyman Border Patrol agents and inspectors who have completed at least one year's service and are receiving an annual rate of basic pay for positions at GS-9 of the General Schedule under section 5332 of title 5, United States Code, from the annual rate of basic pay payable for positions at GS-9 of the General Schedule under such section 5332, to an annual rate of basic pay payable for positions at GS-11 of the General Schedule under such section 5332;

(B) for inspections assistants, from the annual rate of basic pay payable for positions at GS-5 of the General Schedule under section 5332 of title 5, United States Code, to an annual rate of basic pay payable for positions at GS-7 of the General Schedule under such section 5332; and

(C) for the support staff associated with the personnel described in subparagraphs (A) and (B), at the appropriate GS level of the General Schedule under such section 5332.

(d) **AUTHORIZATION OF APPROPRIATIONS FOR TRAINING.**—There are authorized to be appropriated such sums as may be necessary—

(1) to appropriately train Immigration and Naturalization Service personnel on an ongoing basis—

(A) to ensure that their proficiency levels are acceptable to protect the borders of the United States; and

(B) otherwise to enforce and administer the laws within their jurisdiction; and

(2) to provide adequate continuing cross-training to agencies staffing the United States border and ports of entry to effectively and correctly apply applicable United States laws;