

of the House Labor Committee. She was instrumental in raising the minimum wage from 40 cents to 75 cents per hour.

In a marvelous ceremony in the Rotunda of the Capitol on March 24, Dr. Dorothy Height received the Congressional Gold Medal, the most distinguished award bestowed by the U.S. Congress. The struggle for equality in America in the 20th century—for civil rights, for women's rights, for voting rights, for human rights—is the story of Dr. Height's life. At age 92, she remains a beacon to her own generation and generations to follow. Countless young people have been inspired by her idealism, strengthened by her courage, and guided by her faith. She has empowered these young people to make a difference by her own passion for justice.

It is a great honor to be the first woman to lead a party in the House of Representatives. When I was first elected to that position, we made history. Now we are making progress. As we celebrate the achievements of women throughout history and work toward progress of our own, we are inspired by the words of Eleanor Roosevelt: "It's up to the women!"

Ms. SOLIS. Mr. Speaker, for over a decade, Women's History Month has celebrated the achievements and accomplishments of women nationwide. The incredible contributions women have made in politics, science, art, and activism, demonstrate some of the revolutionary advancements in American women's rights. Women today follow in the footsteps of pioneers such as Elizabeth Cady Stanton and Alice Paul, who fought for women's right to vote in 1920, or Dolores Huerta, a contemporary champion of women's rights.

We must continue to create platforms for women's voices and opinions and support a continuing momentum toward women's freedom and equality. During this month and throughout the year, women all across the United States should take a moment to recognize the gains afforded to them through their predecessors' hard work and unwavering commitment to improving the lives and rights for all women.

As a Latina, and one of 16 million Latinas nationwide, I recognize some of the unique and continuing societal obstacles for Latinas—like unequal pay, educational disadvantages, unmet health care needs, and civil rights struggles. I am certain, however, that through the work of courageous leaders in our community, our accomplishments and contributions as women of color will continue to grow well into the future.

Together, women will continue to make the difference.

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

NARCOTICS IN THE UNITED STATES

The SPEAKER pro tempore. Under the Speaker's announced policy of January 7, 2003, the gentleman from Indiana (Mr. SOUDER) is recognized for 60 minutes as the designee of the majority leader.

Mr. SOUDER. First, Mr. Speaker, let me thank tonight's Speaker pro tempore, the gentleman from California (Mr. OSE), for his leadership in Congress on the issue that I am going to address tonight, which is our narcotics

problem in the United States. He has been a valuable member of this subcommittee from the time he got here, an aggressive member. We have held several hearings in California with him.

And I want to personally thank him and tell him how much he will be missed, since he has chosen to leave Congress, because we really need people of his expertise and his commitment. Thank you very much.

Mr. Speaker, there are a number of issues on narcotics I am going to talk about tonight. We have had a busy number of days here in Washington on this subject, and I want to start first with Colombia, where we have the largest investment in the narcotics effort.

Just not that many days ago, President Uribe, the President of Colombia, was here. He met with leaders on both sides of the aisle. He met with the Speaker's Drug Task Force, which I co-chair; and we had the opportunity to hear what is interestingly one of our great success stories.

In the area of narcotics, it is not possible ever to totally defeat the drug problem in America because every day new people are exposed. We are dealing with fundamental human weaknesses. But we can either make progress or we can go back. We were making progress for nearly 10, 11 straight years when Ronald Reagan implemented a policy of "just say no," articulated so ably by the First Lady.

We, in fact, made tremendous progress. It was not just a slogan, just say no, but that was the message communicated to young people and people across the country. There was an aggressive effort to cut the sources of supply, interdiction, law enforcement, along with efforts in communities around the country to just say no and then help those who fell into drug abuse.

As we backed off of that in the early to mid-1990s, and sent a different message of "I didn't inhale," and cut back interdiction efforts, cut the drug czar's office from 120 employees down to about 30 employees, we saw such a surge in drug use in the United States and narcotics in the United States that it would take a 50 percent reduction from the 1993-94 levels, at the peak of the kind of drug revival in America to get back to where we were in the 1990-91 era.

In the latter years of the Clinton administration, and since President Bush has taken office, we have had a steady reduction in drug use in junior high, sophomore year in high school, senior year in high school; and we are making steady progress. We have also had dramatic changes in the country of Colombia.

Let me briefly refer to this map of Colombia. Colombia is a large country, the oldest democracy in South America. We often hear about its civil war, but it is a civil war with thugs. It is not a civil war in the sense of a traditional type of civil war. These are peo-

ple who are violently trying to overthrow their government. Any poll will show any numbers in the group, and a number smaller than our prison population in all but a few States even, let alone our country. They are people who are thugs who have not been captured, and they provide protection and are increasingly taking over the production of cocaine.

Ninety percent of our cocaine comes from Colombia; the heroin, and most of our heroin in America comes from Colombia, and they manage a lot of the networks for the marijuana distribution as well. But that was not always the way in Colombia. Colombia has been destabilized because of our use of narcotics in the United States and in Europe.

Colombia is a beautiful nation for tourism, with Cartagena and many cities along the coast. This is the Amazon basin here, feeding into the Amazon River. You have, in the darker green, beautiful areas of rain forest in that basin. These are the start of the Andes Mountains, beautiful high mountains. Up along the border with Venezuela we see Lake Maracaibo, the big piece of water coming in, and Venezuela there is one of the richest oil areas in the world, which is also true down in Colombia.

We spent, with American tax dollars, millions to try to protect that pipeline. Colombia was our eighth largest supplier of oil. More than Kuwait. But it was stopped as narcoterrorists came in and started breaking the pipelines to try to deny the government of Colombia the ability to function. The oldest democracy.

Anybody who has seen the fiction movie "Clear and Present Danger" has at least a fiction version of the violence that took place there, and an understanding of when the Cali and Medellin cartels were dominating the country what that was like. They basically corrupted the government, killed lots of the judges, killed 30,000 policemen, which is the equivalent of an incredible number in the United States. But they had oil. They were a rich oil country.

This area in here, and in some of the other multiple other zones, is of course the richest coffee area in the world. You hear about Colombian coffee. If you have emeralds, they come from Colombia, odds are, unless they are fake. Gold. They have gold there. Most of our flowers that we buy in the United States come from there. If you fly into the beautiful city of Bogota, in the lower parts of the Andes, you will see just acres and acres and acres of places growing flowers. Many of the supermarkets, the major chains bring that in. I have heard a figure as high as 70, 80 percent of the flowers sold in America come from Colombia.

It is a stable, solid, economic country. That is not even mentioning textiles and other industries there. It is the oldest democracy that has been wrecked by us and by others. Now, as

these cartels have had an impact, it has destabilized their political system.

□ 1945

What we have done is ramped up what we call the Andean Initiative to not only cover Colombia but Peru, Bolivia and Ecuador with some help over to Brazil on the far side and some to Venezuela on the top and some to Panama on the sides, but we have mostly got it concentrated in Colombia.

What we have seen as Congress appropriated additional dollars, our peak was probably \$800 million a year, of which about 60 percent was for eradication efforts, 40 percent was to help rebuild their infrastructure, police forces, law enforcement, alternative development and other things like that, that coca eradication in this past year, after several years of this aggressive pressure and with the brave president of Colombia, President Uribe, when I say brave, what I mean is this:

His father was assassinated by the drug dealers in Colombia. He has had multiple threats on his life. When I was there along with the gentleman from Massachusetts (Mr. FRANK) at the swearing in and the inauguration of President Uribe, they attacked us. The two of us would have just been a footnote if we had died because there were many others there, too. But, as we left, we heard this big boom. I remember the gentleman from Massachusetts saying, "I've never heard of a one-gun salute." We were supposedly inside a perimeter of roughly 10,000 soldiers protecting us, but they had launched Howitzers from about a mile and a quarter away.

At first they went one way off, then they went in the other direction off, then they hit a housing complex and killed a bunch of people, then they hit the corner of the presidential palace, but by that time the helicopters and everybody were on them so we were spared. But they tried to kill him on his inauguration day. There is a multiple-million-dollar price on his head or his family, yet he carries on.

Vice President Santos was kidnapped by the drug traffickers. He escaped. He was a newspaper publisher-editor in Colombia. He escaped from the drug traffickers, came back and decided to run for office.

That is what you call two committed people, when they are so willing to stand up to the drug traffickers. Even when they have had their family killed and they personally have been kidnapped and have the threats on their life, they are standing there fighting.

This is not Vietnam. This is not a country where we are asking, will they help? Will they do their share? This is not, quite frankly, even what we see in Iraq right now or Afghanistan right now, where we wonder sometimes which side the Iraqi police are on. When we see that incident the other day, it is like, Why were you standing there when they were killing American contractees?

That is not the case here. They are dying because of our drug use, and what we are doing is supplying them with the training and the backup to do this.

What has happened with this, and particularly with President Uribe's aggressiveness, is that they are now not just eradicating the coca crop once, they are eradicating it three times. Because coca, and the equator is down more in this area, somewhere in this zone, it is just among the best places in the world to grow this type of crop. You have elevation for heroin poppy, you have lots of rain, it can grow and plant multiple times a year. So unless you are really committed, you can do this token stuff. We sprayed it, we eradicated, yeah, but they got two more crops in that cycle. The question is, did you hit all three?

Now, with adequate funding, we are hitting all three. We are going after them, President Uribe is going after them, and now alternative development can work.

If on a street corner of the United States you can make \$400 as a lookout for a drug group, it is pretty tough to talk you into working at McDonald's for \$5.50, if you can get \$400 with no risk. But if there is a risk you might go to prison, if there is a risk you could get shot in a drug shoot-out or something, then maybe you will take the \$5 job. We cannot pay everybody what the drug dealers can pay them, but with this pressure we are seeing alternative development start to take place.

Let me give you some of the good news from Colombia.

Coca eradication has increased 57 percent and poppy eradication 27 percent. In some areas, they eradicate crops by hand. In other areas, with the assistance of the U.S. Department of State Air Wing, a precise aerial campaign surgically targets and destroys illicit crops. The chemical used is the same available to Americans for use at home from hardware stores.

By the way, they use the same thing we spray with to put around their crops to kill weeds. So if it is a problem when we spray to kill the coca, it is a problem to go to any grocery store in any nation of the world because it is the same stuff. It is not dangerous stuff. That is one of the tremendously wrong rumors that spread, and it is not helpful for people to not tell the truth about this stuff.

In drug seizures, coca base seizures have increased 813 percent, heroin seizures have increased 296 percent, drug labs detection and seizures have increased 321 percent. In Bogota alone, 2.8 tons of drugs were confiscated. These seizure statistics are exclusively credited to the Colombian National Police and Armed Forces. Their commitment is in evidence every day.

Interestingly, even more important in one sense, it is very important that we control the coca and heroin, but long-term we have to have some stability. Quite frankly, the coca and her-

oin was so stockpiled that we have not seen all the results yet, and we need to start to see results on the street prices and supply in the United States.

But we have also had other successes. Roadblock-type kidnappings are down 78 percent. Bank robberies are down 69 percent. Extortion kidnappings are down 64 percent. Massacre events and victims are both down 43 percent. Homicides are down 17 percent. The 2003 homicide rate is the lowest rate recorded since 1987. The rule of law and the power of the Colombian judicial system have improved markedly. Their commitment is in evidence every day.

This is important, because for the first time in the populous areas of Colombia for decades they are getting stability. I had one meeting in my office with a Colombian-U.S. business group, and they got a phone call because at the school there where most of their children go in Bogota, there had been a kidnapping that day. I think it was in Bogota as opposed to Medellin, but whichever city it was, there had been a kidnapping where the FARC and the narcoterrorists had blocked off a bridge and got a young mother with her daughter. They all knew the person, they were all relieved that it was not their family, but can you imagine living with that every day about the kidnappings?

Three different groups, ELN, the FARC and the so-called paramilitary groups are all practicing now, managing drug trafficking and the kidnapping. They are finally meeting a government that is committed and going after them. We are supplying the assistance to do it, not boots on the ground in battle but providing the technical assistance to keep the helicopters up.

Our total investment in this battle when it is directly related to the United States and our hemisphere is 400, proposed to increase to 800. It is nothing. We have got that all over the world, and they are not on the front lines getting shot at. The ones that got captured were doing backup, and the FARC basically got them by accident, shot them, kept them and killed some. We are trying our best to get them out. But they are not out there. They are not the ones in the front lines doing the fighting or getting shot at like in Iraq because the Colombians themselves are doing it, and we have been accurately and thoroughly training their forces, that they have basically taken back their country. Seventy-four percent reduction in road attacks, 67 percent reduction in bridge attacks, 67 percent reduction in electric infrastructure attacks.

It is pretty tough, as we are seeing in Iraq. If you cannot get your electric system to work, if you cannot make sure that the bridges are working across a river, if you cannot make sure that people can drive down the highway, it is pretty tough to establish law and order in a country. It is pretty tough to make sure that alternative

developments, palm heart or soybeans or bananas or whatever you are growing, can get to market if you are going to be kidnapped, the bridge is out, the electric system is knocked out. So it is really important that we have had this type of success in Colombia, and it is something we can brag about.

They now have in every single metro area now a Colombian National Police presence. That is an extraordinary jump from just a few years ago that along the Putumayo that we are finally seeing some order.

Part of our problem, what is difficult, is that as we establish order in the populated areas, they are pushing into that Amazon jungle. The biggest threat we have to the rain forests of South America are from narcotics and coca and in particular labs. Because when you fly over, you see the chemicals pouring into the rivers. It is not timber cutting that is the biggest threat. It is narcotraffickers that are the biggest threat. Furthermore, what happens is they will move these people.

There is a national park in Peru that is having a similar problem. They are worried about Ecuador. But in the national parks in Colombia, they will move out there with their labs, move farmers out there, often under forest or some with lure of high pay. They will then establish a colony out in the rain forest. Then when we say we want you to do alternative development, they will go, there is no road. Of course there is no road. They are carving landing strips in national parks and planting illegally in national parks and then they complain to us that we can't do alternative development. They cannot be there. That is not a logical market-based thing, and that is a hard thing to say when we deal with alternative development, but it is the truth.

So Colombia is a success story. It does not mean every day it is a success. It does not mean there are not attacks. It does not mean that we have eliminated coca and heroin, but Colombia is a remarkable success story.

If we remain firm and President Uribe remains firm, we are at a very, as the drug czar, the director of the Office of National Drug Control Policy, John Walters, says and all those involved, we are at a tipping point, that if we keep this pressure on, we may see successes like we have seen in Bolivia, Ecuador and Peru which, by the way, the old idea of the balloon that if you squeeze one place, it is going to pop out, we have squeezed it in and we may be at a historical tipping point if we just stay the course.

Next I want to touch on Afghanistan. Earlier today we held a hearing on Afghanistan entitled "Afghanistan: Are the British Counternarcotics Efforts Going Wobbly?"

Where did we come up with the expression "are the British counterdrug efforts becoming wobbly?" Let me say a couple of different things.

First off, the expression comes from this. When Margaret Thatcher received

the Presidential Medal of Freedom from former President Bush, better known as Bush 41, he said about her:

We will never forget her courage in helping forge a great coalition against the aggression which brutalized the Gulf. Nor will I forget one special phone conversation that I had with the Prime Minister. In the early days of the Gulf crisis—I am not sure you remember this one, Margaret—in the early days of the Gulf crisis, I called her to say that though we fully intended to interdict Iraqi shipping, we were going to let a single vessel heading for Oman enter port down at Yemen, going around Oman down to Yemen—let it enter port without being stopped. And she listened to my explanation, agreed with the decision, but then added these words of caution, words that guided me through the Gulf crisis, words I'll never forget as long as I'm alive: "Remember, George," she said, "this is no time to go wobbly."

The question is, as we are reaching a very critical point in Afghanistan, have the British gone wobbly?

Let me say, as we have repeatedly said, the British are our best friends in counterterrorism; and they have been the ones who have been most aggressive about going after heroin in Afghanistan.

Let me share a couple of introductory points on this. Last year's Afghan opium production was the second highest on record. That is a sobering fact if you think about it, because that means if it is the second highest on record, it is the second highest while we were there and the British were there, opium production went to the second highest on record. According to data and maps provided to the subcommittee by a U.S. intelligence agency, Afghan opium poppy cultivation is soaring and the estimates of hectares under cultivation are now approaching the highest level of past production.

I am concerned because over 20,000 Americans die every year from drugs and 7 to 10 percent of heroin sold in the U.S. is traced to the Afghan region. We do not really know exactly how much it is. It may be higher than that. We know at one point it was 50 percent, but right now the problem in Colombia is that the heroin seems to be coming in from there and most of the Afghan heroin seems to be moving to Europe. But if this much comes to market, it will pour into the U.S. and drive prices down, so even if we succeed in Colombia, Afghanistan is going to overrun us.

The United Nations Office on Drugs and Crime, UNODC, has conducted annual opium poppy surveys in Afghanistan since 1994. The 2003 survey shows that Afghanistan again produced three-quarters of the world's illicit opium last year. In other words, Colombia is only really supplying opium to us. Afghanistan is supplying the rest of the world. That is not true of cocaine. Colombia supplies cocaine to the whole world, but in heroin we get it from Colombia, it appears, and most of Afghan heroin covers the rest of the world.

The UNODC concluded that out of this drug chest some provincial administrators and military commanders take a considerable share. Terrorists take a cut as well. The longer this happens, the greater the threat to security within the country and on its borders.

What we focused on in the hearing this morning was that the British-led effort on eradication of opium poppy is stalled just as the opium harvesting season in the south of Afghanistan is upon us.

We also took our U.S. Defense Department to task as well because they have not been going after some of the storage centers and other things and the British had complained to me in London, both in their military departments and in their intelligence areas, that we had not been committed to certain eradication efforts. At an inter-parliamentary conference twice in the last 2 years they have complained about American enforcement, and here we seem to have some wobbling by the British and we are trying to understand what exactly is happening here. It does not appear to be Prime Minister Blair or Mr. Straw, it does not appear to be the guys precisely on the ground, but somewhere in the middle here they have put a hold.

What do I mean by a hold? The Assistant Secretary of State for Narcotics, International Narcotics and Law Enforcement, who oversees not only Colombia but the efforts in Afghanistan and not just the anti-narcotics efforts in Afghanistan but this agency oversees all the law enforcement efforts in Afghanistan, I am going to read some of his testimony from today:

Initial reports just in from the field in Afghanistan, this is as of even yesterday, indicate that we could be in the path for a significant surge, some observers indicate perhaps as much as a 50 to 100 percent growth in the 2004 crop over the already troubling figures from last year. By these estimates, unless direct, effective and measurable action is taken immediately, we may be looking at well over 120,000 hectares of poppy cultivation this year.

□ 2000

"That would constitute a world record crop empowering traffickers and the terrorists they feed, raising the stakes for and vulnerability of Afghan democracy, and raising the supply of heroin in the world market."

Assistant Secretary Charles continued: "Even more disturbing, these reports indicate that the clock is ticking faster than many anticipated due partly to warmer than expected weather in southern and eastern Afghanistan. As a direct result, the time for action may be shorter than anyone anticipated. I," Assistant Secretary Charles, "have recently learned in the U.N. Office of Drugs and Crime that they expect the unusually warm weather in southern Afghanistan will result in an early harvest which in some provinces has already started."

What does this mean? It means that they were projecting we had several more months to complete an eradication project and they need to go now, not later, now; and that if we do not move now, the whole cycle, which normally would go into fall, is going to be moved up, and if my colleagues see Afghanistan there, the southern half roughly going up to the east side, 58 percent of opium eradication is supposed to be done by the British, 42 percent by us. Because the British are in the south in the Pashtun areas and where it is warmer and also less mountainous. The mountains are not as high. It is warmer. So the opium is flowering now. And in the north, where we are more in charge of eradication largely in Tajek areas, but other areas as well, starting May 1 we will start our operations and moving in.

Here is some of the political dilemma. The British for some reason, in kind of a bizarre position, seem to be saying, and this is literally what we heard from Secretary Charles under questioning today, is his understanding was they said, Since we did not get the heroin eradicated earlier and it is starting to flower, we really should not destroy it because it will destroy the farmers' income for this period and that would be terrible because they have worked this whole long period to bring it to market.

And we think, wait a second, this is not soy beans. First off, let us get this straight. Ninety-two percent of the agricultural land in Afghanistan is not heroin. Afghanistan does not have a heroin tradition. It has gone in and out. But as the former King told us when we met with him when he was still in exile and then when I was recently back over in Afghanistan again, during their kind of window of 30 or 40 years of a benevolent monarchy and moving towards a democracy, in their first years of democracy, they were not a heroin country. They were the breadbasket of that whole zone because where they can grow heroin and coca, it is also great for other products. But they switched over partly because of the Taliban, which got 80 percent of their income from heroin.

The question is who is going to run this country? Furthermore, a lot of the Northern Alliance groups that were aligned got their money from heroin. That was how they operated their country as they were war torn and blowing up other things in ways to make money and the regular farmers would get terrorized because they could get more money faster through heroin. It is a mess. And that as we tackle Afghanistan, if we are really going to try to restore order there and not have these terrorists and drug lords who are becoming more rapidly around the world the same people, we have to get at the heroin.

Now, the argument here is we are talking about only 8 percent; so the market has covered 92 percent but these 8 percent, mostly in politically

potent highly, what we would call warlord areas, is a problem.

Let me finish my other point with the British in the flowering at the last minute. As Secretary Charles said today, this would be roughly akin to not apprehending a drug cartel person as they were bringing the money into the bank because they put up the whole network, they grow it, they distribute it, and now they are ready to deposit the money and they are nabbing them then. They should have got them at the beginning, not when they are getting ready to put the money in the bank. So why do they not just let them go? I mean, the logic of this is crazy. This would be as somebody does all the work to lay out a bank robbery, they conduct the bank robbery, they steal the money, and then we get them at the tail end, but they put all that work in. I do not know if we should stop them.

Furthermore, this is not benign. The heroin poppy where we are trying to be so generous, apparently, and not eradicate because we do not want to deprive the farmers of their income is going to kill people. It is going to leave families addicted. It is going to have women being beaten at home and children being abused by their parents because they got this heroin poppy. This is not a benign flowering marigold flower. It is a heroin poppy that is going to kill people, maim people, lead to automobile wrecks, terrorism around the world. Why in the world would anybody think that they are not going to eradicate it when it is flowering? We cannot sit there with planes on the ground, twiddling our thumbs, while the world is about to be assaulted by the biggest crop of heroin in history. It is nonsensical.

Furthermore, if we do not crack down and if the British will not be aggressive in the southern part of Afghanistan with the Pashtuns, how do we think that the Northern Alliance groups who are also growing and protecting some of the people are going to be if we go into the Tajeks and the Uzbeks and those tribal groups in the north? They are going to say we did not do it to the Pashtuns, and we are back to the tribal breakups in the country because we are discriminating between the two different groups.

We have got to get this policy together. Nobody is against alternative development. Nobody is against better roads, building better hospitals, building better schools, rebuilding their legal system, protecting people. But we cannot not eradicate if they have grown something that is going to kill people. This would be akin to not getting a stash of machine guns because somebody built the machine guns or are about to get the profit and they need the income. These poor gun traffickers just need this money and they are trying to feed their kids and take care of their family and cover their health costs. We should not take all the gun traffickers' money away by

getting their guns. What kind of nonsensical argument is this? We need boldness now, not wobbliness, out of both the United States and Britain.

And as far as the American Government goes, we will soon be having a hearing with our Department of Defense because we finally got, at least it appears, at least a regional memo in Afghanistan where they finally are saying if they find drugs and drug paraphernalia on people they capture, they should seize it. But they still have an order that says that they cannot use our military to eradicate. And in response to my question to Assistant Secretary of State Charles today where I said if they see stockpiled laboratories which the British have been criticizing us for not going after, does the Department of Defense tell the Department of State or DEA or anybody that they are there so somebody else can go get them? Because if the Department of Defense has decided they are too busy trying to get bin Laden, which we all agree that we have to get the terrorists, but we also need to get the funding for terrorists, we also need to establish democracy, if they cannot do it with the military, will they please share the information because I and other Members who have been over there know they can see it? There is no point in denying to us that they do not know where it is or that they cannot see it. The problem is who is going to get it? We are putting more DEA people in. We are getting more drug eradication groups in, and we need to go after it. Because if we fail to eradicate, if we cannot get it at the laboratory area, if we cannot get it in the distribution centers, it is going to wind up harder and harder to get.

Look at these arrows coming out of Afghanistan, a similar problem with Colombia. If we do not get it at its source, then it gets harder to find the labs. Then when it starts to move up through the Stans, through Russia, through Turkey, into Europe, down around and up the Suez Canal, they cannot get it. Then it is all over our streets. Then in America, 20,000 deaths because of drug abuse. Terrorism in its worst case killed 3,000 in a year. We have to make sure that that does not escalate.

Thankfully, this President has been aggressive; and we have done a better job on our borders, and we have shut down many of the terrorists' operations in the world, and we are battling them in Afghanistan and battling them in Iraq. Finally, Libya is cooperating with us, and when we met with Colonel Kadafi the first time we went in there, and I was with the gentleman from Pennsylvania (Mr. WELDON) in that tour, he did not want to be in a spider hole like his friend Saddam. So he figured the Pakistani people was providing nuclear weapons and he is cooperating with us. Now all of a sudden Pakistan is cooperating with us. We have had some major breakthroughs, thanks to this President's efforts.

But at the same time we have to realize the nexus, the connections between narcotics and the stability of a country like Afghanistan long term. President Karsai and his leadership have been tremendous. It is a very difficult problem that he has got to try to establish order when they have this country divided up into different sections with different drug lords and warlords ruling that. But we have got to get it because he understands, in multiple meetings here on Capitol Hill and in Afghanistan, they cannot have a democracy in Afghanistan unless he can eliminate or at least greatly reduce the amount of opium poppy.

Two other hearings we did this week in Washington: on Tuesday we had a hearing on measuring the effectiveness of drug treatment. Part of any strategy, like I said, first we have got to try to get it at its source because if we can get it at its source, even though it is expensive, it is so much cheaper than if we have to go after the labs and interdict it, whether it is Colombia, Afghanistan, Burma, wherever the problem is, if we can get it at its source. Then we try to get it as it is moving through interdiction if it is coming up from Colombia in the Caribbean or in the East Pacific. Then we try to get it at the border. If we fail at the border, we try to get it coming into the communities.

I hear often on this House floor we should not lock up the poor individual user. But then many of those same people do not want to lock up the user, do not want to go after the eradication. They did not want to go after the interdiction. They do not want to do the other things. We have got to do whatever we can to try to get to the kingpins and that network of drugs coming in.

We also need to work aggressively in the schools and around the country and with the community antidrug prevention groups. But when we fail, and that is what this is, a failure, and people get addicted, we have to figure out how best to provide treatment and how to do this.

There were a number of interesting things that we heard. There are 7 million people in the U.S. who need treatment for drug addiction, and the President's new drug treatment plan has some initiatives to try to address that because many people who are not getting treated for drugs who have a drug problem are not interested in getting treatment. But when somebody says they want treatment and are committed to change, we need to work to make sure those people can be covered.

Charles Curie, a Hoosier and a long-time friend of mine, administrator of the Substance Abuse and Mental Health Services Administration for the U.S. Department of Health and Human Services, HHS, testified on the access to recovery, how they are trying to put accountability in the system, looking at co-occurring dependencies. Many people who have other problems, whether they be mental or physical,

are most vulnerable to drug abuse; and those co-occurring dependencies are very difficult. He is a leader in that, like he was in Pennsylvania, in trying to look at that problem, in trying to hold an accountability of what actually works. There is not a person who has worked in this field who has not talked to people who have been through five, seven drug treatment programs. Maybe they have made a marginal commitment, and I understand drug treatment enough to know that they are not going to get them necessarily completely cured, but they can certainly make progress. And in many cases, they are not even willing to have drug testing to even make progress. Part of what Director Walters is trying to do through the new treatment program is to make sure they at least have the accountability of drug testing if they want Federal dollars. Mr. Curie has been working with this.

Another thing we heard about was coordinated action. One of the witnesses was former Judge Karen Freeman Wilson, also the former Attorney General of Indiana, who is now executive director of the National Drug Court Institute; and she pointed out why drug courts work. When we say drug courts work, we do not mean they work 100 percent. We mean they work better than anything else and that they get some people completely off drugs, they get some people mostly off, some people who very infrequently relapse, and they fail on some. That is the real world. That is why we try to prevent it before it happens. As Nancy Reagan so wonderfully said, we cannot win a war by just treating the wounded. We have to treat the wounded. Nobody is proposing in a war that we do not treat the wounded. But we do not win the war just treating the wounded.

"Each drug court is required to monitor abstinence through regular, random, and observed drug testing. This means that most participants are tested at least two to three times a week." This is Judge Karen Freeman Wilson. "Those who consistently test negatively are believed to be receiving effective treatment."

In other words, we have to have accountability in it.

"Another measure of effectiveness of treatment in the drug court context is the ability of the offender to comply with other aspects of the drug court program. Is the person actively engaged in community service? Are they actively involved in a job search, vocational training or school? Are they attending self-help meetings? Are they appearing as ordered for court review hearings and meetings with probation officers and other court staff? Are they paying their fines and fees? Is the participant attending, complying, and progressing in ancillary services, referred to community service providers, to address issues other than substance abuse such as taking their prescribed medications and otherwise addressing identified co-occurring mental health issues?"

□ 2015

Are they attending parenting classes, anger management, life skill classes and other adjuncts to substance abuse treatment? Because each drug court participant is required to engage in treatment immediately, their compliance with the other aspects of the program that follow entry into treatment also provides insight into whether the treatment is effective.

In other words, they are saying it needs to be holistic. In times when we do not have enough money for anything, this is a huge challenge.

But let us be frank: if we are going to try to tackle these kinds of issues, you have to have some sort of housing options, job options. Tough, tough political questions.

In Indiana, we are having a debate because in the bureau of motor vehicles, 10 percent of the people in Indianapolis had a former conviction. That sounds really terrible. But are they clean? Are they drug tested? Are they cured? Are they having relapses? What was the conviction they had? It is not necessarily evidence in and of itself bad.

Now, if they continue to do it while they are employed, that is another problem. But you cannot say you can never hold a job if you have committed a drug crime or we are never going to get people rehabilitated. What is the point of treatment if they cannot find housing? Congressman DAVIS has a bill that I am a cosponsor of to try to provide targeted housing to people coming out of prisons.

The reentry program in Fort Wayne that we have worked with and tried through the faith-based community and others will say, hey, one church, one offender, a really strong program. There are others in my hometown of Fort Wayne where they try to match up people coming out of the prison system, many of them with drug offenses, into the community, because if you do not get them integrated into the community, you are just going to keep perpetuating the cycle of crime and violence.

We heard from many different witnesses at this hearing, and I appreciate each one of them, because it was very important to problem drug treatment.

I want to cover briefly two more things. One, the hearing that we did this afternoon was on marijuana and medicine, the need for a science-based approach. I want to read a brief comment on this.

This particular hearing addressed a controversial topic, the use of marijuana for so-called medical purposes. In recent years, a large and well-funded pro-drug movement has succeeded in convincing many Americans that marijuana is true medicine to be used in treating a wide variety of illnesses.

Unable to change the Federal laws, these pro-drug activists turned to the State referendum process and succeeded in passing a number of medical marijuana initiatives. This has set up a

direct conflict between Federal and State law and put into sharp focus the competing scientific claims about the value of marijuana and its components as medicine.

Marijuana was once used as a folk remedy in many primitive cultures and even in the 19th century was frequently used by some American doctors, much as alcohol, cocaine and heroine were once used by doctors. By the 20th century, however, its use by legitimate medical practitioners had dwindled, while its illegitimate use as a recreational drug had risen. The drug was finally banned as a medicine in the 1930s.

Beginning in the 1970s, however, individuals began reporting anecdotal evidence that marijuana might have some medically beneficial purposes, most noticeably in suppressing the nausea associated with cancer chemotherapy.

Today, the evidence is still essentially anecdotal, but many people take it as a fact that marijuana is a proven medicine. One of the main purposes of the hearing we had this afternoon was to examine that claim.

At present, the evidence in favor of marijuana's utility as a medicine remains anecdotal and unproven. An Institute of Medicine study published in 1999 reviewed the available evidence and concluded that, at best, marijuana might be used as a last resort for those suffering from extreme conditions.

This report is repeatedly cited by the pro-marijuana movement, it was again today, as proof that marijuana is safe for medical use. In fact, the report stressed that smoking marijuana is not a safe medical delivery device, exposes patients to a significant number of harmful substances; but only in extreme conditions back in 1999, before we had additional advances, was it to be used.

In contrast to its supposed medical benefits, the negative health effects of marijuana are well-known and have been proven in scientific studies. Among other things the drug is addictive, impairs brain function, and when smoked greatly, increases the risk of lung cancer. The respiratory problems associated with smoking any substance make the use of marijuana cigarettes as medicine highly problematic. Indeed, no other modern medicine is smoked.

It is quite possible, however, that some components of marijuana may have legitimate medical uses. Indeed, the Institute of Medicine report, so often erroneously cited as supporting smoking marijuana, actually stated if there is any future of marijuana as medicine, it lies in its isolated components, the cannabinoids and their synthetic derivatives.

Interestingly, the Federal Government has already approved a marijuana derivative called Marinol, but rarely do the pro-marijuana advocates mention this. The Federal Government has also approved further studies of the potential use of marijuana or marijuana derivatives as medicine.

Moreover, in the United Kingdom, a pharmaceutical company has applied for a license to market an inhalant form of marijuana called Sativex. Thus, the real debate is not over whether marijuana could be used as medicine. The debate is over the most scientifically safe and effective way that components of marijuana may be used as medicine.

The responsibility for ensuring that any drug, whether derived from marijuana or not, is safe and effective, has been entrusted to the U.S. Food and Drug Administration, FDA. Under Federal law, the FDA must review, test, and approve each medicine and determine what conditions or diseases each drug may be used to treat and at what dosage level. The FDA continues to monitor each drug, making sure it is manufactured and marketed properly and that unforeseen side effects do not jeopardize the public health.

State laws purporting to legalize marijuana for medical purposes bypass these important safeguards. California and Oregon have adopted the most wide-reaching such laws. They allow anyone to possess, use and even grow their own marijuana, provided he obtains the written recommendation of a doctor. Few, if any, restrictions are placed on what conditions marijuana may be used to treat.

We had both California and Oregon there today, had some discussion about enforcement, and they have four cases in one State, minimal in the other. In effect, they only enforce if somebody from there complains, and the people who are using it are not complaining.

Few, if any, restrictions are placed on what restrictions marijuana may be used to treated. Virtually no restrictions are placed on the content, potency or purity of such medical marijuana.

The laws in California, Oregon and other States are extremely open-ended. California law even allows marijuana to be used for migraine headaches. One of our witnesses this afternoon also used it to treat ADD in two other indications and did not have any science whatsoever. One who just had his license taken away treated 4,000 people, and, according to the board in Oregon, had not even met with the people. So he did get a complaint.

Only a small percentage of medical marijuana users in California and Oregon have actually used the drug to treat the conditions for which it was publicly promoted, namely, the nausea associated with chemotherapy and AIDS wasting syndrome.

In Oregon, statistics kept by the State Medical Marijuana Program indicate that well over half the registered patients used the drug simply for "pain" while less than half used it for nausea, glaucoma or conditions related to cancer and multiple sclerosis. In San Mateo, California, a study of AIDS patients showed that only 28 percent of the patients who used marijuana did so even to relieve pain. Over half used it

to relieve anxiety or depression, and a third for recreational purposes.

This raises one of the key questions we must address. If we are going to treat marijuana as medicine, will we subject it to the same health and safety regulations that apply to other medicines? We do not allow patients to grow their own opium poppies to make painkillers like morphine, Oxycontin and even heroin with just a doctor's recommendation. We do not allow people to manufacture their own psychiatric drugs like Prozac or Xanax to treat headaches. Why should we then authorize people to grow their own marijuana, when the potential for abuse is high and there is little or no scientific evidence that it can actually treat all of these illnesses and conditions?

Why would we abandon the regulatory process that ensures that drugs are manufactured at the right potency level and contaminant-free? Why should we stop the oversight that makes sure that drugs are being administered in the right dosage and in the safest manner?

In our follow up, FDA said on the record today there is no, none, zero, medical marijuana; and Dr. Volkow from the National Institute for Drug Abuse said clearly there are 400 components in marijuana.

Now, those of us who oppose marijuana need to do some acknowledging here too. People have real problems, particularly in treating, that there are some areas in Marinol that have not worked, although it has been improved as well. We have to look in controlled, disciplined environments to figure out how to address that. And those who advocate marijuana need to grant smoked marijuana is very dangerous, much more carcinogenic than cigarette smoke. It is a huge addiction problem in the United States.

As we look at how best to make it medical, it is not the marijuana that is medical, anymore than cocaine or heroin is medical. It is made up of 400 different components, and to try to treat and work with what we are working with here, we are already working aggressively in our government to try to figure out the sub-components and how they mix and how to do it.

We heard all kinds of different things of where they are working and making progress in trying to treat this. And, interestingly, most of the breakthroughs are likely to be synthetic or a blend of things from other drugs with what the different components are in marijuana.

It is not the marijuana. It is not the smoke certainly that helps. It is not the marijuana; it is components inside that, often blended with other things, that can help us address the problem of nausea and the problem of relieving pain for AIDS patients.

Furthermore, the dosages need to be controlled with it, or you develop another addiction. If you take out components in the marijuana, give it in tablet form, you can achieve the pain reduction. But if you are looking to get high and want to get addicted, it will not work.

So Canada, as they moved to this, in Vancouver, which I opposed but it worked with the legislators there and I talked to them about this thing, what they are learning is people do not want to take the pill. They want to get a higher dose than the pill. They wanted this "BC Bud" high-quantity level.

We have to figure out how we are going to work this through, because clearly many States are adopting this. There has been a false concept across America. Those of us who oppose drug abuse are branded then as being uncaring for the sick, which is wrong.

In fighting the whole thing we are not clarifying what we are arguing over here. We need to work together to relieve pain, but we also need to have an FDA standard, and it should not be a backdoor way to legalize a dangerous drug.

In our transportation bill we are moving through, we are making our first steps to make people aware that more people are killed apparently from drug addicted driving than from alcohol. That is a huge challenge in this country, that it is not just "I am relaxed and am using it."

Medicinal Marijuana has already challenged our transportation and drug testing laws in the State of Oregon, because it was supposedly medical. No, if you are taking a tablet form, you are not going to be at risk because you do not get that same dosage. It is a different mix. It is not marijuana. We have to figure out how to work these things through.

One last comment. Yesterday, DEA broke the largest ecstasy ring in history. U.S. and Canadian drug agents broke up a distribution ring responsible for 15 percent of all the ecstasy, that is what they estimate, smuggled into this country. It was called Operation Candy Box.

Approximately at their peak, they were doing 1 million tablets a month, approximately 5 million laundered dollars a month. It was in 18 cities in the United States and Canada.

I am grateful for the DEA's efforts and continued efforts to point out ecstasy is a dangerous drug. There is a program on tonight that I am very concerned about based on some of the statements attributed to Peter Jennings and in the news media. I do not know if it is correct. I have not seen the show. It does not air until tonight.

But the news reports are saying and suggesting that they feel the Federal Government has been inaccurate in their report of ecstasy, when we have had testimony showing the brain damage, certainly in animals, but showed us charts too of the potential and some on humans. We have heard from par-

ents whose kids have died at ecstasy parties and have gotten addicted. We heard of people who are ecstasy addicts, and I sure hope that we continue to combat it aggressively.

I thank the DEA for their efforts to shut down this dangerous drug, and I hope that our national news media does not side with the drug dealers and the drug users of this country and continues to send a positive message.

EMPLOYMENT PROBLEMS IN AMERICA

The SPEAKER pro tempore (Mr. OSE). Under the Speaker's announced policy of January 7, 2003, the gentleman from Massachusetts (Mr. FRANK) is recognized for 60 minutes.

Mr. FRANK of Massachusetts. Mr. Speaker, a few weeks ago I took this floor to talk about the very serious problem we have in our country today regarding jobs.

Last year, as the economy began finally to recover from the recession in a somewhat robust fashion, we expected to see a significant increase in jobs. As I noted previously, Secretary of the Treasury Snow in October said he thought we would get 200,000 jobs a month, because we had seen such vigorous growth. He said everything he knew about the way the American economy worked, meant with that level of growth, we were going to get 200,000 jobs a month.

A couple of months later, when he was drafting the President's economic report, the Chairman of the Council of Economic Advisers, Mr. Mankiw, said something similarly. In fact, he went him a little better. He said about 215,000 jobs a month. By February of this year they both had retracted those predictions.

Unfortunately, we clearly now are in a situation in which the old rules, by which we mean over the last 20 or 30 years, by which we could calculate the given number of jobs we would get for a given level of increase in our gross domestic product, do not seem to be working.

For a variety of reasons, we are not producing at a given level of economic activity the jobs we used to have. That is a serious problem. It is, first of all, of course, a terrible social problem. The people who do not get jobs are often the most vulnerable in our society, and joblessness is a terrible plight for anyone who suffers from it. The joblessness has been prolonged.

In addition to joblessness, of course, by the working of supply and demand, when you have a larger number of people unemployed, wages do not rise at the normal level, so that we had last year a drop in real wages. Inflation outstripped real wages for people who work for pay from others.

□ 2030

We have seen the erosion in health benefits. There was some debate late last year and early this year about

that. As I said, the President's economic report came out in January, and it was still under the old rules. Well, facts are stubborn things, as a number of people have said. I forget who said it first, but a lot of us have liked it and repeated it, and it is now undeniable that we have a serious lag in job creation.

We are debating the reasons. I think they are multiple. One is productivity; and that is, of course, the great paradox. The good news of increased productivity becomes the bad news because it is one of the major explanations for the lag in job creation. There is the globalization factor, outsourcing. There is the debate about how many jobs this is costing, but it is costing jobs, undeniably.

There are other factors that are involved. I think the health care system of the United States is a problem. We have one of the few societies, the only one I can think of right offhand, where your health care is so tied to your job, so that when an American company has to hire, they have to think about health care. We have a situation where the American automobile manufacturers are burdened in their competition with others because they have to factor into the cost of every Ford and every Chevrolet and every car that is built here, the health care that is not a marginal cost for their competitors.

But leave aside for a while the reasons. We have to deal with the fact. And the fact is, as I said, it is now clear that we are in a period where we are producing fewer jobs per element of gross domestic product than previously. Then the question is, well, how long is this going to be with us?

Last year, the optimists were the people who said, well, we are going to just get a lot of jobs, a couple of million jobs a year, more than that, 2½. The Bush administration said from 2.4 to 2.6 million jobs a year. No one thinks that anymore. I hope tomorrow we are going to see a very robust job figure. There are some reasons to hope that it will finally begin to show something, probably because a major strike was settled in California, other seasonable factors, weather changes, but no one thinks we are going to get to those predictions of 2.4 to 2.6 million jobs.

So there has been a kind of downscaling of expectations by the administration and others. We still have pessimists and optimists, but, sadly, the pessimists and the optimists agree that we are in a period of slow job growth, and they differ as to how permanent this is.

Now, there are really three levels here.

There are always, of course, job losses of a cyclical nature in a recession. The optimists last year said basically, look, these are cyclical job losses and as we come out of this recession, we are going to restore them. That has not happened. Clearly, there is a structural element here. So we now have this understanding that increased productivity, foreign outsourcing, and