

posed by these witnesses, questions that have unfortunately, been asked before, but that have not been answered, not by the administration, and not by MSHA. As Amber said:

I understand that nothing that I say today or nothing that happens in the future is going to bring my Dad back. But my Uncle Johnny, my Uncle Mike, my cousin Rocky, as well as every other miner that is underground and every other son who's getting ready to go into the coal mines—because that's where the jobs are in West Virginia and maybe some of these other states—we can prevent their families from going through this.

We owe it to Amber and every other American who has lost a loved one in a mining accident to learn what more we can do to make mines safer. And then, just as Amber says, we must take action to prevent more families from going through the hell that she has had to go through.

CELEBRATING THE INDEPENDENCE OF TEXAS

The SPEAKER pro tempore (Mr. DAVIS of Kentucky). Under a previous order of the House, the gentleman from Texas (Mr. McCaul) is recognized for 5 minutes.

Mr. McCaul of Texas. Mr. Speaker, on March 2, 1839, the Republic of Texas declared its independence on the banks of the Brazos River, which eventually gave rise to the great Lone Star State. Tomorrow, in honor of this historic event in Texas and American history, we will celebrate Texas Independence Day.

I am proud to say that part of this great story of freedom, independence and democracy took place in the 10th Congressional District of Texas, the district I am proud to say I represent.

Texas Independence Day marks a time when today's Texans honor and celebrate the work and sacrifice of Texans many generations ago, people who heroically claimed their freedom from Mexico and sought out their own destiny governed by the laws of a true democracy, a constitution written by the people and the colors of their country's flag waving over what would become the free and independent Republic of Texas.

Between 1820 and 1836, the Mexican Government offered Americans the opportunity to live and work in Texas under Mexican rule, but they grew disheartened by the tyranny and depression. In the Steven F. Austin Colony, which was the first colony, Texans first established a provisional government in 1835 with the intention of writing a declaration of independence soon after. However, the Mexican army was intent on destroying any move toward Texas independence, and the Consultation of 1835, as it was known, adjourned without the organization needed to continue the cause for freedom.

Less than a year later, many of the same delegates present at the Consultation of 1835 arrived along the banks of the Brazos River in the town of Washington, just north of the Austin Colony, which is now Austin County.

By the spring of 1836, the encroachments on Texans' basic freedoms had reached a flash point. On March 1, 1836, 59 delegates hailing from all corners of Texas arrived at the village of Washington along the Brazos River to decide the principles they would invoke in claiming their freedom from Mexico.

There, these brave men drafted the language that would declare their independence from Mexico, and they did so knowing full well that they may have to pay the ultimate price for freedom. As the delegates along the Brazos River wrote the Texas declaration of independence, patriots like Davy Crockett, Jim Bowie and William Travis fought and died for Texas freedom at the Alamo.

After successfully gaining independence from Mexico, Republic of Texas President Sam Houston in 1842 moved the Republic's capital to the birthplace of Texas, Washington on the Brazos River. Three years later, by an act of the United States Congress, Texas was made part of the American Union and became the 28th State of the United States of America.

There can be no argument about the Lone Star State's significant contributions to American history, and we must remember the actions and the sacrifices of those who made Texas independence a reality.

Washington on the Brazos represents an historic event that took place long ago, but tonight we remember Washington on the Brazos as the place where the proud Republic of Texas was born with the desire for freedom and an undying spirit of democracy.

Today, we see that same spirit and determination for freedom and democracy in our fighting men and women overseas and in the people and countries they have liberated. As with the first Texans, those people in distant lands know what it means to be liberated from tyranny and drink from the cup of freedom. They, too, will succeed and flourish in a free and democratic society.

PROVIDING MENTAL HEALTH FOR VETERANS

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

Ms. WOOLSEY. Mr. Speaker, I have spoken many times from this podium, over 130 times actually, about the moral imperative of bringing our troops home from Iraq. With sectarian strife reaching a bloody, violent high in Iraq last week, it is clear that our military presence is doing more harm than good. But for many of our Iraq veterans, even an immediate end to the occupation would be too late to spare them a possible lifetime of physical and psychological damage.

Much is made, and with good reason, of the physical wounds suffered in combat, but even those who return home physically unharmed often face terri-

fying demons. Even the toughest, bravest and best trained soldiers are not immune to devastating trauma, the result of daily exposure to danger and unspeakable carnage. These demons must be addressed, and they must be addressed medically in order for many soldiers to return to normal, productive lives.

But the Washington Post reports today that not enough veterans are getting the mental health care they need. One-third of returning Iraq and Afghanistan veterans are seeking mental health services, and the great majority of those who are diagnosed with psychiatric problems are going untreated.

It is a budget problem and it is a diagnostic problem. Given the nature of the war in Iraq, we must adjust the official standards for what constitutes trauma and, thus, what qualifies veterans for subsidized treatment.

Because the combat danger in Iraq is anywhere and everywhere, many, many of our troops are exposed to conditions that lead to mental distress. As one psychiatrist at Walter Reed explained, "There is no front line in Iraq, and everyone in a convoy is a target." Steve Robinson, head of the National Gulf War Research Center, told the Post that there are few sanctuaries in Iraq. "Every place," he said, "is a war zone."

Meanwhile, it seems the Department of Veterans Affairs is poorly equipped to deal with this situation. Today's Washington Post article cites budget constraints and worries that the Department won't be able to handle the huge influx of returning soldiers in need of mental health treatment.

But who caused those budget constraints? Certainly it wasn't our troops in Iraq who foolishly promised that we could fight a quarter-of-a-trillion-dollar war and dole out billions of dollars of tax cuts to the wealthiest Americans. It wasn't our troops who twisted arms to pass this Medicare Part D boondoggle, which is subsidizing the drug companies and the insurance interests while leaving seniors to wrestle with a bewildering bureaucracy.

Is there any reason why we couldn't have anticipated an enormous demand for Iraq-related mental health services? Of course there wasn't. Couldn't we have included enough money into the war supplemental bills this body has passed? Couldn't we have sacrificed other budgetary handouts and goodies, the ones that benefit people who haven't offered a fraction of the sacrifice for their country that our Iraq veterans have?

I guess if you assumed that our troops would be greeted in Iraq as liberators and if you assumed that we would be in and out of Iraq in a flash, you never got the got to the point where you worried about the mental health of returning veterans.

Once again we see the disastrous, tragic consequences of failed planning and poor execution of this war.

We must do everything we can to help our Iraq veterans cope with their traumas. It is the least our government can do after sending them to war on false pretenses, with insufficient equipment and without an exit strategy.

But as an even more urgent matter, we can ensure that no more soldiers suffer from terrifying nightmares and setbacks and flashbacks by ending this occupation and bringing them home at once.

I have actually presented my four-point plan for a radical shift in our Iraq policy to the President of the United States. This policy includes four major areas:

One, greater multilateral cooperation with our allies in enlisting their help in establishing an interim security force in Iraq;

Two, a diplomatic offensive that recasts our role in Iraq as construction partner, rather than military occupier; this means no permanent bases in Iraq, no American claims on Iraqi oil;

Three, a robust post-conflict reconciliation process with a peace commission established to coordinate talks between the Iraqi factions; and

Four, and most importantly, withdrawal of the U.S. Armed Forces.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

ENCOURAGING NEWS ON MEDICARE PART D

Mr. GINGREY. Mr. Speaker, I ask unanimous consent to speak out of turn.

The SPEAKER pro tempore. Without objection, the gentleman from Georgia is recognized for 5 minutes.

There was no objection.

Mr. GINGREY. Mr. Speaker, I rise today to share the encouraging news that more than 25 million seniors are now enjoying prescription drug coverage under Medicare Part D. This includes over 1.5 million Americans who have enrolled in the last month alone.

Twenty-five million enrollees. That is 25 million seniors who are saving money every time they visit the pharmacy, 25 million seniors who have better access to drugs they need to prevent and manage their illnesses, 25 million seniors who can now afford protection from many catastrophic medical costs.

Like many of my colleagues, Mr. Speaker, I am working incredibly hard to educate seniors about Medicare Part D. With any new program, parts of the enrollment process certainly can be confusing. After all, this is the largest enrollment effort since the introduction of Medicare 40 years ago. But by investing a little time, seniors can nar-

row down their choices and find the plan that best fits their prescription drug needs. And let me assure you, the benefits of this program are undoubtedly worth that effort.

I have been thanked by so many seniors who are now reaping the benefits of prescription drug coverage under Medicare, seniors who have seen their prescription drug costs drop by 50 percent or more, seniors who now have more money in their pockets at the end of the month.

In fact, I would like to share with my colleagues two of the many success stories I have heard from my constituents regarding their positive experiences. I hope these stories will encourage other seniors to explore the savings Medicare Part D holds for them.

Take the experience of Carol Burke. She lives in Newnan, Georgia, in my district, my wife's hometown. She recently wrote me, saying, "I am disturbed by media commentators repeatedly referring to the Medicare drug plan as too difficult to understand and a total disaster. I never hear them say what I truly believe, that it is a wonderful benefit to those of us who have no retirement drug plan provided. A few hours spent with pencil and paper show that the choice to pay a slightly larger premium and have no deductible is clear. The suggestions given in the Medicare 2006 Guidebook are complete and easy to follow, and math is not my strong suit. Thank you for your efforts in providing this much-needed service to seniors."

Now, my colleagues, that is a real letter, and I completely agree with Mrs. Burke's assessment. It may take a little time to choose the right plan. Seniors might need to rely on family, friends and community organizations to help with the process. But a little time spent enrolling today will pay huge dividends in the upcoming months and years, because affordable prescription drugs help seniors live healthier lives.

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Let me share another story with you. I received a phone call from fellow Georgian Mr. Richard Mosrie who recently enrolled in the Medicare part D plan.

Mr. Mosrie explained that he is now saving over \$150 a month on his medications, \$150 a month. Seniors across America understand what a difference a couple hundred dollars a month can make. These are the stories that seniors need to hear. These are the stories that are happening in every congressional district in America regardless of whether the Congressman or -woman is a Republican or a Democrat.

I find it disappointing that there are people who attempt to use Medicare part D as a political ploy. How cruel to put partisanship over the health of our seniors by encouraging people not to enroll in this great program. That is, in essence, encouraging seniors not to save money and not to improve their

health. So, Mr. Speaker, in the following months we will be hearing more and more positive stories from seniors who have enrolled in Medicare part D who are reaping financial and health rewards.

The initial sign-up period runs through May 15, 2006, so there is still time for seniors to enroll without a premium penalty.

As a physician, I know that access to the right medication is a bedrock of good health. Our seniors deserve affordable prescription drug coverage and Congress has passed good legislation to deliver this benefit.

Now is the time for seniors to enroll, and I sincerely hope all of my colleagues from both sides of the aisle will stand with me in commitment to helping our seniors access the medication they need to stay well.

The SPEAKER pro tempore (Mr. FITZPATRICK of Pennsylvania). Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

(Mr. PALLONE addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

THE CENTER CANNOT HOLD

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Washington (Mr. McDERMOTT) is recognized for 5 minutes.

Mr. McDERMOTT. Mr. Speaker, it is doubtful that we can even accurately count the number of Iraqis who have died today in their country. The President vows he will stay the course. We have heard this before over and over again, as if saying it repeatedly would alter the reality.

For months the American people have spoken with an ever louder voice urging the President to redeploy U.S. soldiers to get them out of harm's way. For months, many Members of Congress, especially Mr. MURTHA of Pennsylvania, have urged the President to redeploy the U.S. soldiers to get them out of harm's way.

Now even U.S. soldiers overwhelming say that the U.S. should be out of Iraq this year. In military terms, that is enough time to quickly plan and safely reallocate U.S. soldiers. In other words, the men and women of the United States Armed Forces, those in the battlefield, are saying what this administration refuses to act on.

The ground the President is standing on has shrunk to the size of a postage stamp. His approval ratings have fallen so low they are below sea level. Today, not only is Iraq in the throes of relentless civil violence, even members of the administration are telling Congress that there is danger the violence in Iraq could spill outside the borders and inflame the entire Middle East.

Yet despite the warnings, despite the reality, despite the Iraqi leaders urging