

mental health treatment and services provided to offenders with mental illness.

Over the course of the past three decades, as our country's mental health infrastructure has deteriorated, many mentally ill individuals have been forced to fend for themselves on the street. Oftentimes, these individuals end up in jail or prison for offenses related to their illness.

Unfortunately, our jails and prisons have become the sanatoriums of the 21st century. As mental institutions have closed down, jails and prisons have filled up. In fact, prisons currently hold three times more mentally ill people than do psychiatric hospitals, and prisoners have rates of mental illness that can be as high as four times the rate of the general population.

Not surprisingly, the prison system is ill-equipped to deal with the growing number of prisoners requiring psychiatric care. Jails and prisons do not have adequate resources to properly evaluate incarcerated individuals for mental health and substance abuse problems. Police and other law enforcement officials are generally not trained to handle mentally ill offenders. Mental health services may be provided, but they are often underfunded and inadequate.

H.R. 3992, the "Mentally Ill Offender Treatment and Crime Reduction Reauthorization and Improvement Act of 2007," addresses this problem by establishing grants for programs training law enforcement officials to better identify prisoners with mental illness and respond to their needs. In addition, H.R. 3992 would authorize funding for developing receiving centers to assess individuals in law enforcement custody for mental health and substance abuse treatment. Such funding would also be used to improve technology to facilitate information sharing among law enforcement and criminal justice personnel, as well as to promote evidence-based mental health care practices in correctional facilities.

Madam Speaker, it is our moral responsibility to provide timely, appropriate and adequate health care to those in the custody of our correctional system. The treatment of mental illness should be no exception.

Mr. SMITH of Texas. Madam Speaker, I yield back the balance of my time.

Mr. SCOTT of Virginia. Madam Speaker, I urge my colleagues to support the legislation, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Virginia (Mr. SCOTT) that the House suspend the rules and pass the bill, H.R. 3992, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

DEATH IN CUSTODY REPORTING ACT OF 2008

Mr. SCOTT of Virginia. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 3971) to encourage States to report to the Attorney General certain information regarding the deaths of individuals in the custody of law enforcement agencies, as amended.

The Clerk read the title of the bill.
The text of the bill is as follows:

H.R. 3971

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 "Death in Custody Reporting Act of 2008".

SEC. 2. INFORMATION REGARDING INDIVIDUALS WHO DIE IN THE CUSTODY OF LAW ENFORCEMENT.

(a) IN GENERAL.—For each fiscal year after the expiration of the period specified in subsection (b)(1) in which a State receives funds for a program referred to in subsection (b)(2), the State shall report to the Attorney General, on a quarterly basis and pursuant to guidelines established by the Attorney General, information regarding the death of any person who is detained, under arrest, or is in the process of being arrested, is en route to be incarcerated, or is incarcerated at a municipal or county jail, State prison, State-run boot camp prison, boot camp prison that is contracted out by the State, any State or local contract facility, or other local or State correctional facility (including any juvenile facility) that, at a minimum, includes—

- (1) the name, gender, race, ethnicity, and age of the deceased;
- (2) the date, time, and location of death;
- (3) the law enforcement agency that detained, arrested, or was in the process of arresting the deceased; and
- (4) a brief description of the circumstances surrounding the death.

(b) COMPLIANCE AND INELIGIBILITY.—

(1) COMPLIANCE DATE.—Each State shall have not more than 30 days from the date of enactment of this Act to comply with subsection (a), except that—

(A) the Attorney General may grant an additional 30 days to a State that is making good faith efforts to comply with such subsection; and

(B) the Attorney General shall waive the requirements of subsection (a) if compliance with such subsection by a State would be unconstitutional under the constitution of such State.

(2) INELIGIBILITY FOR FUNDS.—For any fiscal year after the expiration of the period specified in paragraph (1), a State that fails to comply with subsection (a) shall not receive 10 percent of the funds that would otherwise be allocated for that fiscal year to the State under subpart 1 of part E of title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3750 et seq.), whether characterized as the Edward Byrne Memorial State and Local Law Enforcement Assistance Programs, the Local Government Law Enforcement Block Grants Program, the Edward Byrne Memorial Justice Assistance Grant Program, or otherwise.

(c) REALLOCATION.—Amounts not allocated under a program referred to in subsection (b)(2) to a State for failure to fully comply with subsection (a) shall be reallocated under that program to States that have not failed to comply with such subsection.

(d) DEFINITIONS.—In this section the terms "boot camp prison" and "State" have the meaning given those terms, respectively, in section 901(a) of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3791(a)).

SEC. 3. STUDY OF INFORMATION RELATING TO DEATHS IN CUSTODY.

(a) STUDY REQUIRED.—The Attorney General shall, subject to the availability of appropriations under subsection (d), through grant or contract, provide for a study of the information reported under section 2 (regarding the death of any person who is detained,

under arrest, or is in the process of being arrested, is en route to be incarcerated, or is incarcerated at a municipal or county jail, State prison, State-run boot camp prison, boot camp prison that is contracted out by the State, any State or local contract facility, or other local or State correctional facility (including any juvenile facility)) to—

(1) determine means by which such information can be used to reduce the number of such deaths; and

(2) examine the relationship, if any, between the number of such deaths and the actions of management of such jails, prisons, and other correctional facilities relating to such deaths.

(b) REPORT.—Not later than 2 years after the date of the enactment of this Act, the Attorney General shall prepare and submit to Congress a report that contains the findings of the study required by subsection (a).

(c) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$500,000 for fiscal year 2009. Funds appropriated under this subsection shall remain available until expended.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Virginia (Mr. SCOTT) and the gentleman from Texas (Mr. SMITH) each will control 20 minutes.

The Chair recognizes the gentleman from Virginia.

GENERAL LEAVE

Mr. SCOTT of Virginia. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

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

There was no objection.

Mr. SCOTT of Virginia. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, H.R. 3971 is entitled the Death in Custody Reporting Act of 2008. It will reauthorize the Death in Custody Reporting Act of 2000 which actually expired on December 31, 2006.

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This is a bipartisan effort which I introduced with my colleague from Virginia, Representative RANDY FORBES, and who was, at that time, the ranking member of the Subcommittee on Crime. Its purpose is to provide continued and improved oversight over the conduct of law enforcement officials during arrest and imprisonment of fellow citizens.

Before the enactment of the Death in Custody Act of 2000, States and localities had no uniform requirements for reporting the circumstances surrounding the deaths of persons in their custody, and some had no system for requiring such reports. The lack of uniform reporting requirements made it impossible to ascertain how many people were dying in custody and from what causes, although estimates by those concerned suggested that there were more than 1,000 deaths in custody each year, some under very suspicious circumstances.

Consequently, an environment of suspicion and concern arose surrounding

many of those deaths. Some that were ruled suicides or deaths from natural causes were suspected of being homicides committed by officers, fellow prisoners or others. Indifference to prisoner rights and the safety of those in custody made scrutiny of suspected deaths a low priority, so such questionable causes were rarely investigated.

In the mid-1980s, researchers, reporters, prison and jail accreditation organizations, prison reformers, activists, and others began to give more scrutiny to the death rate in our Nation's jails and prisons and to the fact that such deaths were not being routinely reported to anybody.

In fact, by 1986, only 25 States and the District of Columbia even had jail inspection units. Moreover, even the States that did report deaths did it on the basis of different reporting standards. The insufficient data and the lack of uniformity of the data collected made oversight of prisoner safety woefully inadequate.

However, the interest in oversight that emerged shed light on the conditions in State and local jails, which began a rising tide of wrongful death litigation. The increasing litigation forced some measure of accountability, and conditions somewhat improved. Moreover, activism and news of the litigation spurred by media interests, and that shed further light on the conditions in our present jails and prisons.

The watershed moment for bringing the death in custody rate to national attention occurred in 1995. After a 1-year investigation by journalist Mike Masterson into prison conditions and the death rate of persons in custody, the Asbury Park Press of New Jersey ran a series of award-winning editorials that brought the seriousness of the lack of reporting to the Nation's attention. The editorials went on to detail abuses, including racially motivated violence, overzealous police investigations, cover-ups and general law enforcement incompetence, which prompted Congress to take action.

Following successive introduction of bills in several Congresses by my colleagues from Arkansas, first Representative Tim Hutchinson, then later Representative Asa Hutchinson, the Death in Custody Reporting Act of 2000 was passed. The law required States receiving certain Federal grants to comply with reporting requirements established by the Attorney General.

Since the enactment in 2000, the Bureau of Justice Statistics has compiled a number of statistics detailing the circumstances of prisoner deaths, the rate of deaths in prison and jails, and the rate of deaths based on the size of various facilities and so forth. But the most astounding statistic reported since the enactment of the bill before is the latest Bureau of Justice statistics report dated August 2005, which shows a 64 percent decline in suicides and a 93 percent decline in homicides in custody since 1980. Those statistics showing a significant decline in the

death rate in our Nation's prisons and jails since stricter oversight has been in place suggest that the oversight measures, such as the Death in Custody Reporting Act, play an important role in ensuring the safety and security of prisoners who are in the custody of State facilities.

In considering the reauthorization of the bill, the Subcommittee on Crime, Terrorism and Homeland Security examined the statistics and heard testimony from witnesses whose testimony also supported the suggestion that oversight has actually improved conditions. Convinced of the effectiveness of the Death in Custody Act, we resolved to not only reauthorize it but also improve it.

To ascertain the most effective use of the statistical data, H.R. 3971 differs from the original bill in that it authorizes \$500,000 for a study to determine which policies and procedures have, in fact, led to or at least assisted the decreasing death rate among prisoners.

Madam Speaker, I would like to thank my good friend, Mr. FORBES, for his support of the bill. I encourage my colleagues to support it.

Madam Speaker, I reserve the balance of my time.

Mr. SMITH of Texas. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I support H.R. 3971, the Death in Custody Reporting Act of 2007, and commend Chairman CONYERS, Crime Subcommittee Chairman SCOTT, and Crime Subcommittee Ranking Member GOHMERT for their commitment to this bipartisan legislation.

The Death in Custody Reporting Act of 2000 directed the Justice Department's Bureau of Justice Statistics to collect data on deaths that occur in the process of arrest or during transfer after arrest, as well as deaths that occur in jails and prisons.

H.R. 3971 reauthorizes this data collection program and directs the Attorney General to commission a study to determine how to reduce deaths in custody and to examine the relationship between deaths in custody and the management of jail and prison facilities.

The Bureau of Justice Statistics reports that between 2001 and 2005 there were 15,308 State prisoner deaths. The bureau also reports that there were 5,935 local prisoner deaths and 43 juvenile deaths between 2000 and 2005.

Half of all State prisoner deaths are the result of heart disease and cancer. Two-thirds involved inmates age 45 or older, and another two-thirds are the result of medical problems that were present at the time of admission.

Although illness-related deaths have slightly increased in recent years, the homicide and suicide rates in State prisons have dramatically decreased over the last 25 years. That is positive news, but we still need to collect data to monitor these trends.

I urge my colleagues to support this legislation.

Madam Speaker, I reserve the balance of my time.

Mr. SCOTT of Virginia. Madam Speaker, I yield such time as she may consume to the gentlelady from Texas, a member of the Judiciary Committee, Ms. JACKSON-LEE.

Ms. JACKSON-LEE of Texas. I thank the distinguished gentleman, the chairman of the subcommittee that I have the privilege of serving on, the Subcommittee on Crime and Terrorism on the House Judiciary Committee.

I thank the full committee chairman, Mr. CONYERS, the ranking member on the full committee and the ranking member on the subcommittee for having two important initiatives, and I speak to the underlying bill which addresses the question of death in custody, H.R. 3971.

I, too, want to applaud the fact that the existence of this legislation is a strong statement that, in spite of individuals being incarcerated in the criminal justice system, in the penal system, in the prison system, that there is a responsibility; one for the safety and security of those who are incarcerated, particularly, as well, that younger and younger individuals are going into our criminal justice system of which we hope to address as we look to these issues in the coming year, work that has already been done in this committee. We hope to see some of that legislation come to fruition.

I do want to speak specifically, Madam Speaker, to the concerns that I see in the State of Texas. And it may be symbolic of many States, particularly large States that have a very large penal system and a criminal justice system, if you will, or incarceration rate, and say that this legislation, in addition to reporting or requiring reporting of the deaths and suggesting the ineligibility for funds, which I think is an important statement, some instances of holding the particular jurisdictional head responsible for some of, in this instance, the deaths of individuals held in their particular facilities.

For example, about 3 weeks ago, in Houston, an individual was seen being neck-choked by a custodian in the Harris County jail in Harris County in Houston, Texas, and subsequently that inmate lost their life. This has been an increasing occurrence in the Harris County jail. And certainly there have been occurrences in the whole State system, but we have a county jail system which people are either held for trial or either they are actually serving their time there, and in the last decade we've had 106 deaths, plus, in the Harris County jail. Many of them have come about through the inability to secure medicine, to secure medical care. One instance is an individual in his own pool of blood, and the, if you will, caretaker, the guard, was asked to get relief and he said, What do you expect for me to do, get a Band-Aid?

So in some instances the deaths are caused because of such horrific occurrences, such egregious occurrences that

there seems to be a necessity for additional penalties. So I would rise to support this initiative, H.R. 3971, for the good work that it has already done, look forward to working with the chairperson of the subcommittee and the full committee Chair as we move toward the Senate to ensure that this bill, in and of itself, becomes law, because I think it's an important statement, but also it's a statement that saves lives.

It is so tragic to hear from wives and mothers, fathers of those incarcerated. These individuals have families. And I know that the existence or the presence that they have in the jail system means that there have been charges. Some of them in the local jails are being held for trial, so, therefore, they have not been convicted. We owe, as a civilized Nation, the kind of incarcerated presence that allows people to live, to be tried by the judicial system, but to allow them to live unless rendered another judgment by that system. So I think it is key that we look at whether or not the actions are egregious as we proceed to report on or receive reports made by our State Attorney General and others.

Madam Speaker, I rise today in strong support of H.R. 3971, the Death in Custody Reporting Act of 2007, introduced by my distinguished colleague from Virginia, Representative BOBBY SCOTT. This important legislation will require that any State that receives certain criminal justice assistance grants will be accountable to report the treatment of inmates to both the Attorney General and to Congress.

How a government treats its detainees is a critical test for a nation's civility and maturity. How we treat detainees, especially the most vulnerable among them—detainees with medical conditions, be it pre-existing or one developed after they have been taken into custody—is an important measure of how humane our entire justice system is.

In the mid-1980s researcher and activist scrutiny of the death rate in the Nation's jails and prisons began to emerge. The research focused on criticism of jail and prison conditions from the 1960s to the 1980s. Studies such as the "National Study of Jail Suicides: Seven Years Later," by Lindsay M. Hayes and Joseph R. Rowan in 1988, that examined the death rate in jails and prisons found very little reporting of the circumstances surrounding the deaths of prisoners. In fact by 1986, only 25 States and the District of Columbia even had jail inspection units. Moreover, even the States that did report deaths differed on basic reporting standards. For example, jurisdictions differed on the definition of "custody," which made it difficult to determine whether a prisoner had died during arrest, in a jail before trial, or post conviction.

The insufficient data and the lack of uniformity of the data collected made oversight of prisoner safety woefully inadequate. However, the study brought to light the potential that oversight had for improving conditions. The authors found that in the 1970s when there was little or no focus on deaths in custody, it had been unusual for a jail to be sued for negligence when a prisoner died in custody. But by the 1980s it was unusual for a jail not to be sued. The interest in oversight that

emerged in the 1980s had shed light on conditions in state and local jails and began a rising tide of wrongful death litigation. The increasing litigation forced some measure of accountability and conditions somewhat improved. Moreover, activism and news of the litigation spurred media interest, which shed further light on conditions.

In 1995, after conducting a 1-year investigation, the Asbury Park Press of New Jersey ran a series of award-winning editorials that brought the seriousness of the lack of reporting to the Nation's attention. Among the examples the Asbury Park Press highlighted was the story of Elmer Johnson of Charleston, MO. Mr. Johnson died in a jail cell after he was arrested for "failing to obey a police officer." The coroner ruled Mr. Johnson's death a suicide but evidence to the contrary raised doubts. The editorials went on to detail abuses including racism, overzealous police interrogations, coverups and general police incompetence, which prompted congressional action.

Congress has a responsibility to investigate this issue and call for reforms in order to ensure that dignity and respect for all human beings in our immigration detention system is preserved.

Following successive bills being introduced by Representative SCOTT of Virginia and Representative Hutchinson of Arkansas in several Congresses, the Death in Custody Reporting Act of 2000 was passed. The law required States receiving grants to comply with reporting requirements established by the Attorney General. Since the enactment of the act, the Bureau of Justice Statistics, BJS, has compiled a number of statistics detailing not only the circumstances of prisoner deaths but the rates of deaths in prisons vs. jails and the rates of deaths based on the sizes of the various facilities.

With the detailed statistical data, policy makers, both State and Federal, can make informed policy judgments about the treatment of prisoners, leading to great success in lowering the prisoner death rate. In fact, since the focus on deaths in custody emerged in the mid-1980s, the latest BJS report, dated August 2005, shows a 64 percent decline in suicides and a 93 percent decline in the homicide rate, which suggests that oversight measures such as the Deaths in Custody Reporting Act play an important role in ensuring the safety and security of prisoners who are in the custody of State facilities.

However, no actual study has been conducted to ascertain whether there is indeed a cause and effect between the oversight and decreasing death rate, and H.R. 2908 contained no provision to fund such a study. Therefore, to ascertain whether the cause and effect exists and how to make the most effective use of the statistical data, my good friend and colleague, Chairman SCOTT and Ranking Member FORBES have introduced H.R. 3971, the Death in Custody Act of 2007, of which I am a proud cosponsor.

This revised legislation is imperative to ensuring that there is justice within our justice system. H.R. 3971 includes all aspects of H.R. 2908 but also authorizes \$500,000 for a study to determine whether the strengthened oversight has in fact led to or at least assisted the decreasing death rate among prisoners. H.R. 3971 is thus an improvement over H.R. 2908 in that with analysis accompanying the statistical data, we can make yet further informed decisions about policy and oversight.

Congress has a responsibility to investigate this issue and call for reforms in order to ensure that dignity and respect for all human beings in our immigration detention system is preserved. This legislation will hold States responsible to report to the Attorney General on a quarterly basis regarding the death of any person who is under arrest or is in the process of being arrested, en route to incarceration, or incarcerated in State or local facilities. It furthermore imposes penalties on States that fail to comply with such reporting requirements and consequently will ensure that both the Attorney General and the Congress stay informed on the deaths of any and all persons in custody.

I hope that all of my colleagues will join me in supporting the Death in Custody Act of 2007. Passage of H.R. 3971 would be the start of a long overdue process to eliminate unnecessary mistreatment of prisoners.

Might I just quickly acknowledge H.R. 3992, with the indulgence of the Speaker, to applaud the, hoping, passage of this legislation that deals with mental health. And let me just say one small point about the mental health circumstance, and that is that the crisis of mental health is seen across America. There are so many circumstances where individuals suffering from severe schizophrenia and others are caught in the criminal justice system, or unfortunately are called to the home and confront the law enforcement system as opposed to the mental health system, and that is before, of course, these individuals are incarcerated. This has to do with offenders who are suffering from mental illness, but I wanted to at least speak to the point that those who don't get to the system because they are confronted through the police system and unfortunately will lose their lives. What do elderly persons do when a son or daughter is suffering from mental illness and, unfortunately, has a breakdown in the house and reacts violently? It is to call the police.

And so in addition to this very fine bill that deals with improving mental health services for offenders so that when they come out they are ready to adjust to the society in which they return, we also want to look forward to the idea of providing resources for training of law enforcement that we've discussed extensively in our subcommittee on crime to help these people be advisedly trained to deal with this.

I cite as an example the desire by our local jurisdiction to, or the request being made by our local jurisdiction, to pay an extra incentive fee for those police officers that would take mental health training so that they could be on a team, a task force to be called out when that would occur. Unfortunately, the overall response by the city government was not enough money. I think we should have enough money to save lives and, hopefully, innovative legislation like H.R. 3992 sets the pace for those new and innovative ideas on addressing the question of mental illness among offenders who are incarcerated, but also that we address many of

the other questions that hopefully we'll have the opportunity to address.

So it is my distinct pleasure to be able to rise to support the underlying bill, H.R. 3971, and as well the previous bill, H.R. 3992. And I thank the chairman for his leadership. And I think the criminal justice system will be better for the passage of these two initiatives.

Madam Speaker, I rise today in strong support of H.R. 3992, the Mentally Ill Offender Treatment and Crime Reduction Reauthorization and Improvement Act of 2007, introduced by my distinguished colleague from Virginia, Representative ROBERT SCOTT. This bipartisan legislation is designed to increase public safety by enabling coordination between the criminal justice and mental health care systems to increase treatment among this segment of the population.

The enormous growth in the national prison population has intensified the problems presented by the needs of mentally ill inmates. Frequently, mentally ill defendants are inappropriately placed into criminal or juvenile corrections facilities, and the harmful impact that this has on the individual and society is reflected in increased recidivism rates, wasted administrative costs, and superfluous overcrowding of corrections facilities, among other things. Among the utmost dilemmas involved in managing the mentally ill prisoners is that correctional staffing is seldom at an adequate level to supervise and care for these prisoners, and correctional officers in many state prisons have never received training in working with the mentally ill.

The Bureau of Justice reported that in 1998 over 280,000 individuals in jail or prison and approximately 550,000 of those on probation had a mental impairment. The mentally ill are disproportionately represented in jails and prisons. Five percent of all Americans have a serious mental illness, but 16 to 20 percent of incarcerated individuals have a mental impairment. Any individual who is enrolled in a juris doctorate program is familiar with two key terms in criminal law, *Actus Reus* and *Mens Rea*. *Actus Reus* is associated with the guilty act, while *Mens Rea* is associated with the guilty mind. Both elements are required to achieve a successful conviction in our criminal law system. Mental health offenders may have committed the physical, guilty act, but they are incapable of having the mind capacity to commit the crime. The act does not make a person guilty unless the mind is also guilty.

The prevalence of the mentally ill in the criminal justice system has been the subject of many recent studies. The U.S. Department of Justice, Bureau of Justice Statistics reported last July that at least 16 percent of the U.S. prison population is seriously mentally ill. The highest rate of reported serious mental illness is among white female inmates, at 29 percent. For white females age 24 or younger, this level rises to almost 40 percent. The American Jail Association estimates that 600,000 to 700,000 people suffering from serious mental illness are being booked into jail each year.

The National Alliance for the Mentally Ill reports that on any given day, at least 284,000 schizophrenic and manic depressive individuals and manic depressive individuals are incarcerated, while only 187,000 seriously mentally ill individuals are in mental health facilities. Additionally, there are approximately 547,800 seriously mentally ill people who are

currently on probation. These statistics seem to indicate that the mentally ill are unjustifiably burdening the criminal justice system.

There is a dire need for resources that will provide vital resolutions to the crisis, expand diversion programs, community-based treatment, re-entry services, and improved treatment during incarceration. The reauthorization of the Mentally Ill Offender Treatment and Crime Reduction Act of 2004 recognizes that true partnerships between the mental health and criminal and juvenile corrections systems and between the Federal and State Governments are needed to meet these challenges. Indeed, this bill requires that Federal funds authorized under this program be supplemented with contributions from the States, local governments, and tribal organizations.

Madam Speaker, Congress has an obligation to legislate to protect the community from those who become aggressive or violent because of mental illness. We also have a responsibility to see that the offender receives the proper treatment for his or her illness. Far too often, mental illness goes undiagnosed, and many in our prison system would do better in alternative settings designed to handle their particular needs.

In Texas, past treatment of mentally ill offenders illustrates the need for legislation such as H.R. 3992. Senior U.S. District Judge William Wayne Justice, who is experienced in dealing with mentally ill prisoners in Texas, ruled in 1980 that the Texas prison system is unconstitutional and placed it under Federal control for 30 years. In Judge Justice's estimation, the Texas laws that apply to the mentally ill "lack compassion and emphasize vengeance." KPFT news reported him as having said,

We have allowed the spirit of vengeance such unrivaled sway in our dealings with those who commit crime that we have ceased to consider properly whether we have taken adequate account of the role that mental impairment may play in the determination of moral responsibility. As a result, we punish those who we cannot justly blame. Such result is not, I believe worthy of a civil society.

This legislation in an important first step towards restructuring a system that has operated in a disjointed and unsympathetic manner for far too long. We must continue to make this legislation adequately effective to preserve the lives of defendants who are actually victims.

I am proud to support this legislation and I strongly urge my colleagues to join me in supporting this legislation and calling for the appropriate treatment and recognition of mentally ill offenders.

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Mr. SMITH of Texas. Madam Speaker, I have no other speakers on this side, and I yield back the balance of my time.

Mr. SCOTT of Virginia. Madam Speaker, I have no other speakers, and I urge my colleagues to support the legislation. I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Virginia (Mr. SCOTT) that the House suspend the rules and pass the bill, H.R. 3971, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The title was amended so as to read: "A bill to encourage States to report to the Attorney General certain information regarding the deaths of individuals in the custody of law enforcement agencies, and for other purposes."

A motion to reconsider was laid on the table.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

HONORING THE SERVICE OF MARY LOUISE PLUNKETT

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

Mr. CROWLEY. Madam Speaker, it is indeed an honor for me to rise here today on the floor of the House of Representatives to pay tribute and to say thank you to a very close personal friend of mine, Ms. Mary Lu Plunkett, one of the most influential people in my life for the past 25 years and one of the most valued members of the community of Queens County in New York State and New York City for more than the last 50 years.

I was blessed to meet Mary Lu Plunkett in my early 20s, when I stepped into the Queens County Democratic headquarters while running errands at the time for my then-Uncle Walter Crowley. That day was the start of one of the most important friendships in my personal and political life, Madam Speaker. But long before Mary Lu became a valued part of my life, she was already a valued and well-established force in Queens County and in Queens County Democratic politics.

Mary Lu was born in Brooklyn, and she moved to Jackson Heights, Queens, in 1949 with her husband Jack. Mary Lu was quick to engage in her community and in her local church, and we were just as quick to forgive Mary Lu for her Brooklyn past.

Mary Lu's foray into politics started when she joined the Amerind Democratic Club. She went on to volunteer at Queens County Democratic Headquarters, where she became a full-time member of the staff in 1956. While working at county headquarters, Mary Lu served some of Queens County's finest political leaders, including Moses Weinstein, Jim Roe, and my predecessor Tom Manton, and her influence on them and our community was felt and has been felt by all of us since.

No political event or dinner has been held without Mary Lu and her charm. She helped to welcome such dignitaries and luminaries as John Kennedy, TED