

turn. We in the Congress must do everything we can to prevent this disastrous policy from going into effect.

This is a bad deal for U.S. national security and for the Cuban opposition, and it is a sweetheart deal for the repressive Cuban regime.

INFRASTRUCTURE FUNDING

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Mr. Speaker, there is always a great deal of excitement surrounding a new Congress and a new year. One area that has been very encouraging is the focus on rebuilding and renewing America. That was where we left off in the last Congress, frustrated by an inability to produce a 6-year reauthorization, largely because of an inability for Congress to address meaningfully how it would be funded. This continues a struggle of almost two decades, as we have not increased the gas tax or developed a viable, sustainable, adequate alternative.

It is widely recognized that America is falling apart and falling behind. Our infrastructure, once the envy of the world, now has put us at a second-tier status, with America at risk of falling ever further behind.

The deplorable state of our infrastructure is actually costing Americans far more to endure the damage to their cars and the delays to their lives through congestion than simply funding an alternative and fixing it.

It is encouraging that the administration and people in both parties, in both Chambers, might be prepared to address the issue anew. There are some short-term stopgap solutions which would nowhere near solve the problem but nudge us in the right direction.

In the Senate there is bipartisan interest in and openness to a comprehensive solution including the gas tax. Senators BOB CORKER and his partner CHRIS MURPHY have been champions. Senator TOM CARPER continues his leadership and advocacy for the gas tax solution. Senator JOHN THUNE, a key Republican leader, has signaled his openness to the gas tax, which is the simplest, most logical, and most effective solution.

Even the problematic proposal to use dynamic scoring to evaluate budget proposals could make a difference for the prospect of solving this huge problem for America if it would be applied in the spirit of dynamic scoring.

The Standard & Poor's research report, "U.S. Infrastructure Investment: A Chance to Reap More Than We Sow," pointed out the overwhelming economic impact in terms of jobs created, economic benefits that actually exceeded the direct amount invested, and long-term deficit reduction of \$200 million for every \$1.2 billion invested. This should be one of the easiest economic decisions we ever make.

In an era of low interest rates, gasoline prices falling dramatically, when there are still hundreds of thousands of people ready to go to work at family wage jobs rebuilding this country, the economic case has never been stronger.

By all means, let's evaluate all of the proposals. Let's expand the discussion. Let's look at the leadership of States around the country that are stepping up to do their part. State, local, and private investment all have a role to play, to be sure, but recognize that the 25 percent of infrastructure funding that comes from the Federal Government plays a critical role. Let this Congress give America a solution that is sustainable, not one that would put us back in the same fix in a year or two or even sooner.

Let's have a revenue source that is dedicated so that we can begin on longer-term projects that demand multimodal, multistate, multiyear solutions and that is large enough to give us a long overdue 6-year comprehensive reauthorization. Stable, dedicated, big enough to do the job—this is a test that the new Congress and administration should meet to revitalize our economy and rebuild and renew this great country.

At a time of dramatically falling oil and gas prices, when the public is suffering from Congress dithering on our transportation and other infrastructure needs, there will never be a better time to heed the advice of President Ronald Reagan 33 years ago in his Thanksgiving Day radio address to the country to raise the gas tax and put Americans to work fixing the problem that has only gotten worse. It was good advice then. It is good advice today.

MENTAL HEALTH REFORMS NEEDED

The SPEAKER pro tempore (Ms. ROSENTHAL). The Chair recognizes the gentleman from Pennsylvania (Mr. MURPHY) for 5 minutes.

Mr. MURPHY of Pennsylvania. Madam Speaker, sadly, each day we read sensationalized headlines that boggle the mind, but here is the rest of the story. In New York, headlines read a 30-year-old man has been charged with killing his father who founded a hedge fund because his allowance had been cut.

The rest of the story? He had been in a mental health decline for years. A friend told the press, clearly their son had serious mental illness. There were stories about strange things that he had been doing in the past few years, really erratic behavior. Another newspaper reports the man was off his medication.

In Florida, headlines read a 22-year-old man cut off his mother's head with an ax last week because of her nagging about daily chores.

The rest of the story? This man had been diagnosed with schizophrenia and had been involuntarily held under the State's civil commitment law but re-

leased. Despite his illness and past commitments, he was no longer in treatment because Florida, like most States, requires a person to be imminently homicidal or suicidal for treatment.

In Pennsylvania a former marine killed his ex-wife and five of her family members last month because of "family issues."

The rest of the story? The marine had been evaluated and cleared of having suicidal or homicidal tendencies by a Department of Veterans Affairs psychiatrist just days before, a decision we now see was wrong.

Each week there are half a dozen new reports that demand more than a sensationalized headline because the rest of the story tells the real story. Severe mental illness is a brain disease; it is not an attitude or a lifestyle choice. Psychosis, schizophrenia, and other serious mental illnesses involve disruption in typical brain functioning which translates into a very specific set of disturbing behaviors. This is not a condemnation of the mentally ill nor a criticism of those who have severe brain disorders.

Hallucinations, voices, visions, and paranoia lead to actions that aren't grounded in reasoned choices. For those who don't have a brain disease it is hard to understand, and it is unnerving to think about, but when we understand that behaviors are symptomatic of what is occurring in the brain, we can address them without judgment, just like other medical diseases and other lifesaving treatments.

The distorted reasoning why an individual acts out in a violent manner or takes the lives of innocent victims on a mass scale are complex and not as simple as a response to a mother's nagging. Sadly, in all cases I mentioned today, the families knew there was something wrong with their mentally ill loved one but they were ignored and frustrated or turned away by a broken system of State and Federal laws that create walls and barriers instead of access to care.

Parents know there is a problem, and even when they have the resources to get a child help, the family efforts are thwarted by this broken system, and they are not getting effective, evidence-based treatment. And communities rarely have the appropriate programs, resources, and doctors to deal with the most severe cases.

In the face of this growing crisis, we must approach serious mental illness as a medical emergency that engages a community and medical response to help people and families trapped in this system that is misguided, in denial, and disconnected.

We can change this tragic pattern, and that is why I will be reintroducing the Helping Families in Mental Health Crisis Act.

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My legislation makes sure the most severely mentally ill have access to

treatment. It fixes the shortage of psychiatric beds. It clarifies and simplifies HIPAA privacy laws. It reforms Federal programs to focus on programs that research shows work, not feel-good fads. It helps patients who aren't able to understand their need for treatment get meaningful care.

We know that, for example, 50 percent of people with schizophrenia suffer from something called anosognosia—they are not even aware that they have problems—and this leads to noncompliance with treatment and helps to explain why 40 percent of Americans with serious mental illness don't get any treatment.

Anosognosia occurs most frequently when schizophrenia or a bipolar disorder affects portions of the frontal lobe, resulting in impaired executive function. The patients are neurologically unable to comprehend that their delusions or hallucinations are not real.

This is different than denial; this is a change in the wiring of the brain. We need to understand and respect that. The Helping Families in Mental Health Crisis Act also ensures there is accountability for how public health dollars are being spent.

We owe it to the 10 million Americans with a serious mental illness and the 5 million who are not with treatment to take meaningful action to fix the chaotic patchwork of programs and laws that make it impossible to get meaningful medical care until it is too late to do anything beyond mourning.

Each day, I receive countless letters and telephone calls from parents across the country who must courageously battle a broken system when trying to help a loved one in mental health crisis. I admire their courage, their compassion, and their passion. Let their struggles be our motivation to take action of our own now.

As I said, I will soon be reintroducing my Helping Families in Mental Health Crisis Act, and I welcome all Members interested in joining me in this quest to work together as we reintroduce this to make sure we get treatment before tragedy.

STATEHOOD FOR PUERTO RICO

The SPEAKER pro tempore. The Chair recognizes the gentleman from Puerto Rico (Mr. PIERLUISI) for 5 minutes.

Mr. PIERLUISI. Madam Speaker, as the new Congress begins its work on behalf of the American people, I rise to address my colleagues about an issue of national importance, namely Puerto Rico's quest to discard its status as a U.S. territory and to become a U.S. State.

Puerto Rico has been a territory since 1898. If Puerto Rico does not desire to remain a territory, it can follow one of two paths. The territory can become a State or it can become a sovereign nation, either fully independent from the U.S. or with a compact of free

association with the U.S. that either nation can terminate. If Puerto Rico becomes a nation, future generations of island residents would not be American citizens.

My constituents have made countless contributions to the United States in times of peace and war, serving in every military conflict since World War I. They fight today in Afghanistan and other dangerous locations in the same units as young men and women from States such as Florida, Texas, and New Mexico. Many of them have made the ultimate sacrifice in battle. When they do, their casket is flown back to this country draped in the American flag.

It takes a special kind of patriotism to fight for a nation that you love, but one that does not treat you equally. Although Puerto Rico is home to more American citizens than 21 States, my constituents cannot vote for President, are not represented in the Senate, and have one nonvoting delegate in the House. Moreover, territory status gives Congress license to treat Puerto Rico worse than the States, and Congress often uses that license.

Everyone, other than apologists for the status quo, comprehends that territory status is the root cause of the economic crisis in Puerto Rico. As a result of the structural problems this status has created, residents of Puerto Rico are relocating to the States in staggering numbers.

I know it breaks their hearts to leave behind the island they love, but most see no other option; yet through the clouds, a bright sun is emerging. The people of Puerto Rico have finally said, "No more." They have come to the conclusion that they deserve a status that is both democratic and dignified.

They will no longer tolerate being second-class citizens. They do not want special treatment; rather, they demand equal treatment, nothing more but nothing less.

The will of the Puerto Rican people was expressed in a 2012 referendum sponsored by the Puerto Rico Government. There, a majority of my constituents expressed their opposition to territory status.

Statehood received more votes than territory status, and statehood received far more votes than independence or free association, proving that Puerto Rico has no desire to weaken the bonds forged with the United States over nearly 12 decades. In short, statehood is now the predominant force in Puerto Rico.

At my urging and in response to this landmark referendum, the Obama administration proposed and Congress approved an appropriation of \$2.5 million to fund the first federally-sponsored vote in Puerto Rico's history with the stated goal of resolving the status issue.

I have proposed that the funding be used to hold a simple, federally sponsored yes-or-no vote on whether Puerto Rico should be admitted as a State,

just as Alaska and Hawaii did. This approach would yield a definitive result that nobody could reasonably question, and it has broad congressional support, since a bill I introduced last Congress that embodies this approach had 131 co-sponsors and led to the filing of an identical Senate companion bill.

All that remains is for the Governor of Puerto Rico to schedule the vote; yet a year has passed, and we have seen only inertia and indecision, all talk and no action.

For my part, I will continue to press for action both in San Juan and in Washington, D.C., using any strategy and technique that will advance the statehood cause.

Since none of my colleagues in this Chamber representing States would accept territory status for their constituents, I know they will understand that I will not accept it for my constituents either.

PENNSYLVANIA OFFICE OF RURAL HEALTH PRESENTS THE 2014 RURAL HEALTH AWARDS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Pennsylvania (Mr. THOMPSON) for 5 minutes.

Mr. THOMPSON of Pennsylvania. Madam Speaker, I rise today to recognize one individual and one organization from Pennsylvania's Fifth Congressional District that during the past year made substantial contributions to rural health in support of the communities our hospitals and caregivers serve each and every day.

The Pennsylvania Office of Rural Health, which is funded by the Federal Office of Rural Health Policy, the Pennsylvania Department of Health, and the Pennsylvania State University, is a public partnership designed to expand data-driven health care outcomes for rural communities.

Each year, the Pennsylvania Office of Rural Health's "Rural Health Awards" recognize individuals and organizations in the Commonwealth that have gone above and beyond in their respective field or program and made significant improvements towards improving health outcomes.

Mr. Daniel Blough, chief executive officer of the Punxsutawney Area Hospital in Punxsutawney, Pennsylvania, received the 2014 State Rural Health Leader of the Year Award. Mr. Blough was recognized for 28 years of dedicated service to the health and well-being of the residents in and around Punxsutawney, which is located in Jefferson County, Pennsylvania.

As a founding Pennsylvania member and president of the Pennsylvania Mountains Healthcare Alliance, a collaboration of 18 rural hospitals, Mr. Blough's leadership served to strengthen clinical outcomes for residents throughout the region.

Additionally, the Total HEALTH Program at the Dickinson Center, Incorporated, in St. Marys, Pennsylvania, which is also located in the