was abstinence. Now we have to make it explicit, to make sure that is one of the things young people know that they have that option.

But we reinforce that when we have opportunity that expands their future, expands their horizon of dreaming. You can dream dreams when people make that opportunity, the connection between work, the connection between education as a future for them.

As Members of Congress, we ought to consider in the whole budget debate, what things are we doing that are disincentives for young people to stay in school. I would submit that our education budget is not one that encourages, that we are investing in education. Certainly taking away the summer program is the wrong way to go if we are talking about making sure that young people are fully engaged during the time of the summer, but there are other programs that we can also do.

Mr. Speaker, I thank all my colleagues who have participated in this special order.

As we consider how and where to reduce spending, we must also not forget that teenage pregnancies cause a heavy burden on the Federal budget.

Medicaid funds, food stamps, and AFDC funds are especially hard hit by the teenage pregnancy problem.

If we want to balance the budget, let us begin by working to bring some balance to the lives of thousands and thousands of our teenagers, involved in premature childbearing.

A recent report to Congress on out-of-wedlock childbearing indicates that 35 percent of all out-of-wedlock births are to women over age 25; 35 percent are to women 20 to 24 years of age, and 30 percent are to teenagers.

One objective of welfare reform, shared by both political parties, is to reduce teenage childbearing. Pending legislation on welfare reform, however, embraces an unreasoned approach to reduce the number of out-or-wedlock births, by denying cash benefits to unwed teenage mothers.

This unreasoned approach is based on the perception that the system has failed and contends that any proposed change, no matter how austere, must be a good change.

Thus, those who propose eliminating welfare benefits to young unwed mothers argue that their approach can't make matters any worse than they already are.

Such proposals appear premised on the belief that if Government ignores teen parents, they will go away or get married. There is little or no research to support such contentions.

Reason, on the other hand, suggests that even if the belief held true for some, there would be many young children and mothers left destitute.

To have true welfare reform we must eliminate the need to pay these monetary benefits rather than just eliminating the funding.

As I stated earlier, we want to ''end welfare as we know it.'' But we do not want to replace it with welfare as we do not want to know it. We do not want to enact legislation that leads to a policy of national child abandonment.

An effort to reduce teenage childbearing is likely to require more than eliminating or manipulating welfare programs.

In fact 76 of the top researchers in this field signed a statement saying, ''welfare programs are not among the primary reasons for the rising number of out-of-wedlock births.''

My opinion on the issue revolves around three unanswered questions. First, if welfare is fueling the growth in out-of-wedlock births, they why do many of the States with the lowest AFDC payment levels have some of the highest out-of-wedlock birth rates? Second, why have out-of-wedlock births increased as the relative value of welfare benefits have gone down over the last 20 years? And third, why do other nations with more generous welfare benefits have lower teenage birth rates?

Teenage pregnancy is just one marker of disadvantaged—one result of growing up poor and poorly nurtured.

But, teen pregnancy is also a strong predictor of a new generation of disadvantaged.

The equation is as simple as this: As poverty is the most accurate predictor of teen pregnancy, teen pregnancy is a near-certain predictor of poverty.

While one in four American children now live in poverty, a 1991 report from the Casey Foundation compares the children of two groups of Americans: those who finished high school, got married, and reached age 20 before having a child and those who did not.

Of children in the first group, the poverty rate was 8 percent; in the second group the poverty rate was 79 percent.

Among teens, more births occur out-of-wedlock today than occurred 35 years ago.

This increase in out-of-wedlock births can be attributed to the certain changes in marriage patterns, sexual behavior, contraceptive practices, abortion, and the composition of the teenage population.

Young men and women are increasingly delaying marriage but not sexual activity. Teens make three sets of choices about sexual behavior and its consequences.

The first is whether and when to start having sex.

The second is whether to use contraceptives.

According to studies, in making the third choice—whether to become pregnant—the distinctions by income are dramatic.

In 1994, of all women age 15 to 19, 38 percent are defined as ''poor'' or ''low-income''; of these same women, 73 percent were projected to become pregnant. Of the 1 million teens who become pregnant each year, about half give birth, about 40 percent choose abortion, and the remaining 10 percent miscarry.

Once a teenager becomes pregnant there is no good solution. There is pain in adoption, there is pain in abortion, there is pain and suffering in giving birth and parenting a child. The best solution is to prevent the pregnancy.

Young people who believe that they have real futures to risk have real incentives to delay parenting. That is why when we demand responsible behavior, we have a reciprocal obligation to offer a real future beyond early parenting and poverty.

Reducing teenage childbearing is likely to require more than eliminating or manipulating welfare programs. Experience tells us that threats and punishment are not the best way to get teens to behave in a way that is good for them.

The most successful approach to reducing teenage childbearing is to design policies and procedures that are targeted to encourage positive developmental behavior through beneficial adult role models and job connections.

We must implement pregnancy prevention programs that educate and support school-age youths—10 to 21—in high-risk situations and their family members through comprehensive social and health services, with an emphasis or pregnancy prevention.

On average, it takes teens 1 year after becoming sexually active to receive family planning services.

The pregnancy rate among sexually experienced teens actually fell 19 percent from 1972–90, suggesting that teenagers who have access to birth control and are motivated have been successful at preventing pregnancies.

A recent study conducted by the Johns Hopkins School of Hygiene and Public Health analyzed the value reproductive clinics and other health care providers had when given an opportunity to intervene and provide contraceptive counseling to a group of sexually active teenage girls before they became pregnant.

The study shows that spending money on counseling these teenagers could help reduce future pregnancies.

Teenage girls seeking pregnancy tests are already sexually active, so even the most determined fundamentalist cannot claim that the clinics are telling these teens to have sex.

Unfortunately, clinics struggling for funds have a disincentive to serve teenagers who, by and large, cannot pay.

In addition, counseling teenagers is quite expensive because they need more attention than older women.

In the study, most girls who came for a test had reason to believe they might be pregnant: a late or a missed period.

But, a significant number—almost 14 percent—believed there was little chance they were pregnant.

One has to wonder why they came to the clinic. Perhaps it was a way to get someone that they could trust to talk to them.

Devoting more resources to preventing teen pregnancy will not only save us money in the long run, but it will improve the health, education, economic opportunities, and well-being of these young women and their families.

Supporting the National Campaign to Prevent Teen Pregnancy is an ideal way to acknowledge the problem of out-of-wedlock teen births. I urge all of my colleagues, Democrats, Republicans, and Independents to join in the campaign's effort.

THE 100TH ANNIVERSARY OF SPARROW HOSPITAL, LANSING, MI

The SPEAKER pro tempore (Mr. METCALF). Under a previous order of the House, the gentleman from Michigan [Mr. CHRYSLER] is recognized for 5 minutes.

Mr. CHRYSLER. Mr. Speaker, I rise today to recognize the proud history and accomplishments of Sparrow Hospital of Lansing, MI, which celebrates its 100th anniversary on March 18, 1996.

In the spring of 1896, a group of young women met at Lansing's Downey Hotel to discuss the growing need for a community hospital in the developing capital city. Armed with sheer determination, the 114 charter members of the Women's Hospital Association set about to raise funds to buy the local DeViney House, located on West Ottawa Street. Having just $400, they were forced to rent instead.

Not easily discouraged, these women opened and operated an 11-bed hospital, hired a doctor and a nurse, and donated their own linens.

As the needs of the community continued to expand, so did the needs of the facility. Expanding the operation several times, the hospital was finally located on a plot of land donated by Edward W. Sparrow—one of Lansing's pioneer developers.

Edward Sparrow donated the land at 1215 East Michigan Avenue and $100,000 to build the new hospital. Two years later on November 6, 1912, the 44-bed Edward W. Sparrow Hospital opened its doors. At the dedication ceremonies, it was avowed that the purpose of the new hospital was for ''receiving, caring for and healing the sick and injured, without regard to race, creed, or color.''

Sparrow Hospital in the years after has lived up to this purpose. Sparrow is a nonprofit organization, guided by volunteer boards, comprised of people representing a wide spectrum of community interests.

Through the efforts of its founders, and legions of others in the community, Lansing's first health service has grown to become today's Sparrow Hospital and the Sparrow Health System—a place where highly trained professionals work together to perform daily miracles.

Sparrow blends the knowledge and expertise of over 600 physicians, nearly 3,000 associates, and 1,400 volunteers with the most advanced technology, serving as a comprehensive health system for an eight-county population of nearly 1 million residents.

Sparrow is the regional center for pediatrics,burn treatment, cancer care, radiation therapy, neurological care, high-risk obstetrics, dialysis, and neonatal intensive care. Each year Sparrow treats over 120,000 residents, and Sparrow Health System services improve the health of thousands more.

The volunteers who first founded Sparrow and the continued community interest have made Sparrow Hospital and the Sparrow Health System the special place it is today. This spirit of volunteerism and community development will serve as a lasting legacy to the mid-Michigan community.

I would like to congratulate and commend all the individuals involved with the successful first 100 years of Sparrow Hospital, including the community itself, in celebrating this historic accomplishment.

OBJECTIVES OF NEW REPUBLICAN MAJORITY IN 104TH CONGRESS

The SPEAKER pro tempore. Under the Speaker's announced policy of May 12, 1995, the gentleman from Connecticut [Mr. SHAYS] is recognized for 60 minutes.

Mr. SHAYS. Mr. Speaker, it is not my intention to use the full hour, but I would like to address the Chamber in regards to a number of issues dealing with what we are seeking to do in this new 104th Congress, this new Republican majority.

Mr. Speaker, I said earlier in part of a special order that former Prime Minister Rabin, the Prime Minister of Israel, had said that politicians are elected by adults to represent the children. I am struck by the power of that statement, because really what our task is as Americans, certainly in government, is to leave this country better for the generation that will follow. That is what our forefathers did for us. They founded a country and left it better for us, and we have to leave it better for our children.

Mr. Speaker, we have three main objectives in this Republican Congress: This is to seek to get our financial house in order and finally to balance our Federal budget, we are looking to save our trust funds, particularly Medicare, from insolvency, bankruptcy, and we are looking to transform our caretaking, social, corporate, even farming, welfare state into what I would refer to as a caring opportunity society.

We are not looking to throw our hands into the air and say, ''Listen, this is not a problem with the government, you're on your own.'' We are looking to help people grow the seeds. We just do not want to keep handing them the food.

We as Members of Congress have a solemn pledge to do a number of things, but obviously one of them is to vote on a Federal budget each year.

What some of the listening audience may not know and something I did not fully grasp, even after I was elected a Member of Congress in 1987, was that whereas on the State level I voted on one budget, here in Washington we vote on 13 separate appropriations bills, but they only constitute one-third of all the spending that we do in Washington.

When we vote out a budget, we are voting on one-third. When we vote, we vote on one-third. We think of how we spend one-third of the budget. Fifty percent of the budget is literally on automatic pilot. It is what we call our entitlements, it is food stamps, Medicare, Medicaid, welfare for mothers and children. It is agricultural subsidies. You fit the title, you get the money. We in Congress do not vote on it each year. It is on automatic pilot.

I can remember early on in my career as a Member of Congress, I would go back in a community meeting and I would say ''I voted to cut spending,'' and they said, ''I know you did, but how come it keeps going up?'' It is a good question. I went back to my office and I said, ''How come if we keep voting to cut spending and they actually pass, the budget keeps going up?''

I realized that in Washington, unlike any place I have ever been before, they use what they call a baseline budget. They say this is what it cost this year, and to run the same level of service, if it cost $100 million this year, and it is going to run to the same level of service, we spend $105 million to run the same level of service. So then if you only appropriate and spend $103 million, Washington calls it a $2 million cut.

If it costs $100 million and you spend $103 million, how can you call it a cut? It is a $3 million increase. The argument is you have more people and you have inflation, and so that is the baseline. Therefore, anything cut from the baseline is cut. I guess that is how you get these outrageous predictions that when we have voted on the budget that we have cut things like the earned income tax credit. This is a payment that goes to a working person who pays no taxes because they do not make enough to pay taxes, so they actually get money from the Federal Government.

The earned income tax credit was a program that was really inaugurated by Republicans but then expanded by Democrats, and the program is simply at a point where it will become the largest entitlement if we do not slow its growth. So we are allowing the program to grow from $19.9 billion in the last year to, in 2002, 6 years from now, $25.4 billion. That is referred to as a cut, and yet it is going from $19.9 billion to $25.4 billion. Only in Washington when you spend that much more money do people call it a cut.

The school lunch program, remembering the President and legislative leaders on the other side of the aisle literally going to schools, telling kids that they are going to lose their school lunch program because of what this new majority was doing in Congress. Yet when I look at that program, it is growing from $5.2 to $6.8 billion in the seventh year. Only in Washington when you go from $5.2 billion to $6.8 billion do people call it a cut. It is not a cut, it is a significant increase in spending. Admittedly it is not growing at 5.2 percent, it is growing at 4.5 percent. Then we are allowing States to reallocate 20 percent of that money for other programs dealing with food for Kids.

The student loan program, I was outraged when I heard Republicans were going to cut the student loan program, because, I mean, that is what the President said and the President would be, it seems to me, wanting to be accurate in his statement. When I questioned my own colleagues, I wrestled with the fact that the student loan program last year was $24.5 billion. In the seventh year, in 2002, the year we balance our budget, it grows to $36.4 billion. That is a $12 billion increase, $12 billion on top of the $24 billion spent last year, a 50-percent increase in the student loan program We are still allowing students to borrow up to $49,000. The average loan will still be $17,000.

What did we originally attempt to do? When a student graduates, they are given a grace period of 6 months before they have to start paying back the loan. The Federal Government, the taxpayers, men and women who work who pay money into this general fund of the Federal Government, were paying and are paying the interest from