## 107TH CONGRESS 1ST SESSION

## H. CON. RES. 179

Expressing the sense of Congress regarding the establishment of a National Health Center Week to raise awareness of health services provided by community, migrant, public housing, and homeless health centers.

## IN THE HOUSE OF REPRESENTATIVES

June 28, 2001

Mr. Davis of Illinois (for himself, Mr. Bilirakis, Mr. Capuano, Mr. BONILLA, Mrs. Jones of Ohio, Mr. Shimkus, Mr. Rahall, Mr. SERRANO, Mr. TOWNS, Ms. BALDWIN, Mr. LAFALCE, Mr. SCOTT, Ms. McKinney, Mr. Peterson of Pennsylvania, Mr. Cummings, Mr. PAYNE, Mr. BLAGOJEVICH, Mr. FROST, Mr. LIPINSKI, Mr. WAXMAN, Mr. FILNER, Ms. ROYBAL-ALLARD, Mr. WATT of North Carolina, Ms. Jack-SON-LEE of Texas, Mr. Goss, Mr. McNulty, Ms. Pryce of Ohio, Mr. WYNN, Mr. RUSH, Mrs. Meek of Florida, Mr. Farr of California, Ms. NORTON, Mr. DINGELL, Mr. OWENS, Mr. HOEFFEL, Mr. REYES, Mr. JEFFERSON, Mrs. CHRISTENSEN, Mr. DEFAZIO, Mr. CRAMER, Mr. CLY-BURN, Mr. PASTOR, Mr. DOOLEY of California, Mr. NORWOOD, Mr. RAN-GEL, Mr. GONZALEZ, Ms. BROWN of Florida, Mr. MENENDEZ, Mr. CON-YERS, Mr. PICKERING, Mr. McIntyre, Mr. Meeks of New York, Mr. BALDACCI, Mr. WHITFIELD, Mr. SANDLIN, Ms. SLAUGHTER, Mr. MAS-CARA, Mr. WALSH, Mr. MALONEY of Connecticut, Mr. Brown of Ohio, Mr. Pascrell, Mr. Bass, Mr. McHugh, Mr. Wicker, Mr. Dicks, Mr. BOYD, Mr. NADLER, Mr. RODRIGUEZ, Mr. WATTS of Oklahoma, Mr. STRICKLAND, Mr. OLVER, Mr. JACKSON of Illinois, Mr. MARKEY, Mr. BAIRD, Mr. PRICE of North Carolina, Mrs. MALONEY of New York, Mr. TIERNEY, Mr. LANGEVIN, Ms. SANCHEZ, and Mr. SMITH of New Jersey) submitted the following concurrent resolution; which was referred to the Committee on Government Reform

## **CONCURRENT RESOLUTION**

Expressing the sense of Congress regarding the establishment of a National Health Center Week to raise aware-

- ness of health services provided by community, migrant, public housing, and homeless health centers.
- Whereas community, migrant, public housing, and homeless health centers are vital to many communities in the United States;
- Whereas there are more than 1,029 such health centers serving nearly 12,000,000 people at 3,200 health delivery sites, located in all 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and the Virgin Islands;
- Whereas such health centers have provided cost-effective, quality health care to poor and medically underserved people in the United States, including the working poor, the uninsured, and many high-risk and vulnerable populations;
- Whereas such health centers help reduce health disparities, meet escalating health care needs, and provide a vital safety net, in the health care delivery system of the United States;
- Whereas such health centers provide care to 1 of every 9 uninsured Americans, 1 of every 8 low-income Americans, and 1 of every 10 rural Americans;
- Whereas the people to whom such health centers provide care would otherwise lack access to health care;
- Whereas such health centers and other innovative programs in primary and preventive care serve 600,000 homeless persons and more than 650,000 farm workers in the United States;
- Whereas such health centers make health care responsive and cost-effective by integrating the delivery of primary care

- with aggressive outreach, patient education, translation, and other enabling support services;
- Whereas such health centers increase the use of preventive health services, including immunizations, pap smears, mammograms, and glaucoma screenings;
- Whereas in communities served by such health centers, infant mortality rates have decreased between 10 and 40 percent;
- Whereas such health centers are built through community initiative;
- Whereas Federal grants assist participating communities in finding partners and recruiting doctors and other health professionals;
- Whereas Federal grants constitute, on average, 28 percent of the annual budget of such health centers, with the remainder provided by State and local governments, medicare, medicaid, private contributions, private insurance, and patient fees;
- Whereas such health centers are community-oriented and patient-focused;
- Whereas such health centers tailor their services to fit the special needs and priorities of communities, working together with schools, businesses, churches, community organizations, foundations, and State and local governments;
- Whereas such health centers contribute to the health and well-being of their communities by keeping children healthy and in school and helping adults remain healthy and productive;

Whereas such health centers encourage citizen participation and provide jobs for 50,000 community residents; and

Whereas the establishment of a National Community Health Center Week for the week beginning August 19, 2001, would raise awareness of the health services provided by such health centers: Now, therefore, be it

1 Resolved by the House of Representatives (the Senate 2 concurring), That it is the sense of Congress that—

(1) there should be established a National Community Health Center Week to raise awareness of health services provided by community, migrant, public housing, and homeless health centers; and

(2) the President should issue a proclamation calling on the people of the United States and interested organizations to observe such a week with appropriate programs and activities.

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