while exacting a large cost to public health. We urge you to reject privatizing EHP. Sincerely.

Dennis J. Kucinich, Hilda L. Solis, Bart Gordon, Mark Udall, Raúl M. Grijalva, Jim McDermott, Brad Miller, Bernard Sanders, Robert Wexler, Barbara Lee, James P. McGovern, James P. Moran, Martin O. Sabo.

CONGRATULATING ARCHBISHOP OSCAR H. LIPSCOMB ON THE 25TH ANNIVERSARY OF HIS OR-DINATION TO THE EPISCOPACY AND THE ARCHDIOCESE OF MO-BILE ON ITS 25TH ANNIVERSARY

HON. JO BONNER

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES Wednesday, November 16, 2005

Mr. BONNER. Mr. Speaker, I rise today to honor Archbishop Oscar H. Lipscomb on the 25th anniversary of his ordination to the episcopacy and to recognize the 25th anniversary of the Archdiocese of Mobile.

Mobile native Archbishop Oscar H. Lipscomb holds a master's degree and a doctorate from Catholic University in Washington, D.C. Archbishop Lipscomb was ordained a priest in Rome on July 15, 1956, and was consecrated as the first Archbishop of Mobile on November 16, 1980.

Archbishop Lipscomb has been a pillar of the Mobile Catholic community for almost half a century starting when he was assistant pastor at St. Mary Parish. He has also played an integral role in education, serving as a teacher at McGill Institute and later a lecturer at Spring Hill College.

A popular figure in our community, Archbishop Lipscomb has developed a strong reputation for his dedication to the Archdiocese of Mobile. The archbishop has received numerous honors throughout his life including receiving the rank of Papal Chaplain and the title of Reverend Monsignor by Pope Paul VI and being named "Mobilian of the Year for 1981." He has been an active member in the Catholic Historical Association, Historic Mobile Preservation Society, American Catholic Historical Association, Lions Club of Mobile, and the Mobile Metropolitan YMCA. Recently, under the archbishop's leadership, the archdiocese has made significant contributions to the victims of Hurricane Katrina.

Mr. Speaker, I ask my colleagues to join me in honoring the silver jubilee of Archbishop Lipscomb's ordination to the episcopacy and being the first archbishop of the Archdiocese of Mobile. I also extend my gratitude to Archbishop Lipscomb for 25 years of service to southwest Alabama. I know his sister, Margaret Joyce Lipscomb Bolton, and his many friends join with me in praising his accomplishments and recognizing this milestone in his life. ON THE FUNDING OF GULF WAR VETERANS ILLNESSES

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, November 16, 2005

Mr. KUCINICH. Mr. Speaker, I sent the attached letter, along with my colleagues, in support of Gulf War Veterans Illnesses Research funding in the Conference Report of the Defense Appropriations Bill on November 10, 2005.

Congress of the United States,

Washington, DC, November 10, 2005. The Hon. C.W. BILL YOUNG,

Chairman, Appropriations Subcommittee on Defense, H-309 U.S. Capitol, Washington, DC. The Hon. JOHN P. MURTHA,

Ranking Member, Appropriations Subcommittee on Defense, 1016 Longworth House Office Building, Washington, DC.

DEAR CHAIRMAN YOUNG AND RANKING MEM-BER MURTHA: As the conferees begin to work on the fiscal year 2006 Appropriations bill for the Subcommittee on Defense, we respectfully seek your support for retaining the House funding level of \$10 million for Gulf War Veterans Illnesses research.

The Congressionally chartered Veterans Administration Research Advisory Committee on Gulf War Veterans' Illnesses found in September 2004 that fourteen years after the 1990-1991 Gulf War, between 26 and 32 percent of those who served in that war continue to suffer from serious and persistent health problems-typically multiple symptoms that include severe headaches, memory problems, muscle and joint pain, severe gastrointestinal problems, respiratory problems, skin disorders and other problems. They also determined that the existence of these serious and often debilitating problems could not be scientifically explained by stress or psychiatric illness.

We are only now starting to see the longterm effects. For example, ALS, or Lou Gehrig's disease, occurs in Persian Gulf veterans with twice the frequency of peer veterans that were not deployed. Yet a federal research program to better understand these issues that was once \$45 million strong has been virtually eliminated. The FY 06 budget dedicates no funding to either the Department of Defense or the Department of Health and Human Services for Gulf War Illnesses research. The funding we are requesting is consistent with the VA Research Committee recommendations.

The amendment to the FY 06 House Defense appropriations bill that added the research funding was well supported. It passed by voice vote, had bipartisan support and was backed by the American Legion, Paralyzed Veterans of America, the National Gulf War Resource Center, Vietnam Veterans of America, and Veterans of Foreign Wars.

Finally, research guidance was developed in consultation with top members of the VA Research Committee. We therefore request that the guidance, which is the same as that inserted into the congressional record during bill debate, be included in the conference report. The guidance text is attached for your reference. We expect this research to supplement the other promising research performed at Army Research, Development, Test and Evaluation within the Department of Defense.

Thank you for consideration of our requests.

Sincerely,

- Dennis J. Kucinich, Bernard Sanders, Frank Pallone, Jr., Jim McDermott, Lane Evans, Tammy Baldwin, Christopher Shays, Rob Simmons, Rush D. Holt, Barbara Lee, Albert R. Wynn, Carolyn B. Maloney, Lloyd Doggett, Joseph Crowley, Raúl Grijalva, John Conyers, Jr., Jay Inslee, Dennis Moore, Collin C. Peterson, Betty McCollum, Ed Case, Members of Congress.
- GULF WAR VETERANS' ILLNESSES RESEARCH GUIDANCE FOR THE FY06 DEFENSE DEPART-MENT APPROPRIATIONS CONFERENCE REPORT

It is intended that the appropriation for research on chronic illnesses affecting veterans of the 1991 Gulf War be used for a coherent research program focusing on (1) identification of mechanisms underlying Gulf War illnesses, (2) chronic effects of neurotoxic substances to which veterans were exposed during deployment; (3) studies that expand on earlier research identifying neurological and immunological abnomalities in ill Gulf War veterans; and (4) identification of promising treatments. The primary objective of the research program will be to elucidate pathophysiological mechanisms underlying Gulf War illnesses, which may subsequently be targeted to developing treatments for these conditions. A further objective will be to identify and evaluate treatments which currently exist and which hold promise for treating these illnesses.

The U.S. Army Medical Research and Materiel Command shall, in consultation with experienced research scientists in relevant fields, establish a list of research questions to address the above topics, and design a program of specific research studies that together constitute a coherent plan to answer these questions, each identified study to be conducted by the most qualified researcher, which may include consulted scientists. As part of this process, there shall be a public solicitation of research proposals (which may include concept exploration and pilot projects) on these questions and at least twenty-five percent of the program (measured by amount funded) shall be made up of proposals selected from this solicitation, as modified if necessary to increase the value of the proposed research to the overall program. At least twenty percent of the program (measured by amount funded) shall address the objective of identifying and evaluating promising existing treatments, such as observation and pilot studies. The program shall be submitted for determination of scientific merit through independent peer review.