cranes and other equipment to the local community. Similarly, they would retain all the pier space with the closure of a number of naval activities at the naval station.

Their decision would be like moving all the troops out of Fort Ord, but holding onto the base. They cannot and should not have it both ways. Either they retain the facilities or turn them over to the local community so that Guam can recover the job losses. This schizophrenia will leave our community in a straitjacket without the tools for our own economic survival. If the Navy closes down these facilities and retains the assets we will be left with no access to the waterfront and a few empty buildings. This does not bode well for forming a successful reuse plan when we cannot even be given the opportunity to use our own resources.

According to recent statements by the Secretary of Defense William Perry and other officials in the Pentagon, the decision to pull back from Guam was opposed by some high ranking uniformed officers, including the Commander in Chief, Pacific Command, Adm. Richard Macke. Apparently, Admiral Macke indicated that without Guam, the Navy will be forced to count on foreign facilities in Japan to meet their needs and would lose the most forward deployed U.S. military base on American soil in the Pacific. The CINC understands the big picture and the need for Guam as a strategic base. However, the computer model used by the Pentagon did not consider these implications.

Computer models, bean counters, and technocrats did not consider such factors as reliability, loyalty and the long-term effect of these closures on our position in the Pacific. Apparently suits in the Pentagon overruled some of our uniformed military personnel who understand the need to maintain an SRF in Guam.

A more logical approach than the one taken in the Secretary's recommendation would be a joint use agreement with the local government. Under such an arrangement, the Government of Guam could act as a corporate operator of the major facility, SRF. The Navy would then pay the government of Guam to operate the facility and retain access to it in times of crisis. In this way, the equipment and quality of work force is maintained and used for commercial use but the Navy does not have to pay for the entire cost anymore. It makes good economic sense by saving the Navy money and giving the local community the economic tools to survive.

If this approach is rejected and BRAC decides that Guam is not needed as a forward deployed base then the Navy must turn over the assets and land upon completion of the closure. Otherwise, there is no way that the people of Guam could possibly recover the 25 percent loss to their economy and 5 to 10 percent reduction in the work force. The least the Navy can do if they are going to close these facilities is to give the local community the tools to recover from the loss.

Since the Navy has taken the easy way out by making a wishywashy decision, it is now up to BRAC to decide.

Madam Speaker, I urge BRAC to make the right decision.

SAVE FLORIDA VETERANS PROJECTS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 1995, the gentlewoman from Florida [Ms. BROWN] is recognized during morning business for 2 minutes.

Ms. BROWN of Florida. Madam Speaker, last week the Republican members of the House Committee on Appropriations voted to rescind $206 million in the VA's budget for this year. These funds were intended for six VA facilities and medical equipment to provide better health care for our Nation's veterans.

Of these six projects that were cut, two were in the Florida, Gainesville ambulatory care unit that has been on the list for over 18 years, and one in Orlando that is a win-win situation, an example of how Government works well.

When the Base Closure Commission recommended closing the naval training facility, the Department of Defense, along with Veterans' Affairs, worked together to turn that facility over to the veterans who really needed the facility in the Orlando area. The amount of this funding was $14 million. There could be no backing down on this matter. A vote to keep our veterans projects is a vote to keep our promise to our veterans.

These cuts targeted at veterans are another example that the Republican ''Contract With'' is a ''Contract on America,'' and a Contract on American veterans.

Madam Speaker, one project was for a $14 million project to allow the VA to relocate from its present location to the Orlando Naval Training Center hospital, identified for base closure, for use as a satellite outpatient clinic and a 120-bed nursing home facility.

The existing outpatient clinic in Orlando is a disgrace. It lacks sufficient examining rooms, waiting areas, and bathrooms. There is no privacy for examining women veterans and parking is severely limited. These veterans in east central Florida have already waited too long for access to a quality health care facility.

The other funds were $17.8 million for a VA ambulatory care addition in Gainesville. Funds have already been obligated for the Gainesville ambulatory care addition. In fact, last week the VA announced a contract award for the project. This project has been identified by the VA as critically necessary to relieve outpatient overcrowding problems. Lack of space prevents the medical center from offering care in a timely manner. This Gainesville project has been designed to include an ambulatory surgery facility in renovated space, along with facilities for primary care, specialty outpatient care, and women's health.

It is a national disgrace that Republicans cut these funds to provide better care for veterans. The list obviously was quickly and thoughtlessly compiled. Our Nation's veterans—men and women—who have been called upon to put their lives on the line in remote parts of the world and under the most difficult conditions. If they survive this ordeal, they should at least be able to have good care when they return to the United States.

These canceled projects prevent us from expanding our outpatient services, a national trend in health care delivery, and making our health care system more efficient and cost effective. These canceled projects are aimed at one of the most fragile groups in our society—aging World War II and Korean conflict veterans. These and all veterans should expect and receive good care. If we cannot protect them at their time of need, how can we ask them to stand in harms way to protect us?

SUPPORT AN AMENDMENT TO THE RESCISSIONS BILL

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 1995, the gentleman from Mississippi [Mr. MONTGOMERY] is recognized during morning business for 2 minutes.

Mr. MONTGOMERY. Madam Speaker, I want to thank the gentlewoman from Florida [Ms. BROWN] and the gentleman from Guam [Mr. UNDERWOOD] for giving me part of their time.

Madam Speaker, I rise to support, and I hope all Members would support, an amendment to the rescissions bill. This amendment would restore the $206 million for veterans' programs which the Committee on Appropriations proposes to rescind.

Madam Speaker, I hope the Committee on Rules will permit us to offer a clean amendment to restore these funds.

The six VA projects which the committee has recommended be canceled are needed in order to improve access to necessary outpatient care in an area where over 1 million veterans reside.

Rather than producing real savings, the proposed rescissions would tend to have the opposite effect because they would cut projects aimed at making VA health care delivery more cost-effective.

As the President of the United States said yesterday, ''These cuts would harm those veterans who most need the Nation's help.'' Enacting this measure would contradict the Speaker's assurance to me in January that Congress would not cut veterans' programs.

Madam Speaker, in some parts of the country the VA really does not have the proper health facilities to meet the veterans' needs. I am told that the clinics are too small. For example, in Puerto Rico eye doctors are forced to perform eye examinations in hallways. Many VA outpatient clinics were built so long ago that there is no privacy for women veterans. In most of these older facilities, there is only one examining