

rehabilitator, observed that her young patients suffered less from physical ailments and more from a downcast spirit and low self-esteem. The youth did seem, however, extremely curious and excited about her animal patients. With a small Burrowing Owl named "Bo" who had been declared non-releasable, she set forth to combine the natural love of animals she observed in youth, with the goal of increasing their self-esteem. She implemented, on a small scale at the middle school, a curriculum which trained students to perform public presentations about injured wildlife and their conservation. Thirteen years later, Talking Talons' basic approach to instill healthy lifestyles and attitudes in young people has grown and taken off.

Today, the program thrives in New Mexico. Through a dedication team of staff, volunteers, contributors, and state and federal government, Talking Talons is realizing its vision of the future. Through experiences in public speaking, team-building activities, and conservation projects, the youth of our communities and our environmental advocates of tomorrow are developing a commitment towards conservation of natural resources. We owe Talking Talons our gratitude for ensuring that such valuable opportunities exist.

Mr. Speaker, it seems that every time we open a newspaper or watch the news, we hear of another devastating scandal involving corporate America. From Enron to WorldCom, the news of recent months has been disheartening and unbelievable. It is nice to know, however, that there are some businesses out there that want to do the right thing. They want to become community partners. In that spirit, I want to commend Campbell Corporation and its President and CEO Robert Gately for recently donating land where students can implement riparian restoration practices, and for pledging to assist in the development of a new Talking Talons Leadership Center and Museum, along New Mexico's historic Turquoise Trail. At this new facility, Talking Talons will engage the community in conservation-based projects, including education wildlife programs designed to connect children and teens with nature.

Campbell Corporation is also working with Talking Talons to support a private-match funding source that will enable the program to qualify and compete for grants available from various foundations and agencies. I am so pleased that the East Mountains has a community partner like Campbell Corporation to help quality non-profits expand their operations.

During my visit, I had the opportunity to see firsthand the restoration project that Talking Talons has been conducted at the San Pedro Creek since spring this year. This ongoing restoration of the fragile environment involves the young preservationists working to identify native and non-native plant species and restoring the creek to its original state.

When I visited Talking Talons, I met a number of the students that are involved in the program. These young adults were clearly inspired, intelligent, and friendly. Some of the students gave me presentations on different projects that they were undertaking. Just meeting the students was positive proof that the mission of Talking Talons is soaring and succeeding.

Many of the students work directly with animals that can never be released again, either

due to permanent injury or their unnatural contact with humans. These animals, however, will be taken care of and used in a positive way. I was especially pleased to learn that Talking Talon, in conjunction with the New Mexico Department of Health's Tobacco Use Prevention and Control Program, is working to warn other students about the deadly realities of tobacco. The students use the animals as metaphors for the strength and courage it takes to resist the peer pressure of tobacco and other negative influences. Seeing the animals used this way is truly novel. It is just another example of the creative approach that the staff of Talking Talons has taken to address the various challenges that are facing New Mexico's youth.

Another important element of this program is its location. Talking Talons is located in what is called the Tri-County area. So named because in about a ten-minute drive you will go through the counties of Bernalillo, Sandoval and Santa Fe. This particular area of the state is rural in nature and surrounded by beautiful forests. As is the case with most rural areas, finding things for youths to do—whether it be working or volunteering—is often difficult. Without positive outlets, our children often end up in negative and unhealthy situations. The genius of Talking Talons is that because of its location young people in the East Mountains have a wonderful and productive alternative way to spend their time.

Mr. Speaker, I look forward to building a relationship with Talking Talons Youth Leadership. I am very proud to be able to share with you the story of these terrific students and the wonderful gift they are giving to their community and to themselves. They are demonstrating what life really is—being a leader, a good student, and living a healthy lifestyle.

INTRODUCTION OF THE "LIVING WELL WITH FATAL CHRONIC ILLNESS ACT OF 2002"

HON. JAMES L. OBERSTAR

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 16, 2002

Mr. OBERSTAR. Mr. Speaker, I rise today to introduce the "Living Well with Fatal Chronic Illness Act of 2002," a bill to build the capacity to meet the challenge of growing numbers of people living with serious chronic illness for some time before death. I am joined in introducing this bill by my colleagues Representative STEPHANIE TUBBS JONES, Representative MARTIN FROST, Representative MICHAEL McNULTY, and Representative ELEANOR HOLMES NORTON.

The early ideas for this legislative initiative came from conversations around the dinner table with my wife, Jean. We have both lost spouses, who succumbed at an unusually early age to cancer, and we have tended to disabled and frail parents.

Many citizens have been personally touched by the experience of caring for disabled and frail parents or for spouses and children as they lived out their final days. My experience in these difficult situations has been that our health care system is a patchwork quilt of mismatched services that carry with them substantial expense. So, the challenges faced by those nearing the end of life, as well as by

those caring for loved ones, are particularly meaningful to me.

Just in the last half-century, the way that most Americans come to the end of life has changed dramatically. Today, most people live for many months with a serious chronic illness before they die. In fact, statistics show that, on average, Americans will be unable to care for themselves for the last two years of their lives. However, the services that our health care system makes readily available were designed to cope with short-term threats, such as accidental injuries and heart attacks. Our nation's health care system has not been adapted to meet the needs of people facing the final phase of life or the many challenges faced by their caregivers.

Many of the shortcomings in the health care system related to care at the end of life arise from inherent shortcomings in federal policy. Unfortunately, we have been slow to see that these lapses are not just personal calamities and challenges, but rather, are built into federal policy. For example, while Medicare coverage makes operations and emergency services readily available to the elderly, services more appropriate for serious disability and dying are not easily found. Medicare, Medicaid, and Veteran's coverage do not provide for continuity in care, advance care planning, family support, or symptom relief for long-term fatal illnesses.

Further, end of life care uses a large portion of funding allocated to health care services. Those last few years of life are tremendously expensive, with the last year alone using 28 percent of the overall Medicare budget. It is estimated that half of Medicare cost, and even more of Medicaid for the elderly and Veteran's health care, go toward care of those who are very sick and will die, rather than get well. Although taxpayers spend money on end of life care, they do not get reliability and quality from that care.

And this is a problem that will only increase in the coming years. The numbers of people facing serious illness and death will double within a quarter century, as the Baby Boomer generation reaches old age. Our nation must not only arrange and pay for services that can support the unprecedented number of people who will need care, but we must also learn how to support family caregivers. Facts show that a family member will spend nearly as many years, seventeen, caring for an elderly parent, as raising children, eighteen years. Further, a family caregiver can expect to lose more than one-half million dollars in net worth, (from having a lower pension, more time not covered by health insurance, and lost wages.)

The "Living Well with Fatal Chronic Illness Act of 2002" will meet the challenges faced by a growing number of people who must live with serious chronic illness for some time before death. This comprehensive legislation addresses four key initiatives—two affect caregivers, two points relate to improving end of life care.

First, we establish an early Medicare buy-in program for otherwise uninsured caregivers aged 55 to 65. This provision would guarantee that those caregivers approaching Medicare age would not have to go without health insurance themselves when they are forced to leave work to care for a family member. For example, a 60-year-old woman who leaves her job to take care of her 85-year-old mother who has Alzheimer's disease often not only

loses her income and social role, but also her employer-sponsored health insurance. Age and pre-existing conditions make it unlikely that the daughter could purchase health insurance as an individual, so she may have to jeopardize her own medical care for that of her mother. By enabling family caregivers aged 55 or older to buy into Medicare at community rates, with no penalty for pre-existing conditions, we recognize the important contributions made by caregivers and support their valuable work in useful ways.

Second, the legislation proposes a \$3,000 per year tax credit for the primary caregiver of a low-income individual who has long-term care needs. This is important, because the United States is the only developed nation that does not support family caregivers. There is no federal government program to help improve skills, provide respite; indeed, we do not generally demonstrate that we honor their love and loyalty. The tax credit we propose is admittedly not enough to pay for the financial sacrifices of caregivers who provide long-term care, but it will demonstrate support and respect for the significant commitment and contributions made by those who help loved ones to live well despite serious illness.

We have been so focused on learning how to prevent and cure diseases that we have all but abandoned interest in what occurs as those possibilities run out. Most people now die of long-term irreversible conditions like dementia, frailty, heart failure, emphysema, cancer, and stroke; yet there is very little reliable evidence about serious illness and the end of life. This legislation will help provide guidance that the medical community needs to respond more effectively to unique end of life challenges.

Third, the bill authorizes the Department of Health and Human Services to establish research, demonstration, and education programs to improve the quality of end-of-life care across multiple federal agencies.

Fourth, the bill authorizes the Department of Veterans Affairs to develop and implement programs to improve the delivery of appropriate health and support services for patients with fatal chronic illness. The Veterans Health Care System has been a leader in end of life care delivery and innovation, especially in advance care planning and pain management. This bill aims to support continued excellence through enhanced education and service delivery for this important care system that now serves so many disabled and elderly veterans.

Our nation will face major challenges in the next quarter century as baby boomers approach old age. We must ensure that people suffering from fatal chronic illnesses live out their lives in a dignified, comfortable, and meaningful way, and we must support and honor the invaluable work of caregivers.

HONORING DHIRUBHAI AMBANI

HON. GARY L. ACKERMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 16, 2002

Mr. ACKERMAN. Mr. Speaker, it is with great sadness that I rise to mark the passing of one of India's greatest industrialists and entrepreneurs, Dhirubhai Ambani, who died on Saturday, July 6, 2002, at the age of sixty-nine.

Dhirubhai Ambani was the ultimate success story. Born in a rural village in Gujarat, he rose from a small trader of textiles and spices to head the largest and most profitable industrial concern in India, the Reliance Group. Through a series of shrewd business moves and decades of hard work, Dhirubhai Ambani transformed Reliance from a minor retail concern into an entity which included the largest and most modern refinery in Asia, a petrochemical business of unparalleled quality, a five billion dollar satellite and broadband subsidiary, and petroleum and refining businesses which set the standard throughout South Asia. At the time of his death, Dhirubhai Ambani oversaw an economic juggernaut which accounted in almost 3 percent of India's GDP and 16 percent of the value of the Bombay Stock Exchange. He was one of the wealthiest men in the world, a recognized billionaire by Forbes Magazine, and in 2000 he was rightly acknowledged by Business India magazine as India's Businessman of the Century.

Mr. Speaker, although Dhirubhai Ambani became very rich, his wealth was never closely held. Unlike many old line Indian companies, Dhirubhai Ambani shunned debt financing from banks and instead offered shares in Reliance to India's growing middle class. Shares in Reliance were eagerly purchased whenever offered. Today there are more than three million shareholders, almost all of whom are financially far better off as a result of their investment.

For anyone who may wonder about the ability of capitalism to flourish in the Indian economy, despite that country's long dance with government intervention and control, one need look no further than the story of The Reliance Group and its departed Chairman, Dhirubhai Ambani.

Mr. Speaker, as the Former Chairman of the Congressional Caucus on India and Indian Americans and a frequent visitor to India, I had the distinct privilege of spending time with Dhirubhai Ambani both at his office in South Bombay and his lovely residence. He was a gentleman of immediate warmth. A modest man who did not discuss his achievements or his generosity towards his employees, his community and his country, Dhirubhai Ambani immediately made me feel as though we had been friends for a long time.

Mr. Speaker, I know my colleagues join me in expressing condolences to Dhirubhai Ambani's two sons, Mukesh and Anil, who have taken over the management of Reliance, as well as his widow, Kokilaben, and his two daughters. Although they have suffered a great loss, their loss is shared, not only by India's citizens, but by many friends of India in the Congress and throughout the United States.

LEGISLATION TO NAME A UNITED STATES POST OFFICE IN ST. PETERSBURG, FLORIDA FOR THE HONORABLE WILLIAM C. CRAMER

HON. C.W. BILL YOUNG

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 16, 2002

Mr. YOUNG of Florida. Mr. Speaker, this morning I have introduced legislation to name

the United States Post Office at 3135 First Avenue North in St. Petersburg, Florida for the Honorable William C. Cramer, who represented the great state of Florida in this House for 16 years from January 3, 1955 to January 3, 1971.

Bill Cramer moved to St. Petersburg in 1925 where he attended public schools and The St. Petersburg Junior College. He enlisted in the Naval Reserve in 1943 and served with distinction as a gunnery officer during World War II. In particular he was cited for his service during the allied invasion of southern France. He was discharged as a Lieutenant in 1946.

Upon leaving the Navy, he graduated from the University of North Carolina and the Harvard Law School. He was admitted to the Florida Bar in 1948, when he began practicing law in St. Petersburg.

Bill Cramer began his distinguished career in public service in 1950, when he was elected to the Florida House of Representatives, where he served until 1952, including one year as the House's first Minority Leader.

It was in November of 1954 that he was elected to the United States House of Representatives, and was sworn into the 84th Congress on January 3, 1955. Bill Cramer was the first Republican from Florida elected to the House since reconstruction in 1875. He was reelected to seven succeeding Congresses.

During his eight terms in the House, Bill Cramer established a reputation for being one of our nation's foremost experts on transportation and public works issues. His career in Congress culminated with his service as the Ranking Republican on the House Public Works Committee, its Subcommittee on Roads, and on the Federal Aid Highway Investigating Committee. He also served as a member of the Judiciary Committee.

Following his retirement from the House, Bill Cramer was a distinguished professor and lecturer at The St. Petersburg Junior College, where he taught very popular classes in politics and government.

He is the father of three sons: William C., Jr., Mark C., and Allyn Walters. He and his wife Sara currently live in St. Petersburg.

Mr. Speaker, Bill Cramer is a friend and mentor who served our nation with great honor in this House. The enactment of this legislation will leave in St. Petersburg, the hometown he so dearly loves and served, a lasting tribute to his service, his patriotism, and his devotion to our nation.

PERSONAL EXPLANATION

HON. JIM RYUN

OF KANSAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 16, 2002

Mr. RYUN of Kansas. Mr. Speaker, regretfully, last night I was unable to return to the House to vote on H.R. 3482, H.R. 4755, and H.R. 3479. I ask unanimous consent that the record reflect that had I been present for the votes, I would have voted no on H.R. 3479, and would have voted yea on H.R. 4755 and 3482.