

in savings and a loan of \$10,000. After fifty years of devotion and hard work, Bob is officially retiring as an independent distributor, although he frequently consults with his sons who now own the company.

Mr. Speaker, I stand before you to offer my appreciation to Mr. Wallace for being an outstanding inspiration for the Wallace Oil Company. I wish him the best with all of his future endeavors and applaud the many efforts he has made over the years to provide leadership and guidance to the La Junta community—he is an invaluable citizen! I wish Bob the best of luck in his future endeavors.

H.R. 4691

HON. JOSEPH R. PITTS

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 18, 2002

Mr. PITTS. Mr. Speaker, last week, the Health Subcommittee held a hearing on the Abortion Non-Discrimination Act, H.R. 4691. The bill clarifies existing federal conscience protections that prohibit discrimination against health care entities that object to participating in abortion. This bill has the support of both faith-based and secular health care providers.

At the hearing, the subcommittee heard testimony from Karen Vosburgh, who serves on the board of Valley Hospital in Palmer, Alaska. Valley Hospital is a private non-sectarian hospital. But in 1997, the Alaska Supreme Court held that Valley Hospital was a “quasi-public hospital” and ordered it to open its doors for elective second trimester abortions.

Most hospitals do not participate in abortions. According to the Alan Guttmacher Institute, 86% of all hospitals choose not to get involved in abortions. These are religious hospitals of all denominations, non-religious private hospitals, and even public hospitals. There is a reason why: abortion is not health care. It is elective surgery that takes the life of an unborn child.

Abortion advocates are trying to force hospitals to perform abortions against their will. This is wrong. No hospital should be forced to take the life of an unborn child against its will. Religiously-affiliated hospitals and hospitals that simply don't want to offer the elective procedure shouldn't have to.

I hope the Congress acts quickly to pass the Abortion Non-Discrimination Act, and I urge my colleagues to co-sponsor this legislation. I submit for the record a list of supporting organizations, and letters we have received from two of these organizations: the Catholic Health Association, and the Association of American Physicians and Surgeons.

THE CATHOLIC HEALTH ASSOCIATION
OF THE UNITED STATES,

June 17, 2002.

HON. MICHAEL BILIRAKAS,
Chairman, Subcommittee on Health, Committee on Energy and Commerce, Washington, DC.

DEAR CONGRESSMAN BILIRAKAS: On behalf of the Catholic Health Association of the United States (CHA) I am writing to express our support for HR 4691, the Abortion Non-Discrimination Act. Provisions in this legislation would provide Catholic Health providers safeguards to continue operating in a manner consistent with their moral beliefs and principles.

Increasingly, Catholic and other faith-based health care providers have come under

attack for not offering so-called “reproductive health services (e.g.—abortions, etc). In recent years, we have seen orchestrated campaigns to force Catholic health providers to offer services that conflict with our values and moral principles. These campaigns have led to legislation in several states and localities that could force Catholic hospitals to close or substantially reduce their services to the community. These threats continue and fundamentally effect the ability of Catholic Providers to deliver services to their communities.

In several states and for certain federal programs, Catholic and other faith-based providers have been able to secure “conscience clause” protection against mandatory provisions of objectionable services. Unfortunately, these approaches are often inadequate and require “year after year” reauthorization. They fail to provide permanent protection and assurances the Catholic providers can continue to operate unencumbered.

In addition to supporting HR 4691, CHA supports legislative efforts to establish a permanent and comprehensive federal conscience clause. We look forward to working with you and the Committee to achieve these ends.

Sincerely,

REV. MICHAEL D. PLACE, STD,
President and Chief Executive Officer.

ORGANIZATIONS SUPPORTING THE ABORTION
NON-DISCRIMINATION ACT (ANDA) H.R. 4691/
S. 2008

Americans United for Life
Association of American Physicians and Surgeons
Catholic Health Association
Catholic Medical Association
Christian Coalition
Christian Legal Society
Christian Medical Association
Christus Medicus
Concerned Women for America
Democrats for Life of America
Eagle Forum
Ethics & Religious Liberty Commission,
Southern Baptist Convention
Family Research Council
Feminists for Life of America
Focus on the Family
Lutherans for Life
National Council of Catholic Women
National Organization of Episcopalians for Life
National Right to Life Committee
Presbyterians Pro-Life
Seamless Garment Network
Seventh Day Adventists, World Headquarters
Susan B. Anthony List
Traditional Values Coalition
United States Conference of Catholic Bishops

HONORING ANDREA MYSLENSKI

HON. DONALD A. MANZULLO

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 18, 2002

Mr. MANZULLO. Mr. Speaker, I rise today to recognize Andrea Myslenski, a special young girl in my Congressional district who suffers from a very rare and serious disease, “Post Viral Dysautonomia.” This is a condition that affects the autonomic nervous system and renders her very tired and unable to go to school or have the normal social life of a 15-year old girl. Andrea was home tutored due to

Dysautonomia the second half of eighth grade. She completed all of her work and was awarded the Presidential Award for academic achievement. Andrea began 9th grade with the hope of completing the school year, but a virus caused a relapse of Dysautonomia. She was unable to attend school in October, 2001, and home tutored for the rest of the school year.

Dysautonomia is manifested by symptoms of fatigue, weakness, forgetfulness, brain fog, and mood swings, etc. It has been a very trying time for the family. Perhaps one of the biggest challenges was actually making a definitive diagnosis of Dysautonomia. It took several visits to multiple doctors before a definitive diagnosis was made, making it quite apparent why it is called an “invisible disease.”

Mr. Speaker, I wish to extend my support to Andrea and many children like her that suffer from Dysautonomia. It is my hope that we become educated about this disease and become strong supporters for the research and treatment of this invisible illness. I am proud to have Andrea as a member of my district and hope that one day a cure for this disease will be found.

COMMENDING THE U.S.-ASIA
INSTITUTE

HON. MICHAEL G. OXLEY

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 18, 2002

Mr. OXLEY. Mr. Speaker, I would like to bring to the attention of the House of Representatives the work of the U.S.-Asia Institute, which plays an important role in improving understanding between the United States and China. This nongovernmental organization promotes an ongoing exchange of views between policy makers in the U.S. and China.

Since 1985, a principal vehicle for furthering this dialogue has been the congressional staff delegation visits to the People's Republic of China organized by the U.S.-Asia Institute and hosted by the Chinese People's Institute of Foreign Affairs. These official visits serve to increase awareness, knowledge, and understanding of U.S. and Chinese policies. The 50th delegation will travel to China in August 2002.

To commemorate this milestone, the U.S.-Asia Institute is hosting special events in Washington, D.C. in July 2002. The Chinese People's Institute of Foreign Affairs will reciprocate by hosting special events in Beijing in August 2002.

Since its inception, this program has hosted more than 400 congressional staff members who have traveled throughout China—from Heihe in the north on the Russian border to Hainan Island in the south; from the dynamic coastal cities of Shanghai and Guangzhou to the remote city of Urumqi, an oasis on the ancient Silk Road; from Tibet to Kunming to Beijing and other places in between. Over 150 congressional office and committee staff members have benefitted from fact-finding and the opportunity to discuss in depth issues of mutual interest to our great nations. The progress of the U.S.-Sino relationship rests on dialogue and engagement, and this program provides participants with an unparalleled first-hand view of China, its culture, its government, and its people.