year and 10 million or so with severe mental illness, they all have families. I hope those families wake up and speak up. I hope they contact their Member of Congress.

I know that mental illness can be treated, but it cannot be treated if we ignore it and it gets worse. I don't want more tragedies here. I hate to wish any of these tragedies on my colleagues in Congress, but I know it will happen. We will be here again for moments of silence. We will have more Members that face this suffering in their own families and in their communities, and we should not allow that.

I hope that soon we can call forth H.R. 2646, the Helping Families in Mental Health Crisis Act, because to delay it is to cause more harm, to deny it is to cause more death. Let's finally do something to help turn this problem around with mental health in America.

Mr. Speaker, I yield back the balance of my time.

□ 1830

WOMEN'S RIGHTS ARE HUMAN RIGHTS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2015, the gentlewoman from New Jersey (Mrs. WATSON COLEMAN) is recognized for 60 minutes as the designee of the minority leader.

GENERAL LEAVE

Mrs. WATSON COLEMAN. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and to include extraneous material on the subject of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Jersey?

There was no objection.

Mrs. WATSON COLEMAN. Mr. Speaker, next Tuesday the Supreme Court will take up Whole Woman's Health v. Hellerstedt, which is a case that challenges Texas' outright offensive effort to strip women of their right to choose.

Last night the Fifth Circuit Court of Appeals allowed a similar law to move forward in Louisiana, all but guaranteeing the closure of three of four abortion clinics in that State unless the Supreme Court intervenes there as well.

The men who have passed these laws—to be very clear, the Texas State Legislature is 80 percent male, and Louisiana has just made it up from dead last this year at 85 percent—claimed that it would increase the medical accountability and safety of facilities that provide abortion.

That is the new message, the new veil, that covers these laws with the air of legitimacy: We want to make your abortion safer. So every doctor needs to have admitting privileges at a local hospital and every clinic needs to function like an emergency center.

It sounds logical until you hear what the folks behind these laws have to say after the laws have passed.

In Texas, then-Governor Rick Perry said: ''The ideal world is one without abortion. Until then, we will continue to pass laws to ensure that they are as rare as possible.''

One of the authors of the bill said that she was especially proud that ''Texas always takes the lead in trying to turn back what started with Roe v. Wade.''

The first problem here is the same one we have dealt with over and over and over and over again, because Roe v. Wade isn't something you turn back. It wasn't an executive order. It wasn't even a law passed by Congress.

It was a legal challenge 40 years ago that required the Supreme Court to consider whether or not women had the right to make decisions about their bodies. They decided and set a precedent that every woman in this Nation had the constitutional right to an abortion.

What is more, the Court made it clear that States cannot use laws to create an undue burden for women who are seeking to exercise that right. The Court affirmed that decision once more in 1992.

Women in Texas now have firsthand experience of what happens when States ignore the Supreme Court. From what I can see, there is no way that the Texas law can be considered anything other than an undue burden, which brings us to the second problem: There is absolutely no logical, medical reason to suddenly require these clinics to meet the standards of a hospital.

These laws are opposed by a host of leading medical groups, including the American Medical Association and the American College of Obstetricians and Gynecologists, professionals who know better than anyone what kinds of skills and resources should be necessary for an abortion, which is one of the safest medical procedures out there.

I find it incredibly hard to believe that whole organizations of physicians would oppose any of these laws if they really did make clinics safer, Mr. Speaker, but I digress.

In Texas, the full implementation of the bill that is being challenged next week would force more than 75 percent of abortion clinics in that State to close.

In fact, with the limited implementation they have had to date, the number of clinics has been cut in half. If it is allowed to go into effect, only 10 clinics will remain to serve the 5.4 million Texas women of reproductive age.

What is even worse is that, while these laws are being masqueraded as efforts to make abortions safer, they are forcing more women down the dangerous path of attempting to end their pregnancies on their own.

A study by the Texas Policy Evaluation Project found that women who report barriers to abortion are more likely to self-induce an abortion, putting their lives at risk in the process. This sounds like 1955, not 2016.

Mr. Speaker, these laws are an absolute farce, and it is time to stop the sham. Women deserve to make the choices that work for them. If that means having an abortion, they should be able to do it safely, without traveling hundreds of miles or without waiting weeks to be seen.

My colleagues and I are here on the floor tonight because we stand with the women in Texas, with the women in Louisiana, and with the women across this country, women who want to make their own decisions about when, where, and how to make decisions that will change their lives, women whose voices are seldom represented in the legislative bodies, which are filled with men who are ready to take away their rights.

It is now my pleasure to yield to the illustrious Member from the State of Texas, someone who has been a constant fighter for everyone's rights, including women's rights, Congresswoman JACKSON LEE.

Ms. JACKSON LEE. I thank the distinguished gentlewoman from New Jersey, and I thank her for her leadership. As well, I thank my colleagues who are here on the floor of the House who have joined us.

Mr. Speaker, let me associate myself with the comments by the gentlewoman from New Jersey as they relate to Louisiana.

Let me be clear. As I stand here as a constituent of the State of Texas, as a Representative of the State of Texas, and as a woman who lives in Texas, that Texas State Law HB2 has led to the closure of more than 20 abortion facilities in the State, taking the total number of providers down from 40 to 19, its true purpose being to take away women's rights to make their own healthcare decisions.

It could not be more blatant, again, to take away every woman's right to choose. No one stands on this floor tonight to promote and coddle abortion, but we do stand on the floor to protect a woman's right to choose her health and to protect her sacred right of making such decisions with her God, her family, and her physician.

How do HB2 and other bills have the right to interfere with that?

Let me also cite for you that a U.N. working group concluded that women in the United States inexplicably lag behind international human rights.

Pointing to data and research on public and political representation, economic and social rights, and health and safety protections, experts in the U.N. working group boldly acknowledged that there is a myth that women in the United States already enjoy all of the expected standards of rights and protections afforded under America.

Isn't that shameful? Under America, we are still denied our rights.

The reality is women in the United States are experiencing continued discrimination and daunting disparities that prevent the true ability for them to fully participate as equal members of society.

We stand here this evening to acknowledge one striking issue that will

be argued at the Supreme Court next week, and that is this case—HB2—that has shut down clinics and has denied to women that any other access be open to them with this particular legislation. So we are advocating, as it goes to the Supreme Court, that this is an issue of human rights equals women's rights.

In America, we face a real problem of hypocrisy. Isn't it interesting that we say that we believe in the rights of families and in the sacredness of one's religion and in one's choice between one's family, doctor, and God, yet, Danielle Deaver was denied an abortion even as the uterus crushed the fetus.

This family wanted children. This family wanted to be able to have this child. Unfortunately, due to medical reasons, this young lady needed to have this baby taken. She was 22 weeks pregnant.

The real crime is that this was not allowed to take place in a legal manner because just 1 month earlier Nebraska had enacted the Nation's first fetal pain legislation that banned abortions after 20 weeks. It is not one that she wanted. It is not one that she desired.

It was because of health care and need and the fact that a tragedy had happened to her and her family; yet, she was denied. Women's rights equal human rights.

With respect to the Texas case, the Supreme Court is scheduled next Tuesday to hear the case of Whole Woman's Health v. Hellerstedt, which will challenge the Texas law that has stripped thousands of women of access to their constitutional right.

Whole Woman's Health is the most consequential reproductive case in the last two decades that challenges the longstanding precedent of upholding a woman's constitutional right to access to safe and legal abortion services.

It is not a supporting of abortion, but a supporting of the right to choose. It is protective of women's health, of the life of the mother, and of the fact that you engage with your family, with your God, and with your physician.

Ever since the landmark Roe v. Wade decision, which was affirmed again in 1992 in Planned Parenthood v. Casey, the U.S. Supreme Court has made clear that women have a constitutional right to safe, legal abortion care and that States do not have a right to unduly interfere.

The Casey decision explained these matters involving the most intimate and personal choices a person may make in a lifetime, choices that are central to personal dignity and autonomy and that are central to the liberty protected by the 14th Amendment.

The so-called experts who testified in favor of HB2 have been discredited by multiple Federal courts and have been exposed for submitting testimony written by an anti-abortion activist with no medical training.

Texas' HB2 has led to the closure of more than 20 abortion facilities in the State, taking the total number of providers down from 40 to 19.

Mr. Speaker, as I close, let me give an additional personal anecdote that has taken place in the State of Texas. That is, of course, the masquerading of going into the Planned Parenthood offices that have provided these clinics and that have provided health care to college students and to those in rural communities where there are no doctors, OB/GYNs, or facilities to handle the medical needs of these women.

Remember what I said. Women's rights are human rights, and human rights are women's rights, so said by then-First Lady Hillary Rodham Clinton. It is true today.

As I have shown in documents, the United Nations working group has challenged whether or not we are providing women the same rights in America as men. That is a daunting question and an unfortunate answer because the U.N. working group has said no.

In the backdrop of this great discussion and of the Texas HB2, we had the circumstances of people falsifying who they were, stealing the ID of this person's high school classmates and imitating that he was looking for fetuses for research.

Interestingly enough, all of them were calling for the indictment of the Planned Parenthood personnel. Yet, an unbiased grand jury in Texas did not indict those innocent persons who were having a discussion about what was legal, but they indicted those who falsified their documents and tried to mislead people.

Again, this case will be argued in the backdrop of so many who are trying to undermine women's rights. I will continue to work with my colleagues to find ways to address the illogical, unfair, and unjust disparity by reviewing and responding to unwarranted restrictions that result in the disparate access to these constitutionally protected rights.

One day I hope that we will learn and have as our constitutional premise that the Constitution works and that women's rights are human rights.

Mr. Speaker, I thank the Gentlelady for yielding, and I commend the Progressive Caucus for standing firm in defense of our hard-fought women's rights, which in truth, are constitutionally protected American rights.

We face a real problem in America with hypocrisy.

As a country founded on principles of liberty, justice and equality, and a global leader in formulating international human rights standards, the United States fails to meet these basic standards for women who are denied equal access to legal rights and protections.

The United Nations Working Group on Discrimination against Women in Law and Practice (U.N. Working Group) recently issued a sobering statement and assessment detailing a picture of women's missing rights in America.

Upon visiting several states throughout the country, including my home state of Texas, the U.N. Working Group concluded that women in the United States inexplicably lag behind international human rights standards.

Pointing to data and research on public and political representation, economic and social rights, and health and safety protections, experts in the U.N. Working Group boldly acknowledged that there is a myth that women in the United States already enjoy all of the expected standards of rights and protections afforded under America.

The reality is women in the United States are experiencing continued discrimination and daunting disparities that prevent the true ability for them to fully participate as equal members of society.

One of the most alarming deficiencies for women in America is the inability to access basic health care and the imposition of devastating barriers to reproductive health and rights.

Too many women are suffering dire and deadly consequences.

Between 1990 and 2013, the maternal mortality rate for women in the U.S. has increased by 136%.

Black women are nearly 4 times more likely to die in childbirth, and states with high poverty rates have a 77% higher maternal mortality rate.

Our global experts and allies acknowledge that even though women's reproductive rights in America are constitutionally protected, access to reproductive health services are severely abridged by states imposition of sweeping barriers and restrictions.

For instance, in many states, women must undergo unjustified and invasive medical procedures; endure groundless waiting periods; be subjected to harassment, violence or other threatening conditions that remain constant throughout all reproductive health care clinics; and forced to forgo treatment or engage in lengthy and costly travel due to closure of clinics faced with burdensome licensing conditions.

These restrictions disproportionately discriminate against poor women.

The United States can and should do better!

It is unacceptable that women in America are facing a health care crisis so dire that the global community is denouncing it as a human rights violation.

Sadly, the direction States are taking will only further dismantle women's access to affordable and trustworthy reproductive healthcare.

While clinics are shutting down at drastic rates throughout the country, devastating restrictions and barriers imposed throughout Texas strike at the core of this abomination.

A Texas statute known as HB2 (House Bill 2), was enacted several years ago under false claims to promote women's health, when in fact it only set in motion dangerous restrictions on women's access to reproductive health care.

In addition to constant attacks on funding for reproductive health care clinics, abortion providers in Texas were forced to undergo impossible million dollar renovations and upgrades.

Denying hundreds of thousands of women health care services in Texas, nearly half of all reproductive health care clinics were forced to shut down, and now only 10 remain in the second largest state in the country.

Taking an important step toward restoring the constitutional rights of millions of women, the Supreme Court recently granted certiorari of Whole Woman's Health v. Cole to decide the fate of these remaining clinics and the

lives of women in Texas, and throughout the nation.

I am proud to say that I, and a number of my colleagues, signed on to a number of amicus briefs submitted to the Supreme Court, detailing the hardship and injustice Whole Woman's Health v. Cole presents.

While we await the decision of the Supreme Court, in Whole Woman's Health v. Cole, we can only hope that the court will help turn the tide of attacks and diminution on women's rights.

No woman in America should be denied the dignity of being ability to make choices about her body and healthcare.

Access to safe, legal and unhindered healthcare must be realized by all women.

These simple facts can no longer be denied, and hypocrisy can no longer be tolerated.

A woman's right to choose to have an abortion is a constitutionally protected fundamental right.

More than 40 years ago in the landmark decision in Roe v. Wade, 410 U.S. 113, (1973), the U.S. Supreme Court ruled 7–2 that the right to privacy under the Due Process Clause of the 14th Amendment extends to a woman's decision to have an abortion.

More recently, in Planned Parenthood v. Casey, 505 U.S. 833 (1992), the Supreme Court upheld Roe v. Wade and further explained that states could not enact medically unnecessary regulations meant to create substantial obstacles for women seeking abortion services.

Yet, fairness and access to exercise constitutionally protected fundamental rights is trampled on and denied to millions of women.

We cannot ignore the hypocrisy of imbalanced protection and access to fundamentally protected rights for women in America when it is easier to purchase and lawfully possess a firearm—even for a person on the terrorist watch list—than it is for a woman to exercise her constitutional right to terminate a pregnancy.

Mr. Speaker, this is neither fair nor right and it should not be rewarded.

As our nation continues to push back against horrific acts of violence at the hands of dangerous and irresponsible gun owners and gun dealers, and our nation's number one provider of women's healthcare continues to experience violent and devastating attacks on its services and facilities, it is time we find common ground as we look to resolve these polarizing issues that have all too often collided.

A woman's right to choose to have an abortion and an individual's right to possess a firearm are both constitutionally protected fundamental rights.

I will be working with my colleagues to find ways to address this illogical, unfair and unjust disparity by reviewing and responding to unwarranted restrictions that result in disparate access to these constitutionally protected rights.

Namely, if a woman is required to wait several days, undergo a physical examination, receive counseling and education about alternative options before making the decision to terminate a pregnancy, an individual purchasing a deadly weapon should be required to jump through the same restrictive hoops and apparent safety measures.

I hope one day we can come to an agreement in America that it should not be harder for a woman to exercise her fundamental right to choose than it is for a person on the terrorist watch list to lawfully purchase and possess firearms.

At a minimum, I urge my colleagues to take a hard look at our constitutional protections and founding principles to resolve the growing crisis and unacceptable conditions of inferiority in America.

Mrs. WATSON COLEMAN. I thank the Congresswoman.

Mr. Speaker, I yield to the gentleman from Illinois (Mr. QUIGLEY).

Mr. QUIGLEY. Mr. Speaker, let me thank Congresswoman WATSON COLEMAN and my pro-choice colleagues for inviting me to participate in this very timely and important conversation.

As we await to hear the Supreme Court's oral arguments next week in the case of Whole Woman's Health, we must reflect on not only the serious implications of this particular case, but on the attacks on choice that have happened across the country this past year.

The case against Whole Woman's Health threatens to take the number of clinics in Texas down from 19 to just 10 for the 5.4 million women of reproductive age in Texas.

It will also set a legal precedent for years to come—perhaps decades—and it will shape the continued debate on a woman's right to choose.

□ 1845

Clearly, this unacceptable assault on women's health places an undue burden on the women of Texas when accessing abortion and family planning services.

I was proud to sign onto the Amicus brief with 162 congressional colleagues in support of Whole Woman's Health. This case, in particular, is a high profile and extreme example of the attacks that are becoming all too common across the United States.

While abortion still remains legal in the years since Roe v. Wade, opponents of choice have attempted with varying degrees of success to chip away at a woman's right to choose, this despite the fact that abortions are at their lowest rates since Roe.

Last year, we saw ideological attacks against Planned Parenthood from anti-choice activists attempting to mire the organization in scandal and force its closing. Those attacks stemmed from the illegally obtained and questionably edited so-called sting videos filmed by these same anti-choice activists.

Unsurprisingly, Planned Parenthood has been cleared of any wrongdoing in every State that has conducted an investigation. And to top it off, a grand jury in Missouri has indicted those responsible for filming the videos. It goes to show this campaign against Planned Parenthood has been nothing less than a fraud.

While I fundamentally support a woman's right to choose, it is important to point out that the clinics forced to close in Texas and across the U.S. serve women in ways far beyond providing safe abortions. In many cases, especially for low income and minority communities, these clinics serve as a primary healthcare provider. The services they provide include birth control, STD testing, cervical screenings, mammograms, counseling, and health education.

It is crucial that we understand reproductive rights and choice is not a women's issue. It is a civil rights issue, and it is an American issue.

In the City of Chicago, which I represent, women have widespread access to reproductive health services. But women in neighboring States like Indiana are often forced to cross State lines to find a clinic where she can have a safe abortion. This reality is unacceptable. Civil rights should not be dependent upon your ZIP Code.

The decision in Whole Woman's Health will ultimately hold national implications. As a man, I am proud to stand up for choice. As a male Member of Congress, I take my responsibility to protect choice for women very seriously.

Statistics show women's economic output is dramatically impacted for the better when they determine the timing and spacing of their pregnancies. When she is able to plan pregnancy, a woman is more likely to advance in education and the workforce. Conversely, unplanned pregnancies too often force women to leave school and to delay or abandon career ambitions outright in order to care for children before they are ready and with limited support and resources.

In order for our society to ever truly be equal, women must have control of their bodies and determine with their partner if and when they want to have children. Here in Congress, most of us were afforded the right to plan our families. Should we deny this right to the constituents we serve?

The future of millions of young women depend on the decision to be handed down in cases like Whole Woman's Health, and it is my sincere hope that the Court remains consistent in recognizing a woman's right to privacy and protects her right to make her own choices about her health.

Mrs. WATSON COLEMAN. Mr. Speaker, I yield to the gentlewoman from Washington (Ms. DELBENE), who is a member of the select panel that will undoubtedly be examining some of these issues.

Ms. DELBENE. Mr. Speaker, I thank the gentlewoman from New Jersey for yielding.

Mr. Speaker, 43 years ago, the Supreme Court ruled that women have a constitutional right to decide whether and when to have a child. Americans overwhelmingly think that was the right decision, and I agree.

But according to Bloomberg, at no time since 1973 has a woman's access to reproductive health care been more dependent on her income or ZIP Code. Politicians across the country are passing dangerous laws to block women from exercising their constitutionally protected right to choose, and their efforts are working.

That is why the case before the Supreme Court is so important. As the Justices weigh the Whole Woman's Health case, I hope they recognize that these shameful attacks undermine Roe v. Wade, put women's health at risk, and must be struck down. A woman's right to make her own healthcare decisions means nothing without the ability to exercise that right.

If the Court upholds these harmful laws, it could pave the way for similar restrictions at the Federal level, and Republicans are already trying. We cannot let that happen.

Women deserve better. They deserve the freedom to make their own healthcare choices.

Mrs. WATSON COLEMAN. Mr. Speaker, I yield to the gentleman from Rhode Island (Mr. CICILLINE).

Mr. CICILLINE. Mr. Speaker, I thank the gentlewoman from New Jersey for leading this Special Order hour on this very important issue.

As my colleagues have mentioned, the Supreme Court is scheduled to hear Whole Woman's Health v. Hellerstedt next Tuesday, challenging HB2, a Texas law that has already led to the closing of more than 20 abortion providers in the State.

Now, this is just the most recent example of the attack which is underway all across this country on women's health, not just in the State of Texas, but in many other places around our country. As was just mentioned, politicians are passing laws and enacting regulations to deny women full reproductive health care.

In fact, just last Sunday, Ohio Governor John Kasich signed a law defunding Planned Parenthood. During his time in office, half of Ohio's abortion clinics have closed.

One in three women will have to make a decision in their lifetime if an abortion is the right decision for them. I am very proud to be a member of the Pro-Choice Caucus in the Congress. I know this is an extremely personal decision for women, a decision that should be made between a woman and her physician, and a decision the government has no right to intrude upon, a constitutionally protected right as established in our law. It is absolutely critical that women in every part of this country have access to full reproductive health care, including safe abortion services.

If the Court upholds Whole Woman's Health v. Hellerstedt, there will be only ten clinics available to the women in the State of Texas. Some would have to travel 7½ hours roundtrip to get the health care that they need.

This is settled law in our country. The Court addressed this issue in Roe v. Wade and again in Planned Parenthood v. Casey. It reminds us of the importance of the decision that our Supreme Court will make in connection with this case that they will hear on Tuesday.

Doctors are being required, under Texas provisions, to affiliate with nearby hospitals, and it also limits abortions to ambulatory surgical centers. These measures are designed to reduce or even eliminate, in some circumstances, access to abortion services. Although there are arguments made that these are medically necessary or they are, in fact, intended to improve women's health, Nancy Northup, who is the president of the Center for Reproductive Rights, said it best when she said, the ''laws . . . pretend to be about women's health but actually are designed to close clinics.'' And that is exactly what they intend to do.

These regulations and requirements are very disputed medical value. There are things like limits on nonsurgical drug-induced abortions, mandated building standards for clinics, or 2- or 3-day waiting periods. All of these things are intended to infringe upon a woman's right to choose and to make it more difficult for women to access full reproductive health care.

We all have responsibility in the Congress to stand up against this. I am proud to join my colleagues tonight to say that we will continue to fight to ensure that women have access to all of the reproductive health care they need and that we will resist any effort to infringe upon this important constitutional protection.

Mrs. WATSON COLEMAN. Mr. Speaker, I yield to the gentlewoman from North Carolina (Ms. ADAMS).

Ms. ADAMS. Mr. Speaker, I thank the gentlewoman from New Jersey for her leadership.

It frightens me that in 2016, we are still fighting the same politically motivated battles to roll back women's rights. It has been 43 years since the landmark Supreme Court decision in Roe v. Wade made abortion a constitutional right.

Year after year, GOP lawmakers and anti-choice extremists have tried to tear it down. States like Texas have passed egregious laws to disenfranchise women and infringe on their ability to access safe and legal abortions.

Their State law has cut the number of abortion providers in Texas in half, increasing delays and severely limiting access and, frankly, punishing women for exercising their civil liberties.

This obvious war on women has got to stop. No law should control a woman's right to make decisions about her own body—no government, no legislature, no Congress. A woman's personal decision should be between her and her doctor and nobody else. Every woman deserves equal access to all forms of safe and affordable reproductive health.

As the Supreme Court prepares to hear this case, I will continue to stand with women in North Carolina and women across the country in the fight to protect a woman's right to choose.

Mrs. WATSON COLEMAN. Mr. Speaker, we thank you for this opportunity to raise what is a very important issue in 2016. Women are being attacked on several fronts, whether it is on cases that are being brought before courts or whether it is in this House. We have got to recognize that this decision, the decision for a woman to make with regard to her reproductive rights, have already been established. And we as Congress and we as a society of lawmakers and policymakers need to do all that we can to facilitate those rights to ensure that we do not discriminate against people. To discriminate against women in this regard is illegal, and it is unacceptable.

It is time for us to recognize our responsibility to be stewards of the laws which have been put before us and to uphold the Constitution that we have pledged to support and to uphold and to recognize that the abridgement of a woman's right is the abridgement of a civil right, and that is unacceptable.

Mr. Speaker, I yield back the balance of my time.

GUANTANAMO BAY

The SPEAKER pro tempore (Mr. KATKO). Under the Speaker's announced policy of January 6, 2015, the Chair recognizes the gentleman from Pennsylvania (Mr. PERRY) for 30 minutes.

GENERAL LEAVE

Mr. PERRY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous materials on the topic of this Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

Mr. PERRY. Mr. Speaker, the safety of Americans, the security of America, should never be jeopardized for any reason, but certainly not simply for the purpose of fulfilling a campaign pledge.

The President recently released a plan about closing Guantanamo Bay, and it demonstrates to me—and I think to the American people—that his plan is misguided, as well as his priorities.

The proposal to close Guantanamo proves that his priority lies in leaving behind a legacy rather than protecting the American people and American national security. As a matter of fact, it presents nothing more than another attempt to fulfill a campaign promise and distracts, based on the timing, from the administration's failure to defeat ISIS.

Perhaps it explains why the administration missed a separate congressionally mandated deadline last week for a plan to counter radical Islamic extremism. So he missed that deadline but was on time for an incomplete plan to close Guantanamo and the detention facility for terrorists that remains on that post.

Now, Congress is a coequal branch of government. It is coequal to the President, equal in power, equal in representation of America's interests, and it