H.R. 91, H.R. 203, H.R. 313, H.R. 2499, on and on and on, not bills that we have passed here in the House, though we have, but bills we have passed in the House, bills that have been passed in the Senate, bills that the House and Senate have come together on, bills that have been sent to the President's desk, and bills that the President has signed into law, making a difference.

□ 1200

Mr. Speaker, reducing the size and scope of government. H.R. 1626, H.R. 2029, H.R. 2048, and the list goes on and on and on. Doing things together for our bosses back home because they are going to make a difference.

Mr. Speaker, creating jobs and expanding economic opportunity. Again, H.R. 2029, H.R. 22, H.R. 1000, S. 535. Mr. Speaker, yes, there are even some bills that originated in the Senate that are delivering for the American people. I am proud to say most of them start with H.R., but there are even a few Senate bills in there. Good ideas from the other body that we took on, that we made better, that we sent to the President's desk, that he signed.

Defending America's freedom and security, patient-centered healthcare solutions. Mr. Speaker, everybody talks about the President's healthcare bill. You are either for it or you are against it. It is a divisive issue. Nobody talks about the fact that there are parts of the President's healthcare bill that I believe are broken from the hard core right and that my friends on the left believe are broken, too. And so we have come together not once, not twice, not three times, not five times, but almost a dozen times to repeal parts of the President's healthcare bill that we all agreed were not serving the American people.

Mr. Speaker, at the end of the day, it is not about who can be a good Republican or who can be a good Democrat. It is about who can be a good public servant, and that is never going to make the front page of the newspaper. It is never going to be a part of this Presidential election cycle. It is never going to be in a commercial on TV talking about how successful we are when the cameras go off, when the labels come off, and when we are focused on what we all came here to do, and that is to make a difference.

Mr. Speaker, we are going to keep going on through this election cycle. There is going to be more division, there is going to be more strife, and there is going to be more finding out who is to blame and whose fault it is.

I have gotten to know the men and women in this Chamber, Mr. Speaker. I confess, there were some of them that I wanted to dislike from the get-go. Oh, I wanted to dislikes them. I had seen them on TV, and I knew they didn't have any merit, didn't have any business being here, didn't have any desire to serve the American people.

Mr. Speaker, my confession here today is I was wrong. I was wrong. There are colleagues on the other side of the aisle with whom I disagree with about virtually everything, but for that one small issue on which we find some common ground, they will roll up their sleeves and they will bleed with me and sweat with me until we find a way to make a difference for families back home in their district and mine.

Mr. Speaker, there are folks on the other side who come down here on this floor and rail and rail and rail, and it is every partisan tagline that you could imagine, but when the camera goes off, they roll up their sleeves and they get to work on making a difference for their district and for mine.

Mr. Speaker, my voice is not loud enough to drown out all the division that is in a Presidential election campaign. Mr. Speaker, my voice is not loud enough to drown out all the commercials going on all over the country and all the headlines all over the country that talk about how Washington is a big cesspool, and it is broken, and we should just give up on self-governance altogether, but not me. My voice may not be loud enough, but it will be tireless.

I believe in self-governance. I believe that my district has priorities that are going to be different from priorities in another district, and that is okay. I believe that division sometimes brings out the best of ideas, and that is okay. I believe that my colleagues believe that there is no challenge too big for America to confront when Americans confront it together.

I do not know what November holds, but I know this: We have the best system of governance on the planet. It is not easy. It is not clean. It is not simple. But when you put the American people in charge, it is effective.

Mr. Speaker, you are not going to sell good newspapers talking about the difference that we make together in self-governance, but we are going to make that difference together. Folks here didn't come for the headlines. They came to do the things that mattered, and I am proud to work with folks on both sides of the aisle to get that done.

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

MESSAGE FROM THE SENATE

A message from the Senate by Ms. Curtis, one of its clerks, announced that the Senate has passed without amendment a bill of the House of the following title:

H.R. 2908. An act to adopt the bison as the national mammal of the United States.

The message also announced that the Senate has passed bills of the following titles in which the concurrence of the House is requested:

S. 1635. An act to authorize the Department of State for fiscal year 2016, and for other purposes.

S. 1875. An act to support enhanced accountability for United States assistance to Afghanistan, and for other purposes.

S. 2845. An act to extend the termination of sanctions with respect to Venezuela under the Venezuela Defense of Human Rights and Civil Society Act of 2014.

IMPORTANT ISSUES IN THE NEWS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2015, the gentlewoman from Texas (Ms. JACKSON LEE) is recognized for 60 minutes as the designee of the minority leader.

Ms. JACKSON LEE. Mr. Speaker, as I listened to my good friend—and I think it is important that we note that our colleagues are good friends and Americans who care. That is why I have come to the floor to challenge the hearts and minds of my colleagues, for my discussion today, as the gentleman that preceded me, will be in the CONGRESSIONAL RECORD for my colleagues to peruse and for the American people to peruse.

I do take note of the fact, as the gentleman recounted the history of budgets—and I might say that I, too, spent time working on the 1997 budget. I have been privileged to serve from that time when a bipartisan effort—with everyone, in essence, putting down their obstructionist perspectives—generated one of the best health insurance programs for our children, called CHIP, that the Nation has seen, that millions of American children are now insured.

But it is important to note that the present Republican majority failed to put a budget on the floor for us to vote up or down, primarily because there were Members in their own conference that would not vote because the cuts were not sufficient, even though trillions of dollars were cut from education and many other services that the American people need.

Now, I know that the American people are very independent. There are States that have worked very hard to ensure that their particular citizens in their State are well taken care of, but the one thing I know about the Federal Government, it is the umbrella on a rainy day.

I will go home to my district, having suffered the terrible impact of major flooding, 20 inches of rain devastating young families, devastating people who flooded just less than a year ago in May of 2015. Oh, we pulled ourselves up by our bootstraps, tore out carpet, threw out all of our personal possessions, but we needed the umbrella, FEMA, that is en route to my district now to help those who cannot help themselves or those who had never flooded in 50 years. So we cannot discount the role of the Federal Government.

The United States military is the finest in the world. The Affordable Care Act, yes, needs to be fixed in certain areas, but 20 million Americans have gotten insurance, and more Americans have private insurance because they said, you know what, it is the right thing to do.

So it troubles me when we talk about a budget that should have been put on the floor that was a combination of the efforts of Democrats and Republicans, and when we listen to the President and work together, but no budget has come because they realize the draconian budget that is slashing government, throwing people out in the streets is not a budget that America can even tolerate. They could not overcome those that didn't even want that budget. They wanted to cut and slice education, resources to our military, health care, and the environment even more.

So I stand in the backdrop of that challenge to challenge this Congress again. I was one of the first Members of Congress to deal with raising the need for serious attention to the Ebola virus as it hit Texas in Dallas. The first American to be diagnosed was in our State of Texas.

I began as a member of the Committee on Homeland Security to ask what our airports were doing, how are we assessing those who are traveling into our country, and making sure that the Centers for Disease Control were at my airports, both in Dallas and in Houston, Texas.

Now 1 year later or a couple of years later, we are now facing this issue called the Zika virus. I want to be very clear, we are not paying the attention to this that we should.

A headline reads: ''Scarier Than We Initially Thought.'' The CDC, the Centers for Disease Control, sounds a major alarm, a warning regarding the Zika virus. ''Public health officials used their strongest language to date in warning about a Zika outbreak in the United States, as the Obama administration lobbied Congress for $1.9 billion to combat the mosquito-borne virus.''

What did I start out by saying?

The Federal Government should not run our lives, but it is the umbrella on a rainy day. It is the only entity that can muster the stakes and resources to deal with what the CDC has said is a far more serious issue.

If we look at Puerto Rico, they are the eye of the storm. Texas, the eye of the storm. Florida, the eye of the storm. It is important to note that we have not done what we should be doing.

As a senior member of the House Committee on Homeland Security, which has a core mission of emergency preparedness of State and local governments to be equipped to react to emergencies, I am acutely aware of the potential for the Zika virus to be a real challenge for State and local governments in the coming months. You need our help.

This House has done nothing to respond to the President's request for $1.9 billion in emergency funds. My friends, this is not a frivolous request.

What do emergency funds mean?

Someone said, just go write a check out of the operating budget of the United States. You want us to be more fiscally responsible than that. We have a budget. We have funding that we have to obligate to the other needs of this Nation. The reason why the President rose to the level of the emergency funding, because emergency funding can come immediately outside of the budgeting process and begin to get these dollars to community health entities in our States and the Centers for Disease Control, who will have to be dispatched to our States to help if the epidemic becomes uncontrollable. No action.

One leader in this House said they are doing absolutely nothing in response to the President's request. They don't want to give him the money. Thank goodness the Senate has just passed a compromise, the other body, $1.9 billion in emergency funding for this important effort that we must have.

I come from Houston that has a tropical climate, with many climatic similarities with other States along the Gulf Coast, parts of Central and South America, as well as the Caribbean. Tropical climates are hospitable to mosquitoes that carry the Zika virus. In addition, Houston has a large and very diverse population that travels to many parts of the Zika virus-impacted zones located throughout Central and South America and the Caribbean where mosquito transmission of the Zika virus is a primary means of exposure to the illness.

People coming back and forth into the United States, citizens, those who have legal documents will travel across this Nation. There is no reason to point to these individuals and make them scapegoats. We should be prepared.

What about vacationers?

No matter how much you have spoken about the Zika virus, there will be vacationers who will still be going to places because they planned their vacation. They are going right into the heart of the storm.

As we well know, those women who will become pregnant will be the prime target for a devastating impact on their embryo, their baby that may be born with severe brain damage, lifelong brain damage.

We held a hearing early in March because I knew that I could not wait to educate my community. I called the Zika virus planning meeting along the Gulf Coast that would include doctors, agency officials, community service and faith-based organizations to start to build the bridges between those communities to defeat Zika.

As you well know, the summer Olympics will be held this year, and all of our American athletes will be going to Brazil. Brazil is also one of the serious sites of the Zika-carrying mosquito. It is a very serious and important effort.

Communities across America should not be panicking, but they should be preparing their community health centers, their public health system to confront the Zika virus if it comes to their community either by way of an individual who needs treatment or by chance of this mosquito.

□ 1215

So I have called for a national task force on the prevention of Zika virus infections in order to target funding for tropical climate areas, like Houston, south Texas, Florida, and other places in the southern region of the United States that have a tropical population, and to focus on the environmental cleanup of city water and trash near populated areas.

Most people are aware of the extreme flooding—20 inches of rain—that hit my community just 10 to 15 days ago. There were large amounts of sitting water and trash in a tropical area, tires. I visited a site in my district after the rains that had sitting water. It was just an open, welcoming place for the Zika-carrying mosquito.

I have also asked for public education campaigns targeting all public and private pediatric clinics and OB/GYN services for pregnant women. I need them to be educated that any mosquito repellant that does not have the DEET name on it is not sufficient.

If you are traveling overseas, your mosquito repellant must say the word ''DEET,'' which was work that I did in the United States Congress a few years ago when mosquito repellants did not have that word on them. We worked legislatively and with the EPA to ensure that you knew if it had that component. And you must be careful in using that as well.

We want to provide DEET repellant free to certain high-risk populations, in cooperation with private companies. Demand for DEET products will likely increase because the Zika virus is in the news. We may run out. So it is important that companies need to be alerted to set aside products for tropical areas along the south Texas coast and other States along that tropical area going along the Gulf Coast: Alabama, as I have said, Florida, Mississippi, and others.

And keep children's wading pools empty of water, my friends.

These are goals that should be met. I encourage stakeholders to be calm, but to meet with your infectious disease physicians, who are in all of your communities, along with your public health leaders, faith leaders, and others, to educate about this particular disease.

It is important that we move on this call by the President. This is not frivolous. This is an effort that is as clear as if we had called a battalion into operation—the United States military—because we were under attack. This is prevention—being prepared for potential devastating impact.

These are not my words. One of the most renowned infectious disease doctors that we have the privilege of hosting in Houston at the Baylor College of Medicine, Dr. Peter Hotez, dean of the National School of Tropical Medicine and professor of pediatrics

and molecular virology and microbiology at the Baylor College of Medicine, said the following points:

Zika virus infections will increase over the next few months. Effects of the infections on pregnant women in the first trimester will be, certainly, dangerous. It will impact on the poor. Leadership to fight the spread of the Zika virus must be local and must start now.

Dr. Peter Hotez said that this particular mosquito is the greatest killer of people in the world. They are also called the yellow fever mosquito. Now they are acquiring the Zika virus. Dr. Hotez says we are expecting 4 million Zika cases in the next 4 months, and to date, there are over a million cases in Brazil.

Remember, we are traveling back and forth. As all of you know, this is a small world. No one is kept from traveling internationally. We don't close our borders, in terms of Americans traveling on business or other responsibilities that they have.

Pregnancy, during the first trimester of pregnancy if the mother is exposed to the Zika virus, it can invade the central nervous system. Let me say this more clearly. In pregnancy, if the mother is infected in the first trimester of pregnancy, it can invade the central nervous system of the developing baby and inhibit brain development, which can result in stillbirths and brain damage. It occurs in 1 of every 10,000 births. And the rate for Zika virus exposure far exceeds that number.

Brain damage undermines the development either at birth, or the brain fails to develop properly after birth. The child will have difficulty in walking, difficulty in hearing, and difficulty with speech. Not all developmental consequences are known.

This is Dr. Hotez:

Three factors together make Zika virus a threat to poor communities: high concentrations of poverty—sitting trash and tires that may be found in many of our more depressed areas—the presence of the mosquitos; environmental conditions that support mosquito breeding near people; and the lack of resources for people to isolate themselves from mosquitos, such as screens, replants, and air-conditioning.

Now, we all know that on the continent of Africa they have been able to bring down the epidemic of malaria by making sure that charities like the United Nations and the Gates Foundation give mosquito nets to the people to assist them.

Well, in the United States, I know a lot of people think everybody has air-conditioning and that their doors and windows are closed. That is not true. There are people who have no air-conditioning and have their windows open or they have screens that have holes in them. It is sad to think, but it is true.

Or they are outdoors. They are walking along places that have this kind of circumstance—not because we want it to be that way, but after a terrible and devastating storm like we had in Houston, we have mounds of trash.

I want to thank the mayor of the city of Houston and the Harris County Judge for working diligently on why I asked for extra money for these areas: to clean up these trash areas. Now we have extra trash because we had this terrible flood. People are still out of their homes, and trash is still piled up in many places.

We need partnerships critical to defeating the Zika virus-carrying mosquitos. Zika virus control requires more than spraying for mosquitos. Mosquito and animal control need to use the best methods for preventing the spread of the disease.

We can no longer say that disease is a problem from a foreign country, because it will be a problem here. Dr. Umair Shah said the important lesson from Ebola and Zika is that there is a strong connection between global health and domestic health.

So, my friends, I am sounding the alarm not for panic, but preparation and preparedness, education, outreach, personal precaution, and understanding how to move around during this time, to cover up to prevent mosquito bites day and night—prevent the bites day and night—environmental cleanup. If you do not have the spray, use a mosquito net that you can purchase.

It is important to note that the Zika virus is not a local mosquito population, but it will travel. Travelers must be educated regarding the Zika virus. And if you are wondering about our local atmosphere, let me tell you of the latest news.

Thirteen Zika virus cases are now reported in Virginia. Two new cases were reported on Thursday, both of them in the northern region of Virginia, according to the Virginia Department of Health. I did not say Brazil. I said Virginia. There are now 388 cases nationwide as of Thursday. According to the Centers for Disease Control, 33 with the virus are pregnant. This is an action that we cannot avoid.

For anyone that has not seen the Zika virus-carrying mosquito, this is a mighty powerful mosquito. And don't in any way have me suggest that this is the size of it, but you can see the elements of it; and what we are taught is that it is a pretty strong mosquito, not to be deterred. We must get prepared.

So, as we look to the elements of preparedness, let me share some other issues that I think need to be addressed. I thought this was so important. The national media has helped us try to bring it to people's attention. I put an article in Time magazine myself, ''Congress Must Act Immediately to Combat Zika Virus.''

We are serious about this and have to get serious. We cannot have the Senate in a compromise of $1.1 billion on the emergency supplemental that the President has asked for, yet this House has not done anything.

We are now going for the district work recess. I will be going home to my district to visit those individuals who are underwater, whose properties are outside of their home, mosquito gathering sites where trash is left not because they want to, but because so much has been torn up because of the water and we are waiting for it to be picked up. My community, my city needs these resources to do massive pickup of tires, massive cleanup of sitting water.

The Aedes mosquito is the most dangerous of the various Zika-carrying mosquitos. You can see that it is none too friendly looking. That is why I came to the floor today.

I want to leave with information directly to pregnant women, to give the information that we know to provide them with the importance of the issues that we are confronting.

I include in the RECORD letters, Mr. Speaker, that I wrote in March to the Secretary of Health and Human Services pleading for the task force. As well, I include a number of other items.

I also ask President Obama to look closely at the southern region and rim, where States like Texas, Louisiana, Alabama, Mississippi, and Florida are, because they will be the epicenter. Even though there are now 388 cases nationwide, 13 in Virginia, as the summer goes on, this is going to be of serious concern.

Let me suggest to you that this is a situation where women who are pregnant are taking heed. Pregnant women in Houston and their doctors weigh the risks of the Zika virus. This is a very real circumstance. And our climate is very tropical.

This mother, Tracy Smith, and her children are at their home. Smith is pregnant with twins, and she is worried about the approach of the mosquito season. So OB/GYN doctors are now having to prepare their mothers. What kind of protection should they take? What kind of mosquito repellant should they utilize? And what measures? Should they have mosquito nets inside their house, even though they may be living in an air-conditioned facility?

But what you say for one mother who may have a more economic level of opportunity than others, you need to say for the entire population of pregnant women, because there is no doubt. Dr. Hotez has said this is going to be a season where we have to be extremely concerned about the Zika virus and the Zika-carrying mosquito.

So what we are suggesting is mosquito traps. And they will be in these areas that are attractive to their environment and their trends: sitting water, dirty water, wading pools. They are not prohibited, if I might say, from getting an airplane ticket. They will get here on their own. We have to take it very seriously.

So, I want an immediate response by this House to pass the President's emergency supplemental and to work with the Senate on the $1.1 billion that has been requested.

□ 1230

It is money to save lives of Americans. It is money to give pregnant

women comfort that their newborn child can be born in this country with the best opportunity for survival and, of course, to reach their fullest potential.

Many of you have seen the video, tragically, of those babies with small brains that have now been born in countries in South and Central America. It is a sentence, although we love everyone, that we should not render to an unborn child.

And to that mother who is looking forward to raising that child, either her first or along with her other children, let me tell you what the Zika virus will do. Pregnant women can be infected with the Zika virus, as I said. The primary way that pregnant women get the Zika virus is through the bite of an infected mosquito.

Zika virus can be spread by a man in sex partners. A pregnant woman can pass Zika virus to a fetus. Zika virus can be passed from a pregnant woman to a fetus during pregnancy or at delivery and then that impact comes at a later time.

If a pregnant woman is exposed, we don't know how likely she is to get Zika. If a pregnant woman is infected, we still don't know how the virus will affect her or her pregnancy.

We don't know how likely it is that Zika will pass to a fetus. We don't know, if the fetus is infected, if the fetus will develop birth defects. It means that they cannot cure this in the womb.

We don't know whether her baby will have birth defects. We don't know if sexual transmission of the Zika virus poses a different risk of birth defects than mosquito-borne transmission.

So, because we have all these questions, we need the $1.9 billion that the President asked, but we need it to begin to answer these questions and we need to be able to have doctors like Dr. Hotez, a major leader in infectious disease, begin the research to know what is the best repellent not in terms of mosquito repellent, but what is the best scientific response to this dastardly and predictable potential of the Zika-carrying mosquito coming to the United States and having an impact on all of those who are excited about looking forward to the birth of a newborn baby.

I hope that, as we return from our work recess, this House and the Republican leadership, as was said earlier on the floor, end any partisan bickering, any debate or disagreement with the President of the United States, and accept the fact that he is the Commander-in-Chief and that his experts, the Centers for Disease Control, who are the entity to which all of us in our respective communities immediately turn for assistance on infectious diseases or natural disasters as it relates to health care—we call upon them to come to our districts and our States.

We ask them to help us and to make sure that we and our healthcare system are doing all that we can to be able to be helpful.

I do want to end by saying the reason why we are in such an alarm is there is now no vaccine to prevent or medicine to treat the Zika infection so that, if you are infected, as a mother, there is nothing right now. So we have to work on the research and the preventative aspect in order to protect these unborn children.

The illness can be mild, with symptoms lasting for several days to a week. But it is that unborn child right now and the larger impact we have yet to understand.

People may not be sick. They may not be sick enough to go to the hospital. They may not die. For this reason, people might not realize that they have been affected. That means we don't know whether their infection can cause someone else to be infected because we need to do more research.

We know it is transmitted by this mosquito. We need to make sure we understand whether there is any other kinds of transmissions that we have.

We know that there have been Zika travel advisory notices. We know that this is not a happy experience for the countries that we have listed.

But I feel compelled to say that the Zika virus has been noted in Cape Verde, the Caribbean, Aruba, Barbados, Bonaire, the Dominican Republic, Guadeloupe, Haiti, Jamaica, Martinique, the Commonwealth of Puerto Rico, U.S. territories St. Maarten, St. Vincent, The Grenadines, Trinidad and Tobago, and the U.S. Virgin Islands.

The Zika virus is in Central America—Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama—Mexico, the Pacific islands, American Samoa, the Marshall Islands, Samoa, Tonga.

The Zika virus is in South America: Bolivia, Brazil, Colombia, Ecuador, French Guinea, Guyana, Paraguay, Surinam, and Venezuela.

I am not condemning these places. I am only asking that travelers take caution. And pregnant women need to take counsel from their OB–GYN.

So, my friends, our job and task here in this country is to be the umbrella on a rainy day. It is to ensure that the American people have all of the information that will help them make very important decisions.

It is to make sure that our health system and our doctors who are in their offices, in general medicine or internal medicine, have all the information and tools to be able to determine whether a woman has been infected and happens to be pregnant.

So my task here today is to say that we cannot wait. I am disturbed that we now have a week and we have not yet passed the emergency supplemental to help our friends in Puerto Rico, which, as I indicated, have a serious, serious opportunity to be without the resources that they need in the tropical climate that they are in to be able to confront the Zika virus. That is a U.S. territory. How unfair that is.

To my friends in this House, you cannot wait any longer. When we come back, there needs to be on the floor of the House a bill passing the Senate compromise or the $1.9 billion emergency supplemental that the President has asked for, as the Commander-in-Chief. We need to roll up our sleeves. We need to ensure that the American people are taken care of.

And I just want to add this: Our military personnel are in tropical climates. We can treat them with limited dignity absolutely not.

They must have both the medical personnel and the equipment to either be of assistance to places where they are, where the epidemic may be, as they did when they were sent to Africa to help set up a hospital structure that did not exist.

We don't know where this will be the worst, and I can assure you that our military personnel may be called on, working with the Centers for Disease Control. Are we going to leave them without the resources they need? I hope not.

I take my role on the Homeland Security Committee very seriously. It is our responsibility to deal with the security of this Nation.

We have excellent Members who are working hard, such as my dear friend DONALD PAYNE, who is the ranking member of the Subcommittee on Emergency Preparedness, Response, and Communications. We work together to ensure that America is prepared.

Right now this Zika-carrying mosquito has the potential for being here in the United States and creating havoc among pregnant women and possibly others.

What is our task? It is, Mr. Speaker, to do our job and to prepare the American people. We owe that to the great and wonderful people of this Nation, to the mothers and fathers expecting that bundle of joy. We owe that to all of them.

Mr. Speaker, as a senior member of the House Committee on Homeland Security, which has a core mission of emergency preparedness of state and local governments to be equipped to react to emergencies make me acutely aware of the potential for Zika Virus to be a real challenge for state and local governments in the coming months.

This emerging health issue is a matter of great importance and one that must be addressed in timely way through a coordinated effort by federal, state and local government joined with community partners.

Houston Texas has a tropical climate with many climatic similarities with other states along the Gulf Coast; parts of Central and South America as well as the Caribbean. Tropical climates are hospitable to mosquitoes that carry the Zika Virus.

In addition, Houston has a large and very diverse population that travels to many of the Zika Virus impacted zones located throughout Central and South America and the Caribbean where mosquito transmission of the Zika Virus is the primary means of exposure to the illness.

I have identified shared concerns among state, and local agency officials regarding a need to have a plan to address Zika Virus in

the Houston and Harris County area that would include every aspect of the community.

For these reasons, I called the Zika Virus planning meeting along the Gulf Coast that would include doctors, agency officials, community service and faith based organizations to start to build the bridges between these communities to defeat Zika whether it was contracted through travel or mosquito borne transmissions.

Houston is fortunate to have diverse community of pastors who serve people in need throughout the area. Part of the Zika Virus response must be to ensure that we are doing all that we can and should be doing to reach every community.

Congresswoman JACKSON LEE's work on environmental mosquito mitigation issues:

As Congresswoman I worked with the EPA to get the word DEET on labels for mosquito repellant that contained the ingredient that remains the most effective mosquito repellant on the market.

CDC recommends that DEET is safe for use on children 2 months of age or older.

Congresswoman JACKSON LEE's Action Plan:

National Taskforce on Prevention of Zika Virus infections;

Target Funding to Tropical Climate areas—like Houston and South Texas in the U.S.;

Focus environmental cleanup of sitting water, and trash (tires) near populated areas;

Public Education campaign targeting all public and private pediatrics practices and OB/GYN service for pregnant women;

DEET Repellent;

Provide DEET Repellent free to certain high risk populations incorporation with private companies [Demand for DEET products will likely increase because of Zika Virus in the news.]; Companies need to be alerted to sit aside product for tropical areas along the South Texas Coast that will have the strongest need for the products; and

Keep children's wading pools empty of water.

Goals of the Meeting of Congresswoman JACKSON LEE's March 10 Meeting in Houston Texas:

Engage stakeholders in a planning discussion on combating Zika Virus:

1. Learn what each agency is doing to address Zika Virus
2. Calm the community through information
3. Engage key stakeholders outside of government and health care in advance of Mosquito Season 2016
4. Outline the strategy to defeating Zika Virus breeding areas
5. Learn what needs to be done to effectively communicate with every community in the Houston/Harris County area
6. Discuss the emergency supplemental appropriations proposed by President Obama

What is Zika Virus:

Zika Virus is spread primarily through the bite of an infected *Aedes* [A-dees] species mosquito. It is important to remember that 80% of those who get the Zika Virus will feel no symptoms. The most common symptoms of Zika [Zee-Ka] are fever, rash, joint pain, and conjunctivitis (red eyes). The CDC reports based on what they know about the virus to date—Zika virus illness is usually mild with symptoms lasting for several days to a week after being bitten by an infected mosquito. People usually don't get sick enough to go to the hospital, and they very rarely die of Zika. For this reason, many people might not realize they have been infected. Once a person has been infected, he or she is likely to be protected from future infections.

What is being done to address Zika Virus:

Federal: President Obama is seeking $1.6 Billion in emergency supplemental appropriations to fund Zika Virus mitigation; response, local and state federal agency programs that address environmental clean up; public education, community engagement, testing; and mosquito abatement.

CDC has a disease surveillance unit at Bush Intercontinental Airport.

Importance of advocating for the President's request:

Congresswoman JACKSON LEE advised that offices that will benefit from the resources to fight Zika Virus in their communities should make their views known regarding the emergency supplemental appropriations.

Speakers:

Dr. Peter Hotez, Dean of the National School of Tropical Medicine and Professor of Pediatrics and Molecular Virology & Microbiology, Baylor College of Medicine, said.

4 Key points:

1. Zika Virus infections will increase over the next few months
2. Effects of the infections on pregnant women (first trimester)
3. Impact on the poor
4. Leadership to fight the spread of Zika Virus must be local

Dr. Peter Hotez said that Aedes Aegyptus mosquitoes are the greatest killer of people in the world. They are also called the yellow fever mosquito.

Dr. Peter Hotez we are expecting 4 million Zika Virus cases in the next four months and to date there are over a million cases in Brazil.

Pregnancy during the first trimester of pregnancy if the mother is exposed to the Zika Virus it can invade the central nervous system of the developing baby and inhibit brain development, which can result in:

Still births;

Microcephaly [occurs in about 1 in every 10,000 births] the rate for Zika Virus exposure far exceeds that number. Microcephaly is brain under development either at birth or brain fails to develop properly after birth: Difficulty walking, Difficulty hearing, Difficulty with speech.

[Not all developmental or health consequences are known]

There are no tests to detect the virus, but not vaccine or cure.

Three factors together make Zika Virus a threat to poor communities: High concentrations of poverty; the presence of the Aedes mosquitoes; environmental conditions that support mosquito breeding near people and a lack of resources for people to isolate themselves from mosquitoes [screens, replants, air conditioning, etc.].

Zika virus disease in pregnant women in Bahia, Paraíba, and Pernambuco states, supports an association between Zika virus infection during early pregnancy and the occurrence of microcephaly.

Primary source of the virus is through infected mosquito bites. People to people transmissions are rare, but can occur if the virus load in the body is high sexual contact can spread the virus.

Leadership must be local; the CDC is only serving in a technical advisory role to local and state governments.

Dr. Umair Shah Executive Director for Harris County Public Health & Environmental Services, said:

Key points:

1. Partnerships are critical to defeating Zika Virus carrying mosquitoes
2. Zika Virus control requires more than spraying for mosquitoes
3. Mosquito and animal control use the best methods for preventing the spread of disease

Dr. Umair Shah said that the important lesson from Ebola and Zika is there is a strong connection between global health and domestic health.

We can no longer say that disease is a problem from that foreign country, because it will be a problem for the United States if it is not addressed wherever it might originate.

He said that you can only effectively clap with two hands. The partnerships that must be developed among local, state and federal agencies as well as community leaders are critical to the success of winning a fight against the Zika Virus.

Mosquito control will not be enough to deal with Zika Virus because the host mosquito that is a primary carrier has evolved to live on human blood—even when given a choice of animal or human blood the Aedes Egypti will choose human blood. It lives near the ground—so spraying in the air will not work; it likes to be near people; it requires very little water to breed; it can hide under leaves, and will seek out homes where people live.

Zika Virus response requires a new approach:

Education;

Outreach;

Personal precaution:

Cover up to prevent mosquito bites day and night: Slogan ''Prevent the bite day and night''

Environmental cleanup—removing things that will hold water, small wading pools for children, gutters, grills, tires, toys, trash, etc.

If you do not have air conditioning use a WHOPES approved net like Pramax (156 holes per square inch and long enough to tuck under the mattress)

Permethrin-treated bed nets provide more protection—do not wash them or expose them to sunlight, which would break down an insecticide that kills mosquitoes and other insects.

Important to note: Zika Virus is not in the local mosquito population yet.

All domestic Zika cases except one have been linked to travel.

Travelers must be educated regarding Zika Virus. They should know the symptoms and should seek care. They should not fear being shunned for having the virus.

Dr. Dubboun, Director of the Harris County Public Health Environmental Services Mosquito Control Division, prior to his current public service he served 25 years in the military.

Harris County Health Department Zika Website: http://www.hcphes.org/publications/hcphes responds/ 2016 zi ka virus/

Key points:

1. Get rid of the mosquito breeding habitat.
2. Ecologically people are the preferred food source for Aedes mosquitoes.
3. No need to panic.
4. The solution to Zika Virus is community involvement.

Dr. Dubboun traveled to Brazil to join others in his field to sharing information on mosquito control with the hope of determining the best practices to achieve better results.

Dr. Dubboun said that the best approach to ending the threat of Zika virus is to get rid of the habitat that is used by the mosquito to breed. Ecologically people are the preferred food source for the Aedes mosquitoes.

He said that there was no need to panic because the weather right now (March 10, 2016–April 30, 2016) is not great for mosquito breeding, which means we have time to address environmental issues that support Aedes mosquito breeding.

Spraying will not work to control the Aedes aegypti mosquito because this mosquito does not fly in the air—it stays close to the ground; can breed in very small amounts of water; and hide very well.

The solution to fighting the Zika Virus is community involvement in working to minimize the habitats that allow Zika Virus carrying mosquitoes to breed.

Dr. Gruber, Assistant Commissioner from Regional and Local Health Services for the State of Texas:

Key points:

1. Number of cases in Texas and nearly have are in Harris County they are travel related except one;

2. Core ways to address key elements of a stop Zika effort.

Dr. Gruber said that he was there from the state to listen to what was being said and to communicate that the state was planning to support communities in combating Zika Virus.

On April 14 the state of Texas there have been 31 confirmed cases of Zika Virus, we know this because the patients were ill enough to seek medical attention and the tests were positive. Twelve of those cases were in Harris County.

It is important to note that 80% of people who will be infected will have no symptoms, which means it is not possible to know how many people have returned from travel with the virus or antibodies after having been exposed.

1. Core ways to address the existence of Zika Virus:

a. Health community communication with the public;

b. Correct vector control;

c. Surveillance;

d. Planning;

e. Keep yards clean; i. Communicate to authorities any needs for services to assist with clean up or to address environmental issues related to Zika.

f. The battle against Zika must be viewed as a community fight—we must enroll people to become members of the Public Health Army.

Bishop James Dixon, Community of Faith Church:

Key points:

1. The poor are not equipped to protect themselves from anything;

2. Education is key;

3. Access to the Community is essential;

4. Many churches have Haiti Missions that must be educated on this issue;

5. Larger forum to engage the community on the issues of Zika Virus

6. See others in the world as our neighbors, not as foreigners.

Bishop Dixon said that we must stop seeing the people of other nations as foreigners but neighbors.

People who are poor do not have the means of helping themselves. By the very definition of poverty—it is not just a state of being, but a state of existence, a state of mind, and the source of our ability to be compassionate, not just think compassionately.

Education is key to reaching those who are most in need, but breaking through the barriers of poverty will require a great deal of effort.

People must come from outside of these communities into them to knock on doors, pick up trash, hang mosquito netting, hand out DEET and show people how to use it, help the elderly who cannot do their own yard clean up, share with people the city and county numbers to call to remove trash and tires, and teach people how to police their yards for items that will allow mosquitoes to breed.

Prevention of Zika Virus transmission to humans must be the goal.

Houston has a very diverse community of pastors, ministers and religious community leaders who should be part of this discussion and the solution.

Dr. S.J. Gilbert Houston Metropolitan said that he wanted to bring the Zika Virus issue to the attention of the diverse ministers community and would support efforts by Congresswoman Jackson Lee.

Dr. Raouf Arafat Houston Health and Human Services Office of Surveillance and Public Health Preparedness said:

Key points:

1. Houston routinely deals with medical or health related emergencies;

2. The talent in the city and county government health departments are unmatched in other locations around the nation;

3. We work well together and see each other as partners;

4. The Laboratory serves the entire area with testing services;

5. Training of public health workers is essential; and

6. Communication is essential.

City of Houston Website on Zika: http://www.houstontx.gov/health/Epidemiology/Zika_Virus.html.

Dr. Arafat said that through surveillance and public health efforts that Houston routinely responds to and effectively addresses emergencies that never see the light of day because they are well managed.

Disease control and prevention are areas where Houston excels and very few areas of the country have a combination of very talented people working in city and county government on the issue of public health.

We have laboratory services that can test for Zika Virus, but only in cases where the CDC guidelines are met, *e.g.*, recent travel to a region with the virus, symptoms consistent with the infection, etc.

As I have said the virus carrying mosquitoes are not in the Houston area.

My purpose in working on this issue is to make sure that Houston along with other Gulf Coast communities is prepared for the 2016 mosquito season.

The U.S. has the experience and we should use it to help other nations, by doing so we also help ourselves. The strength of the U.S. approach is the systems that have been built up and developed over time. These systems allow for us in Houston and Harris County to know if something serious is occurring in the city.

On January 1, 2016 people in this field of disease control expressed a position that it was important to start working on Zika Virus issues, but no one else was thinking about the virus. By January 29 everyone was talking about Zika Virus.

Stephen Williams, Director of Houston Health Department, said:

Key points:

1. There is no need to be alarmed;

2. We have been thinking about this for some time;

3. The key to success will be personal responsibility; and

4. Environmental work has already begun.

Community action is important to meeting the challenge and each person must play a part in the overall success of the plan.

The school education plans for Zika Virus in Houston Texas will begin in early to late April.

During this same period they will be doing a visibility campaign for the public to learn about protecting themselves from the virus, which will include multipurpose centers and community health clinics.

There is no need for alarm about the topic of Zika, we deal with and take care of situations on a daily basis that no one ever knows about that are serious.

We will be successful in Houston if the funding the President requested are approved by Congress.

The city of Houston began ramping up waste cleanup in low income areas like the 3rd Ward located in my District by going after illegal dump sites.

However, breeding sources in yards is not something the city or county can take care of.

If the trash is in a vacant lot or on the side of the road that is the government's responsibility, but private property is the owner's or occupant's responsibility.

Houston has organized an incident command structure to combat Zika Virus, which is the effort to better coordinate resources and planning across agencies.

Houston Sanitation Department is part of that effort.

Dr. David Persse, Physician Director, Emergency Medical Services, Houston Public Health Authority, said:

Key points:

1. Houston Emergency Command Center;

2. Solid Waste Collection efforts;

3. Phase I of Zika Virus Response;

4. Phase II of Zika Virus Response.

Dr. Persse said Houston's Emergency Command Center has been ramped up, which includes Houston Department of Solid Waste, Department of Housing and Air Port Authorities, etc.

Dr. Persse said Houston and Harris County are in Phase I of the Zika Virus preparation where there is no virus in mosquitoes in the area and the only cases are coming from those who have traveled to areas where the infection is transmitted by mosquito bite.

During this phase Houston and Harris County will focus on environmental cleanup of breeding sites and education of homeowners about breeding mosquito sites on their property.

Goal: Get rid of breeding sites.

Phase II will focus on mosquito breeding and will start in mid-to late April into May.

Julie Graves, (Confirmed) MD, MPH, PhD Regional Medical Director Health Service Region 6/5S Texas Department of State Health Services, said:

Dr. Graves said that the need to coordinate among all agencies responsible for Zika Virus

preparation, public education, remediation and control was critical. She said that chikungunya virus spread in the Caribbean was attributed to the lack of cooperation among governments and agencies.

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

[TIME, Apr. 20, 2016]

CONGRESS MUST ACT IMMEDIATELY TO COMBAT ZIKA VIRUS

LOCAL GOVERNMENTS NEED FEDERAL FUNDING TO PREVENT OUTBREAKS

(By Sheila Jackson Lee)

Members of Congress recently received news so chilling that it is imperative that they take immediate action to approve the about $1.9 billion in emergency funding for Zika preparedness requested by the Obama administration. According to Dr. Anthony Fauci, Director of the National Institute for Allergy and Infectious Disease, the mosquito that carries the Zika virus, which is already spreading rapidly in Latin America and the Caribbean, has been detected in nearly 30 states and could infect hundreds of thousands of people in Puerto Rico.

In Brazil, Zika has been identified as the cause in many recent cases of microcephaly, a birth defect resulting in babies being born with small heads and developmental problems. Zika poses a special risk for pregnant women since the virus can be transmitted through the bloodstream to the fetus. Previously, it was thought that Zika was only a problem during the first trimester of pregnancy, but according to officials at the Center for Disease Control and Prevention, it has now been learned that the virus is likely to be a problem throughout the term of pregnancy.

In February, the Obama administration requested Congress to approve about $1.9 billion in emergency Zika prevention funding, but to date Republican congressional leadership has not acted. If Congress does not act to approve the urgently needed funding, federal public health agencies will be forced to divert funding away from research into malaria, tuberculosis and a universal flu vaccine.

It is outrageous that the Republican congressional leadership is putting at risk the health and safety of hundreds of thousands of persons by refusing to do its job. The impact of that failure of responsibility is likely to be felt most severely in the congressional districts like the one I represent in Houston, Texas.

Because the summer months in areas along the Gulf Coast and the southwest region of the United States are unusually long and hot, Houston is expected to be an epicenter of any Zika outbreak in the U.S. In impoverished areas of the city and county, there are many open ditches in residential areas and lots where tires are illegally dumped. These are ideal breeding habitats for Aedes aegypti, the mosquito species that carries the Zika virus. Experts now know that it can also be transmitted in other ways, including sex.

Mosquito control will not be sufficient to limit the spread of the Zika virus because the Aedes aegypti has evolved to live on human blood, which it will choose over animal blood whenever it has the opportunity to do so. This breed of mosquito lives near the ground and near people, which limits the effectiveness of areole spraying. The Aedes aegypti mosquito can breed in a habitat as small as a cup of dirty water, it can hide under leaves, and it will seek out homes where people live.

To combat the threat posed by Zika, it is essential that the public be enlisted as the first line of defense. But for this effort to be successful, resources must be available to implement community-based mosquito control and abatement programs. That is why I have called upon the Republican congressional leadership to approve the requested about $1.9 billion emergency Zika prevention funding immediately, with $100 million dedicated to support local government efforts to conduct environmental cleanup activities to remove items in populated areas that promote mosquito breeding. This funding would also support coordinated public-education campaigns to encourage proactive efforts to seek early medical care when Zika virus symptoms are present, or early in a pregnancy.

The funding would also provide the resources to teach community residents how to check for and safely address mosquito breeding areas; repair or replace broken or torn door and window screens; and provide DEET mosquito replant products to low-income communities and mosquito netting for beds in homes that have no air conditioning.

Last month, I convened the first of what are planned to be several strategic planning sessions with state and local officials to prevent any outbreak or spread of the Zika virus. Here in Houston and Harris County we are prepared to meet this serious challenge to public health and safety with determination and resolve. All we are lacking is the federal funding needed to succeed. And that is why Congress must act immediately.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, DC, March 10, 2016.

Hon. SYLVIA MATHEWS BURWELL,
Secretary of Health and Human Services, U.S. Department of Health and Human Services, Washington, DC.

DEAR SECRETARY MATHEWS BURWELL: I applaud the President and commend his designation of the U.S. Department of Health and Human Services as the lead federal agency charged with responding to the threat posed by the Zika virus. I am writing to request that the Department of Health and Human Services establish a National Taskforce on the Prevention of Zika Virus infections in pregnant women and girls.

The Zika Virus is a serious illness for pregnant girls and women. Zika virus can be spread from a pregnant woman to her fetus and has been linked to a serious birth defect of the brain called microcephaly in babies of mothers who had Zika virus while pregnant. Other problems have been detected among fetuses and infants infected with Zika virus before birth, such as absent or poorly developed brain structures, defects of the eye, hearing deficits, and impaired growth. CDC recommends special precautions for pregnant women. There is no treatment or cure for those infected with Zika Virus.

Experts believe the Zika Virus will be a seasonal epidemic for North America, but will primarily affect those states in the south and will flare up in the summer and continue into the fall in tropical zones. As you know, in Texas we have had particularly hot and long summers, with tropical zones along the Gulf Coast that include Houston Texas. There are two types of the Aedes mosquitoes known to carry the virus that found in the Houston area. Houston will possibly be ground zero for the United States because of environmental conditions that support breeding of mosquitoes that are known to carry Zika Virus in the Americas that are found in close proximity to low income areas and the proximity. Prevention measures consist of community based mosquito control programs that are able to reduce vector populations and personal protection measures to reduce the likelihood of being bitten by infected mosquitos.

Thank you for your consideration of this request.

Very truly yours,

SHEILA JACKSON LEE,
Member of Congress.

THESE ARE THE TIMES THAT TRY MEN'S SOULS

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

Mr. GOHMERT. Mr. Speaker, it is an interesting time. Sometimes you think about the literary quote ''These are the times that try men's souls,'' but there have been trying times before and there will be again.

But our Congress continues to be urged to do things that sound like a great solution, sound like a good, compassionate thing to do, but when you get to the bottom of them, sometimes they are the most uncompassionate things we could do.

For example, there are reports of sexual abuse victims who are female being deeply troubled. There are FBI statistics that indicate that perhaps 18, maybe 20, percent of women in America have been sexually assaulted. Other types of crimes on females raise the percentage even higher.

There are statistics that indicate transgender may be three-tenths of 1 percent. Who knows what the right numbers are? But I think we should be far more compassionate with female sexual abuse victims that comprise such a large number in weighing whether you want to have men come walking in on women in restrooms, dressing rooms.

Also, the talk has been this year that we are going to have sentencing reform because it is the compassionate thing to do.

We are told that there are massive, massive numbers of people who have been incarcerated in Federal prison for simple possession cases, and we have moved on. We have evolved in this country where we don't look on those as critically. So it is time to start releasing some of those people.

Having been a judge of a felony court, I can't say I did the right thing on sentencing in every case, but I can say I struggled. I got all the information that was available. I considered it before we ever undertook the sentencing hearing. I considered everything submitted at the sentencing hearing and wrestled and tried to get to a just and appropriate sentence.

Judges do that all over the country. Some think they are being compassionate and quickly release criminals, not being quite as dedicated to reviewing backgrounds and the indications of repeat offenses to come. So they release people too quickly, sentence them too lightly, and they go back and commit other offenses.

We know from the recidivism rate that is going to happen, but you try