

DRUG DEMAND REDUCTION ACT

Mr. McINNIS. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 538 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 538

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 1(b) of rule XXIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 4550) to provide for programs to facilitate a significant reduction in the incidence and prevalence of substance abuse through reducing the demand for illegal drugs and the inappropriate use of legal drugs. The first reading of the bill shall be dispensed with. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by Representative Hastert of Illinois or a designee and a Member opposed to the bill. After general debate the bill shall be considered for amendment under the five-minute rule for a period not to exceed three hours. Before consideration of any other amendment it shall be in order to consider the amendment printed in the report of the Committee on Rules accompanying this resolution, if offered by a Member designated in the report. That amendment shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. After disposition of that amendment, the provisions of the bill as then perfected shall be considered as original text for the purpose of further amendment under the five-minute rule. During consideration of the bill for further amendment, the Chairman of the Committee of the Whole may accord priority in recognition on the basis of whether the Member offering an amendment has caused it to be printed in the portion of the Congressional Record designated for that purpose in clause 6 of rule XXIII. Amendments so printed shall be considered as read. The chairman of the Committee of the Whole may: (1) postpone until a time during further consideration in the Committee of the Whole a request for a recorded vote on any amendment; and (2) reduce to five minutes the minimum time for electronic voting on any postponed question that follows another electronic vote without intervening business, provided that the minimum time for electronic voting on the first in any series of questions shall be 15 minutes. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

□ 1630

The SPEAKER pro tempore (Mr. SHIMKUS). The gentleman from Colorado (Mr. McINNIS) is recognized for 1 hour.

Mr. McINNIS. Mr. Speaker, for purposes of debate only, I yield the customary 30 minutes to the gentleman from Massachusetts (Mr. MOAKLEY) pending which I yield myself such time as I may consume. During the consider-

ation of this resolution, all time yielded is for the purposes of debate only.

Mr. Speaker, the proposed rule is a modified open rule providing for 1 hour of general debate equally divided between the gentleman from Illinois (Mr. HASTERT) or a designee of Mr. HASTERT's and a Member opposed to the bill. After general debate, the proposed rule provides for a 3-hour time limit on the amendment process.

House Resolution 538 further provides, prior to the consideration of any other amendment, for the consideration of the amendment printed in the report of the Committee on Rules if offered by a Member designated in the report. This amendment shall not be subject to demand for division or to amendment and shall be debatable for the time specified in the report, equally divided and controlled by a proponent and an opponent.

Mr. Speaker, finally, the proposed rule provides that should the amendment be adopted, the bill, as amended, be considered as original text for the purpose of further amendment.

The proposed rule provides that the Chairman of the Committee of the Whole may accord priority in recognition to Members who preprint their amendments in the CONGRESSIONAL RECORD. The proposed rule also allows the Chairman of the Committee of the Whole to postpone votes on amendments and reduce to 5 minutes the minimum time for electronic voting on any postponed votes provided voting time on the first in a series of questions is not less than 15 minutes.

Finally, the rule provides 1 motion to recommit, with or without instructions.

This rule was reported out of the Committee on Rules by a voice vote.

Mr. Speaker, the underlying legislation, the Drug Demand Reduction Act of 1998, is intended to intervene and reduce the demand for illegal drugs and the inappropriate use of illegal drugs in this country. The Drug Demand Reduction Act of 1998 complements other anti-drug legislation like H.R. 4300, the Western Hemisphere Drug Elimination Act, and seeks to interdict drugs before they reach the United States. This proposed rule will allow ample time for the House to consider this measure, any amendments to it; 1 hour for the proposed rule, 1 hour of general debate and 3 hours on the amendments; a total of 5 hours devoted to the debate regarding H.R. 4550 and the Drug Demand Reduction Act of 1998.

The underlying bill is a recent product of the Drug Task Force headed by the gentleman from Illinois (Mr. HASTERT). However, the provisions of the underlying bill have been under consideration for the past year. Most of the provisions contained in the bill can be found in our bills, bills that have been thoroughly considered in other committees.

I am not happy to note that illegal and illicit drug use in this country have doubled in the last several years.

As a former police officer, Mr. Speaker, as somebody who has been on the street and somebody who understands illegal drugs, as somebody who has dealt with illegal drugs on a firsthand basis in my law enforcement days, I can tell my colleagues that this is a situation that is a serious, serious situation, and the Members ought to support this rule and move on to address the substance of this legislation. And it is my forecast the majority of our colleagues on this House floor will, in fact, support this bill because we share a common thread, and that thread is, cut out the illegal drugs.

I think the Republicans have worked very strongly on this issue, an issue that has been driven in our Republican conference for a long period of time, and finally we are bringing it to some time of fruition.

As Members noted in the earlier debate on the Western Hemisphere Drug Elimination Act, for kids 12 to 17, first-time heroin use, which has been proven to kill, surged 875 percent from 1991 to 1996. There is a problem out there, and it is a big problem. We, the Congress, have got to address this drug problem in this country. The Drug Demand Reduction Act of 1998 seeks to address the prevailing attitude towards drugs and shift that attitude.

As a father of three children, actually three teenagers, two now in college and one that is now a junior in high school, I can tell my colleagues firsthand, we deal with lots of issues in our family discussions; but the one that concerns my wife Laurie and I the most is, what about illegal drugs? And constantly we have conversations with our children, as my colleagues do with theirs, about how deadly these things can be, how any kind of enjoyment on them, if it is there, is temporary at best, and the damage is long term. These discussions should be amplified by everybody in this country, and this bill helps our country move towards that War on Drugs. It is critically, critically important.

The Drug Demand Reduction Act of 1998 seeks to intervene and send that message that drug use is not only dangerous, it is wrong, it is illegal, and it is illegal for a purpose. It is illegal because it gets people nowhere.

I like the advertisement on TV with the gentleman who says, "Intervene any way that you can." I will talk about that a little bit later on, but I think that is a message that we should do here. This is one way that we can intervene. As he says, "Get between your kids and those illegal drugs." This bill is a step in that direction. It helps us intervene any way we can.

And we should not spend a lot of time on semantics. We know what it does, this bill is clear. Contents of this bill have been in front of a number of committees. We have put it together as a model, it is ready to go, and I encourage my colleagues to support the rule and the underlying legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. MOAKLEY. Mr. Speaker, I yield myself such time as I may consume, and I thank my dear friend from Colorado (Mr. MCINNIS) for yielding me the customary 30 minutes.

Mr. Speaker, illegal drugs are the scourge of American society. Illegal drugs damage or destroy not only the individual using them, but they impose a tremendous cost on the American society as a whole, a cost that is just too high for our society to continue to pay.

No one, nobody in this Congress, holds a monopoly on deploring what drugs have continued to do to the millions who use these poisons.

But, Mr. Speaker, I am sure this bill will pass, as indeed it should. We all want to do whatever it takes to stop illegal drug use in this Nation.

But I must take this opportunity to address the process or the lack thereof that surrounds this bill.

This legislation has been drafted behind closed doors, by a task force composed almost entirely of Republican Members, with little opportunity for input from the other side of the aisle. And what that means, Mr. Speaker, is that the ideas of all but a very few Democratic Members were not a part of the discussion when this bill was created. It also means that we are today considering a bill that was introduced only last Thursday and then referred to six committees; referred to six committees, Mr. Speaker, none of which has taken any action on this bill.

This bill has had no hearings, it has not been subjected to the scrutiny by experts in the field of drug abuse; yet, Mr. Speaker, it will be touted as a major anti-drug initiative. It will be managed on the floor not by the chairman of the committee of original jurisdiction, but by the head of the Republican task force that drafted it.

This is not the way we should be proceeding with an issue as important to our Nation as combating the War on Drugs.

My concerns, Mr. Speaker, may be the ultimate inside baseball; however, I think that when the Congress is addressing what may be one of our most pressing, what may be one of our most critical social problems, that we would all be better off and we would all be better served if all points of view were part of this process.

Again, I must point out that no one among us holds a monopoly on condemnation of the use of illegal drugs. We might, however, differ in our views in which way to approach reducing the demand and the use of them. We do have a committee process, Mr. Speaker, and I think had this bill been considered under regular order, it might have far more to offer in our national struggle against the use of illegal drugs.

Mr. Speaker, I am not saying this is not a good bill. It is a good bill as far as it goes. I am especially pleased that the bill includes authorization for the creation of a model substance abuse treatment program for men and women in our prisons.

The relationship between drugs and crime is alarming. The Office of National Drug Control Policy says that as drug use increases, so does the number of crimes that a person will commit. The National Drug Control Policy Office also points out that a 1992 survey of chronic drug users not in treatment found that during the 30 days prior to enrollment in that study, more than 50 percent of both male and female drug users were involved in some kind of illegal activities.

Drug use has led to the substantial growth in the prison and jail population in this country so that today we have, and this is very important, today we have more people behind bars in our prisons in this country than we have men and women in our entire Armed Forces. Clearly this should be our national policy, to use the time substance abusers are behind bars to expose them to treatment in the hopes that they will not return to a life of drugs and crime once they are free.

But again, Mr. Speaker, it should be our policy to keep our children away from drugs in the first place, and while this bill provides \$195 million for a national anti-drug media campaign and \$30 million in authorization for parent involvement programs, it ignores a proposal made by the administration to create a pilot program that would provide 6,500 schools around this country with drug prevention counselors. It also ignores alcohol abuse in teenagers and ignores under-age smoking, both gateway behaviors that can lead to later illegal drug use.

Mr. Speaker, this bill also ignores making more treatment beds available around the country. In fact, an amendment by the gentleman from Minnesota (Mr. RAMSTAD) to address this very important component of drug control was voted down by the Committee on Rules Republicans. The Ramstad amendment, based on a bill which has 92 cosponsors, would help alcoholics and would help addicts who are working and who have health insurance get treatment by requiring health insurers to treat alcoholism as an addiction, as diseases on a parity with other covered diseases. This amendment is a good one, for if we are to combat and confront addictions on both alcohol and drugs, we have to make sure that the treatment is available, we have to make sure that it is affordable.

□ 1645

But unfortunately, Mr. Speaker, the House will not get any opportunity to vote on this very important issue.

Mr. Speaker, there are no easy answers to this very crushing problem. I only wish that my Republican colleagues had included more Democrats in their deliberations. Had they used the tried and true committee process, perhaps the more Democratic voices might have been heard. This is a national crisis requiring the efforts of every American.

I will vote for the bill, Mr. Speaker, but I think it would have been a far

better product had it been created in a truly bipartisan manner.

Mr. Speaker, I reserve the balance of my time.

Mr. MCINNIS. Mr. Speaker, I yield myself such time as I may consume. I have great respect for the gentleman from Massachusetts, and I know that from a personal standpoint he is very adamant about our involvement in the war against drugs, but he also represents the views of some people perhaps who have come to him and complained.

Let me point out a couple of things that I think are important that the gentleman brought up in his statement.

Number 1, anybody who does not like this is free to vote "no." Number 2, the Democrats, when they controlled the Congress, they controlled the Senate, they controlled the House, and they had the current President as President of the United States, they could have put this bill through overnight. It took the Republicans, frankly, who only control the House and the Senate, we do not control the presidency, it took us to push this thing forward. And at that, we are making it bipartisan. The bill itself is constructed from the components of a number of other bills.

This is a good bill. This takes on the illegal drugs out there. I am a parent. I used to be a cop. I know what we need to do. Carroll O'Connor, as I said earlier in my testimony, said, get in between the drugs, intervene any way we can. The Democrats did not do it when they had the House and the Senate and the presidency. This bill does, and it is a bipartisan bill.

Now, there was some comment made about one of my colleagues here did not get his amendment put in order. It was not the content of the amendment that caused the problem, it was that the amendment was not germane to the bill. We agreed to an open rule; we are going to have lots of time for debate. In fact, Mr. Speaker, the time we are allowing for debate here is exceptionally generous.

The basics of the bill are pretty simple. We have 4 or so amendments, we have one hour of general debate and several hours for the amendments, but we have to keep it germane, we have to keep it on subject, and that is what we were attempting to do there.

Mr. Speaker, I reserve the balance of my time.

Mr. MOAKLEY. Mr. Speaker, I yield myself such time as I may consume.

I said I was not opposed to the bill, I was opposed to the process. We have a committee process in the Congress. The Congress meeting in committee is the Congress working. I mean all of a sudden just to set that committee process aside and create a task force, why do we not just do away with all of the committees and make a task force; in fact, get rid of the Committee on Rules and just get a task force. Things

would be done much quicker, but I am not sure that being quick about some of these pieces of legislation is the best way to go.

Mr. Speaker, I yield 7 minutes to the gentleman from Michigan (Mr. DINGELL), the ranking member of one of the committees that was bypassed in this process.

(Mr. DINGELL asked and was given permission to revise and extend his remarks.)

Mr. DINGELL. Mr. Speaker, one can tell this is an election year, because with this wonderful piece of legislation we have authorized a lot of programs which are now in effect and which are now working. A remarkable exercise.

Having said that, this is the most curious process. The bill was introduced Friday last, and essentially, according to the reports that we have been able to get from the departments, authorizes a series of programs that are now in place and that are now working just fine.

The bill was apparently referred to the Committee on Commerce as well as the Committee on Government Reform and Oversight, Committee on Small Business, Committee on Transportation and Infrastructure, the Committee on the Judiciary, Committee on Education and the Workforce. None of them ever had hearings, never did anything on it, because they did not have time. It just came up here Friday.

There are a lot of questions my Republican colleagues need to address. Did any of the committees report on this bill? Did any of the committees have hearings? Did any of the committees take testimony from any citizen or from any governmental agency? The answer is no, they did not. Did any of these committees have hearings on the bill? No. How was this bill drafted? Well, I gather that it was drafted by a Republican task force. Clearly, that is hardly adherence to the regular procedures and orders of the House, or indeed, a proper following of the rules of this body.

Were any outside groups involved in the drafting of this bill? Were there consultations with any government agency or any private anti-drug agency? How did the task force function? Did they comply with the requirements of the sunshine rules? Did they comply with the Rules of the House? How did they decide what outside groups would appear and would testify, or which would not?

The bill has a very interesting proposal and provision in it. It strengthens and lengthens the exclusivity period for antiaddiction drugs by 6 months. Was there any consultation on this matter with the Food and Drug Administration, the Department of Health and Human Services, or the Patent Office? The answer is none.

But interestingly enough, what does this do? It says, if one has an antiaddiction drug that one will get an extension on any period of exclusivity on any drug which one happens to have

in one's drug inventory. Not necessarily the one on which one has the antiaddiction drug, but on any others. And according to the Food and Drug Administration, this could even extend to drugs on which the period of exclusivity has expired, a most remarkable provision. So that a drug owner, or rather a patent holder may then extend his period of exclusivity on any drug in his inventory if he so chooses, even if the period of exclusivity has expired.

Was there any consultation with the Justice Department, the Patent Office, the Food and Drug Administration on this? Absolutely not. But, after all, this is an election year, and this matter should be rushed to the floor so that it may be voted upon, even though almost all the provisions of this bill are now being funded and being implemented and on which programs are now in fact in place.

Now, let us look at some of the requirements of the distinguished gentleman from Ohio (Mr. PORTMAN), who is the principal author of this bill and who is the author of provisions of the rules which relate to requiring the government to take certain actions. For example, did the Congressional Budget Office calculate the cost of the provisions with regard to patients who use antiaddiction? The answer is no, the Congressional Budget Office did not. Was there any estimate of the windfall to the drug companies involved? Absolutely not, none.

Now, let us talk about secrecy. When this Congress adopted the government sunshine amendments to the House rules, something which my Republican colleagues made great hay about, it was promised that television cameras would be allowed in the markups of all bills so that the public would be allowed to watch how our bills are written, and to hear what is said by citizens, by government, by business, by special interests. Was anything of that kind happening here? Absolutely not. It was done by a task force.

Now, I find, after careful reading of the rules and after some 40 years and more service in this place, no mention in the Rules of the House of Representatives with regard to task forces or behavior of task forces or requirements for openness or other good behavior.

Why was this bill written in a task force? Why was it written in secrecy? Why was it written outside the scrutiny of the public? Has the bill ever been reviewed by the administration? The answer to all of the above is no. Has the bill ever been reviewed by health experts, by Food and Drug, by the Attorneys General of the States or of the United States? Has the bill ever been reviewed by any of the drug-opposing agencies like DEA or FDA, or the National Institutes of Health, or the parts of NIH which address the questions of drug abuse and drug addiction? The answer again is no.

Were any members of the public permitted to comment on this legislation to say whether it was good or bad or

whether it should be changed, have more or less money? The answer is no. Are any government analysts in on the drafting of the bill? The answer to this question is no. Does this bill require waivers of the House rules? If so, what rules does it require? Does the bill require waivers of the Budget Act? We do not know. It is not said in here, and the Rules of the House do not apply to this because it was never reported by a committee, it was reported by task force, whatever that happens to be.

Mr. Chairman, I think the question we really ought to ask is, why do we not use the regular order? Why do we not follow the Rules of the House? Is there any information or evidence in the hands of the authors and the sponsors of this legislation that this body would not have considered this bill fairly, speedily and expeditiously? The answer to that question is, there is none.

Why is this bill being brought to the floor in such an extraordinary fashion without hearings, without markup? Is there any frustration with the leadership of the committees? Is there any CBO estimate as to the cost or budget impact? Are there any inflationary impact statements required by the Rules of the House? The answer is, there is none. Is there any regulatory impact statement? The answer is, there is none. Are there any requirements which are imposed on reported bills complied with here, as in the case of reports on unfunded mandates, as required so capably by my good friend who is the author of this bill who seems in some curious fashion to be anxious to evade the requirements of an imposition which he has put into the rules.

There is no evidence whatsoever that there has been any evasion of the responsibilities of the committee's right by good Republican Members like the gentleman from Virginia (Mr. BLILEY), my friend; it is just that this, my dear friends, is an election year. This is a wonderful opportunity to rise and say, we are doing something about drugs, and what are we doing? We are doing something which first of all evades the rules, second of all evades the ordinary practices of the House, and third, which evades any requirement that we have proper consideration of this legislation, and which puts on the floor proposals which are already being implemented by the Government of the United States and for which Members of this body have already voted money for the implementation thereof.

Mr. Chairman, I think this is the most curious process. It is perhaps excusable by the fact that my Republican colleagues do not want to point out the fact that these things are already being done. And I can understand why they would not, because if they are going to pass a piece of legislation which is essentially a bill to celebrate an oncoming election by passing a piece of legislation that does not mean anything,

one does not want to have any committee scrutiny which shows that the bill does not do anything. That is the problem that we have here.

The rules of this House have served this body well. The Rules of the House work. They say that they will consider legislation well. They say we will know when there are windfalls for special interests, like as in this legislation which provide for a windfall for God knows who for the Lord only knows how much and for any product which they put on the market which is protected by exclusivity.

This is a most remarkable exercise. It is one which I would assume my Republican colleagues would practice only in an election year, because that is the only time that this kind of slovenly chicanery, sloppy legislation and irresponsibility needs to be practiced, unless my colleagues on the other side also choose to do so in odd-numbered years.

□ 1700

Having said this, reject the rule. Let the committees look at the bill. Give the committees opportunities to consider the things in this legislation in the light of the expertise of the committees. The committees are run by Republicans. There is no mention of task forces in the rules of the House.

Bring the people into the process. Let us let sunshine work. Let us find out what the legislation does. Let us not go home and kid the people and say we passed a great piece of legislation without admitting that almost all of it is now being implemented by law and this whole exercise is related to the fact that the election is 7 weeks off.

Follow the rules of the House of Representatives. They have been crafted by wiser men than any who sit here, and they work and they see to it that the public is well served in the light of day by careful consideration of the views of all the people and an understanding of what the legislation would do.

Reject the rule, send it back to committee, let us have a proper look at it, and we will bring you a piece of legislation of which my colleagues could be proud instead of having to sneak home and lie to our people about how something was done which in fact was not done.

Mr. MCINNIS. Mr. Speaker, I yield myself such time as I may consume.

Of course, the gentleman's verbal assault that we have just listened to for the last 7 minutes if anything indicates it is an election year. It is his words. Put all that aside.

Obviously, we are not disobeying the rules of the House. If we were disobeying the rules of the House or if we were not following the rules of the House, the Speaker would rule us out of order. It is within the rules of the House of exactly what we are doing, and we are dealing with the drug problem.

I know that the gentleman is concerned; that he claims this was done in

secrecy. This was not done in secrecy. This is not a defense secret. This is done in the public. We see it. We see everybody in the streets, the problem.

The gentleman has every right to vote against this bill. The gentleman has every right to get the Members on his side of the aisle who, by the way, did not pass this kind of legislation, who did not do something about this, in my opinion, when they controlled both Houses and the Presidency.

Instead, when we do, we get a few Members over there that take a verbal assault on what I think is a well-intended bill with lots of substance in it.

Let us talk. The gentleman there spent 2 or 3 minutes on something about the provisions in the bill dealing with market incentives to pharmaceutical manufacturers. If the gentleman would read the manager's amendment and if the gentleman would vote the first amendment up, all his concerns spent in the first 3½ minutes of that verbal assault will be taken care of like that. That amendment handles it.

It was a legitimate point that the gentleman brought up, but the staff needed to tell him, sir, this is covered in the first amendment if we vote for the first amendment, which I think will pass by a strong majority. It is taken care of. That is why we have that manager's amendment. We want to cleanse this bill to get it out there. But we do not want to delay the bill.

Mr. Speaker, I yield such time as he might consume to the gentleman from Illinois (Mr. HASTERT) who has put a remarkable amount of time into this. We appreciate it very much. The gentleman understands this issue. He understands the significance of it. I think it is important we hear from him for a few minutes.

Mr. HASTERT. Mr. Speaker, I thank the gentleman from Colorado for yielding to me.

Mr. Speaker, certainly what we have before us this evening is the other half of a very important piece. If we are going to look at the totality of drug abuse in this country, we certainly have to look at the supply side where drugs come from, how they come across our borders, but we also have to look at the other issue, and that is the issue of demand, and how do we stop demand in our schools, in our neighborhoods, on our highways, in our prisons. How do we get at that?

The gentleman who is the former chairman of the Committee on Commerce went at great length, and I think he has great concern, but we are trying to solve the problem. As the gentleman would know, this covers across the jurisdictions of six committees.

Have there ever been hearings? Yes. I will tell my colleagues, in the Committee on Government Reform and Oversight, we have had multiple hearings on this issue.

This bill does entail areas and titles that deal with the National Youth

Anti-Drug Media Campaign Act. Yes, it is time that we probably ought to authorize something that we have appropriated for. That is the rule, and that is the law, and that probably ought to be done.

We talk about a Drug-Free Workplace Act. That is certainly one of the components that we want to have in this country. We talk about Drug-Free Teenage Drivers Act. We talk about the Drug-Free Prisons and Jails Act, Drug-Free Schools Quality Assurance Act. We talk about Drug-Free National Clearinghouse Act, a Drug-Free Parents Empowerment Act, and go on to Antiaddiction Medication Development Act, and also a Commission on Role of Medication Education in Reducing Substance Abuse.

We all talk about Congressional leadership and community coalitions, and we talk about reduction and rejection of drug legalization that is rampant in this country and certainly moving further and further by some interest groups into our cities and the reorganization of the Federal demand reduction efforts.

Yes, this bill certainly does have a wide jurisdiction. It covers a lot of issues. It covers cross-jurisdictional areas. We have been very pleased to have the chairmen of those committees have input, have their staffs have input, and to work through and make sure the resources are there to get this job done.

But I have to tell my colleagues, the gentleman from Michigan does bring up the exclusivity of drugs. We have taken that out. It is not in the bill. It is not in the manager's amendment and exonerated from there.

I think that the process certainly has worked. We have perked up some of those issues. What we need to do now is move forward and to try to put together a holistic anti-drug program so that we can really have a drug-free America.

What is a drug-free America? There is seven or eight areas that we have to look at. We have treatment. We have to deal with treatment. It is sad that those folks who already have been addicted by drugs need to be able to have the treatment.

It also reduces demand. We need to do the community prevention that the gentleman from Ohio (Mr. PORTMAN) has worked on for years and has been a leader in this Congress in doing prevention and community prevention and school prevention. Years of work.

We also have looked at the whole area of law enforcement. Yes, we need to have better communication between our law enforcement agencies, people working together and communicating together.

We have to do a better job on our borders, and we talked about that in a bill earlier today. We have to do work on areas where these drugs come from.

One of the things that neither this bill or the other bill does but we have to deal with, and it will be coming on

the floor of the House because it did go through multiple committees and we hope to have that bill on the floor before it is too late to move it, but it is money laundering.

We would not have people growing coca plants or heroin through poppy plants, we would not have them manufacturing it, we would not have them smuggling it, we would not have them remanufacturing in Colombia and Mexico, we would not have them moving across the border, we would not have them distributing it, all those things cost a lot of money, if they did not get \$50 billion or \$60 billion off our street corners every year and half; that profit ending up in the pockets of drug lords outside this country.

What would we have to do? The next step, and it is not in these two bills, is money laundering; and we have people working on that as well. But we have to look at the holistic approach.

If we are going to stop drugs and we are going to be serious, instead of blathering about what is not in the bill, if we are going to be serious about stopping drugs in this country, we need to take a holistic approach, we need to do the demand side, which the gentleman from Ohio (Mr. PORTMAN) has done a great job at, but we have to do the supply side as well.

So I commend the Committee on Rules for bringing forth this rule. I commend the gentleman from Ohio (Mr. PORTMAN) and other Members of the task force for putting in hours and days for trying to put a quality piece of legislation together. I certainly hope that we can pass this rule and pass legislation.

Mr. MCINNIS. Mr. Speaker, I yield such time as he may consume to the gentleman from Ohio (Mr. PORTMAN), a gentleman who has spent a lot of time on this. He is very knowledgeable on this subject, and I think a lot of merit goes to him for the substance he has put together on this bill.

Mr. PORTMAN. Mr. Speaker, I thank my friend from Colorado for yielding to me.

Mr. Speaker, I wish that our colleague, the gentleman from Michigan had stayed around to hear a response to his many concerns on the legislation. But since my friend, the gentleman from Massachusetts is here, maybe he will pass along some specific answers to his questions.

This may give him some comfort, or it may not, because the question is: Are we serious about this drug effort or not? If we are, I think we have got to try to be, not just bipartisan, but nonpartisan, and move forward and do the right thing.

There are six committees of jurisdiction that we talk to on this issue. It would have been impossible, frankly, to go through those six committees and come up with this legislation in this legislative year. We thought it was an important issue, one that needed to come to the floor. We did consult with them extensively.

In fact, the provisions in this bill which are cosponsored by my friend, the gentleman from Wisconsin (Mr. BARRETT), Democrat, and myself are the result of a year-long consultation period, including with the Office of National Drug Control Policy, the drug czar's office.

There are other Democrats who are original cosponsors of the legislation. Committees waived their jurisdiction because, frankly, we solved their problems.

The gentleman from Michigan (Mr. DINGELL) focused on the anti-addiction medication provision, which he found to be inappropriate.

I will say two things about it. Number one, it is not in the legislation because his committee objected to it and instead there is a report, so we took the responsible course there along the lines that he would recommend. I will also say, though, that the National Academy of Sciences and the National Institute on Drug Abuse have both recommended the provision we had in the bill, and I hope that his committee will get busy on that kind of legislation because we do need to give companies more incentives to provide for anti-addiction medication.

With regard to unfunded mandates, the point that he made, I will say that there are no unfunded mandates in this legislation and we have, indeed, checked with the Congressional Budget Office on that. Because the gentleman from Michigan (Mr. DINGELL) said that we had not, I thought it was important to set the record straight on that.

I found it very curious that the gentleman from Michigan (Mr. DINGELL) went on and on about how we need to stick to the Rules of the House and yet complained that in this legislation we are authorizing appropriations. That is what we are supposed to do, and that is why the drug-free media campaign, which is a \$195 million expenditure, is being authorized for 4 years so that there is a sustained effort and a commitment by this House to move forward on that very important initiative.

I think that is the right thing to do. It also happens to be within the Rules of the House, and I would think that instead of criticizing us for that and complaining that we are not following the rules, my friend, the gentleman from Michigan, and others on that side of the aisle would be pleased that we are indeed following the rules.

The drug-free workplace language is one example that has gone through this House already. We put it in this legislation because, frankly, we want it to pass not just the House but also the Senate and be enacted into law by signature from the President. We think this is a better place for it. This is a vehicle that probably will go somewhere. So I think that is the responsible thing to do.

I would just end by saying that we brought this legislation up under an open rule and I commend the Committee on Rules and the gentleman from

Colorado (Mr. MCINNIS) for doing that so that Members would have an opportunity on the floor if they wanted to bring up any germane amendments to the legislation, and we will see some today, but I would also say that this issue must be addressed.

I do think that this is going to be a nonpartisan exercise in the end, and I think that is the way, again, we must address this issue for the sake of our kids and future generations.

Again, I want to commend the Committee on Rules for bringing this to the floor with an open rule to allow opportunity for amendment and comment.

Mr. MCINNIS. Mr. Speaker, I reserve the balance of my time.

Mr. MOAKLEY. Mr. Speaker, I yield 2 minutes to the gentleman from New Jersey (Mr. PALLONE).

Mr. PALLONE. Mr. Speaker, let me just point out that the problems that the gentleman from Michigan (Mr. DINGELL) pointed out, I think, were misrepresented by the Republicans on the other side.

Basically, what the gentleman from Michigan (Mr. DINGELL) was saying, and I agree, is that there is not very much in this bill that is not already the law, and that it is being brought up at this time to try to give the impression during an election year that somehow the Republican majority is doing something significant with regard to this issue with regard to drug addiction.

Secondly, he pointed out that we do have included in this bill a special interest provision which thankfully he caught and now the Republican side is saying that they are going to take out in a subsequent amendment.

Let me say the problem with that is the mischief that we see when a bill like this does not go before the committee, does not see the light of day, does not have the opportunity for public debate and for input from the public. That is when we get these kinds of special interest provisions that thankfully were caught.

What else might be in this bill because it did not go through the regular process? That is the point that he made.

Let me just reiterate again the problem with this special interest provision if it is not taken out and if somehow this body does not approve to take it out, basically what it allows is an extension of this exclusivity for 6 months and what that means is that those who might want to produce these antiaddiction drugs in a generic sense, as a generic drug, would not have the opportunity to do so because of the extension of the exclusivity.

What that means is that these drugs become more expensive, and the big issue before this House with regard to health care in general and certainly with regard to drugs is their affordability. People cannot afford a lot of drugs. They do not have access to them if they cannot afford it.

One of the points we are making is if there was that extension of exclusivity

it would not allow generics and others to come in and produce a drug in a way that is less expensive and more available to the public. So this was a special interest provision that was put in there that was anti-consumer, anti-public interest, and I am glad that it is now being taken out.

What other mischief is in there that we have not had an opportunity to look at because of the fact that this did not go through the committee of jurisdiction and did not have an opportunity for hearing? That is the problem. We are not against the bill per se but we are against the way that the Republicans went about this.

□ 1715

Mr. MCINNIS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the gentleman from New Jersey (Mr. PALLONE) surprises me. If the gentleman thinks there is mischief in the bill, he should vote "no." The gentleman says on the one hand there is mischief in the bill, and then says that he is not going to vote against this bill. If what the gentleman is saying is true, he ought to vote against it. He has an obligation to vote against it.

Mr. Speaker, the reason the gentleman is not going to vote against it is because there is not mischief in the bill. The gentleman knows that this bill is a good bill that helps us fight this problem on the streets, and that is the drugs.

Now, as far as the process, and we go back again, the gentleman from Michigan (Mr. DINGELL) earlier, and now the gentleman from New Jersey, are suggesting some type of secret process. Hey, this is our fight. It is a Democrat fight. It is a Republican fight. We are all together on this. Our common enemy here are the illegal drugs on the street.

This is not a battle in secret. The secrets are held by the drug cartels. We are going after them and we want the help of our colleagues on the other side of the aisle, and I hope they support us today and help us in that battle.

Mr. Speaker, I reserve the balance of my time.

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

Mr. MCINNIS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, in conclusion, the gentleman from Massachusetts (Mr. MOAKLEY), made a point earlier after my introduction that he was going to vote for the bill, and that is correct. I did not want to imply that he was not.

I understand from sitting in the Committee on Rules and listening to the gentleman from Massachusetts last night, there is no question about his commitment to fight these drugs and to do whatever will effectively fight them, and I want to make sure that is of record.

Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The previous question was ordered.

The SPEAKER pro tempore (Mr. SHIMKUS). The question is on the resolution.

The resolution was agreed to.

A motion to reconsider was laid on the table.

The SPEAKER pro tempore. Pursuant to House Resolution 538 and rule XXIII, the Chair declares the House in the Committee of the Whole House on the State of the Union for the consideration of the bill, H.R. 4550.

□ 1717

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the State of the Union for the consideration of the bill (H.R. 4550) to provide for programs to facilitate a significant reduction in the incidence and prevalence of substance abuse through reducing the demand for illegal drugs and the inappropriate use of legal drugs, with Mr. SHIMKUS in the chair.

The Clerk read the title of the bill.

The CHAIRMAN. Pursuant to the rule, the bill is considered as having been read the first time.

Under the rule, the gentleman from Illinois (Mr. HASTERT), or his designee, and a Member opposed each will control 30 minutes.

Mr. HASTERT. Mr. Chairman, I designate the gentleman from Ohio (Mr. PORTMAN) to control my time.

Mr. BARRETT of Wisconsin. Mr. Chairman, though I am not opposed to the bill, I ask unanimous consent to control the 30 minutes of general debate time.

The CHAIRMAN. Is there objection of objection to the request of the gentleman from Wisconsin?

There was no objection.

The CHAIRMAN. The gentleman from Ohio (Mr. PORTMAN) is recognized for 30 minutes.

Mr. PORTMAN. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I thank the gentleman from Illinois (Mr. HASTERT) for allowing me, as his designee, to manage the legislation. The gentleman from Wisconsin (Mr. BARRETT), who is going to control the time on the other side, is my original cosponsor on this legislation, and I want to thank him, particularly after we just saw a little display of something less than nonpartisanship. I guess we would call it partisanship.

Mr. Chairman, I thank the gentleman from Wisconsin for being willing to step up to the plate to address the concerns that we have all heard expressed this afternoon and this evening on the rising problem of illegal drugs in this country and for his willingness, frankly, to show leadership on this issue over the years and to cosponsor this important legislation.

Mr. Chairman, the rising tide of teenage drug use in this country is indeed a national tragedy, and I do not think there is anything this Congress could

be doing this week that is more important. The facts speak for themselves, and we have heard a lot about them today. From the period of 1979 to 1991, we had a 72 percent reduction of teenage drug use in this country. Since that time, teenage drug use has more than doubled.

Actually, it is worse than that in the sense that it is among younger and younger kids. We have a lot of data on that. The number of fourth through sixth graders, kids in elementary school, experimenting with marijuana has increased 71 percent just since 1993.

Today, teenagers say they can obtain drugs within a day. LSD, marijuana, crack cocaine, methamphetamines and other drugs are more available now than ever.

This translates into more addiction, more ruined lives, more lost dreams. And, of course it also leads to more violent crime, more school dropouts, more health problems, and many other quantifiable costs to our society.

But this is not about statistics and numbers. It is about people. It is about people's lives. I am sure each Member in this Chamber knows constituents, maybe a friend, maybe a family member who has fallen into the trap of addiction and suffered the consequences.

Mr. Chairman, shortly after I was elected 5 years ago, a 16-year-old in my district died of a combination of smoking marijuana and huffing gasoline. His name was Jeff Gardner. Jeff's mom came to see me in Washington and she had a very simple question for me: "What are you going to do in my community to help me and other families so that they do not have to go through the pain that I am experiencing?" I told her about the billions we were spending on criminal sanctions, on interdiction efforts that are so important to keep drugs out of the country. She asked me again, "What are you doing in my school? In my neighborhood?"

Mr. Chairman, I have got to say, I was not satisfied with the answer that I could give her. I got involved in this issue both at home through community coalitions and here through legislation in large part because I could not give her the response she deserved.

The real tragedy is that based on sound research, we know what drives increases in drug use. It is not only the availability, but it is the attitude kids have about the dangers of drug use and the extent to which they believe that society, that society has accepted drug use.

Wherever our kids turn for entertainment, TV, movies, music, they find drug use glamorized. And whenever they seek role models, professional athletes, Hollywood stars, musicians, they all too come away with the perception, not accurate, but the perception that drug use is accepted and there is no real consequences.

Even here in Washington, young people have not been hearing a clear, consistent moral message that drugs are

dangerous and that they are wrong. I am not trying to suggest that the White House, this Congress, or any national figure can be held responsible for the drug habits of our children. But it is clear that we have not had the kind of sustained national moral leadership on this issue that was critical to the substantial reduction in teenage drug use back in the 1980s.

We have also lost ground on the home front. Surveys show that many parents of the baby boom generation, my generation, approach this issue and approach their kids with great ambivalence. With all of these mixed messages, it should be no surprise to us that teenage drug use is on the rise.

But there is a solution. In fact there are multiple solutions. The gentleman from Florida (Mr. MCCOLLUM), and the gentleman from Illinois (Mr. HASTERT), who spoke just a moment ago, have done a great job today in articulating the need to do more with regard to what is referred to as the "supply side," such as enhanced interdiction, tightening border patrols, and eradicating drugs in source countries.

The bill that we are discussing now, the Drug Demand Reduction Act of 1998, recognizes that restricting supply is important, but it also recognizes that the supply efforts alone can never solve our problems here at home.

Why? Well, first, of course, methamphetamines and other drugs can be produced in someone's basement. Marijuana can be grown in the backyard. But second and more importantly in my view is that as long as the demand is there, drugs, even those from outside our borders, will find their way onto our streets and into our neighborhoods.

While the supply efforts are a very important part of the balanced approach, we as a Congress must do whatever we can to stop the growing demand for drugs. This bill does that. It takes steps toward that by expanding and increasing prevention, education, and treatment.

Mr. Chairman, I believe this is an area where the United States Congress can and must help and play an important role. I think we have three important roles:

First, as we did last year with the Drug-Free Communities Act that we are building on today, we can empower parents, teachers, local law enforcement, local communities, to address the drug problem and give them some of the tools that they need to do so at the grassroots.

Second, Congress can ensure that the existing Federal anti-drug prevention and treatment programs work more effectively by reducing red tape and duplication, targeting funds to programs that really work, finding the best practices around the country and funding those practices.

Finally, I think Congress has a very important role to play in sending that clear and consistent message that drug use is dangerous and wrong. Again, it

has worked before. From 1979 to 1991, we saw a 72 percent reduction. We need to look back at that. Why did that happen? We had a clear and consistent national message at that time. The "Just Say No" campaign was not just a slogan; it was a national movement and it included at the grassroots engaging parents, engaging teachers, coaches, law enforcement. That resulted in a substantial reduction of drugs because we changed attitude.

The act before us today is intended to reengage those parents, teenagers, teachers, and employers, law enforcement, health care professionals, and others to make existing Federal programs more effective and more accountable and to send that clear and unequivocal message again on the dangers of drug use.

Among other features, the legislation will: Reinvigorate the parent movement that worked so well in the 1980s through targeted grants, training at work, and access to information that parents need.

It will implement new initiatives to keep drugs out of schools and workplaces.

It will give States incentives to require kids to be drug-free in order to get their driver's licenses. Nothing is more important to a 16-year-old.

It will give parents and other role models one-stop shopping, one national clearinghouse where they can go to get information. One 1-800 number where any parent can call, any drug counselor can call, find out the answer to their question, and be connected with a local anti-drug organization or find substance abuse counselors in that person's area.

As the next step, we require the President's drug czar, the Office of National Drug Control Policy, to recommend to Congress specific ways to eliminate duplication, to further streamline the Federal anti-drug bureaucracy which is currently spread, incidentally, over 54 different agencies and departments.

Finally, at a time when 80 percent of the inmates in our jails and prisons are there because of substance abuse, and 50 percent of State parole and probation violators are under the influence of drugs, alcohol or both when they committed their new offense, this bill will put us on track toward eliminating the drug problem that festers in our jails and prisons. For the sake of our neighborhoods, and for the peace of mind of our constituents, we have to get at the revolving door of substance abuse in our criminal justice system.

Mr. Chairman, the provisions of this bill, as I said earlier, were developed over the past year with the help of the President's drug czar, General Barry McCaffrey. They were also developed in conjunction with the Speaker's Task Force on a Drug-Free America, chaired by the gentleman from Illinois (Mr. HASTERT). Members on both sides of the aisle had input from the relevant committees, and some people had good ideas who were not on the committees.

Very importantly, we got a lot of input from outside groups, those groups that work in the trenches day in and day out on this issue. That would include CADCA, the Community Anti-Drug Coalitions of America; PRIDE, the Parents's Resource Institute for Drug Education; the Institute for a Drug-Free Workplace; CASA, Joe Califano's Center on Addiction and Substance Abuse; the Drug-Free America Foundation; the Partnership for a Drug-Free America; the National Council on Crime Prevention. These and other groups gave critical input to the legislation and we all owe them a tremendous debt of gratitude.

Mr. Chairman, the Drug Demand Reduction Act is not the end of the road in our effort to reduce the demand for drugs in this country. It is not a cure-all, but it is an important next step building on the Drug-Free Communities Act that this Congress passed, again on a nonpartisan basis last year, to ensure that our national drug control policy continues to focus on what we know works: Effective treatment, effective education, and effective prevention. Doing so at the local level, but doing so with a strong and unequivocal message from the national level.

Mr. Chairman, if we keep the pressure on, if as a country we can maintain our vigilance, I am convinced that we can reverse the troubling trends of teenage drug abuse in this country. We can do so and in doing so we will save lives, we will restore dreams, and we will strengthen our communities for the next century.

Mr. Chairman, I reserve the balance of my time.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I rise today to express my support for this anti-drug legislation. I would like to thank the gentleman from Ohio (Mr. PORTMAN) for his diligent work on an issue that is critical to the future of our Nation.

Each year drug abuse kills 14,000 Americans and costs taxpayers nearly \$70 billion. But beyond these statistics, drug abuse has caused immeasurable pain for millions of Americans of all ages, races, and income levels.

This bill will focus the attention of Americans on this tremendous problem. Whether it is children when they are watching TV, parents when they go to work, or prison inmates when they are a captive audience.

The drug-free prison and jails portion of this bill takes a significant step to reducing crime in our Nation's streets.

□ 1730

The National Center on Addiction and Substance Abuse at Columbia University has reported that approximately 80 percent of the 1.7 million inmates in American prisons and jails were either high on drugs when arrested, stole property to buy drugs, or had a history of drug and alcohol abuse.

Because we know that even inmates who receive severe penalties for their crimes will eventually be released into our communities, we owe it to the people who live in those communities to ensure that these inmates are treated for their addictions when we have the opportunity. A Bureau of Prisons report released earlier this year indicates that Federal inmates who received drug treatment are 73 percent less likely to be arrested in the first 6 months after their release than inmates who did not receive treatment. This bill will create a demonstration program to create and evaluate model programs to test and treat inmate addictions. It is my hope that these programs will then be replicated throughout the Nation. I have sponsored separate legislation with the gentleman from Michigan (Mr. CONYERS) to provide funding to do just that.

Mr. Chairman, I am very pleased this bill includes a component to authorize the National Youth Anti-Drug Media Campaign. We know that young people who reach age 21 without using illegal drugs are unlikely to ever do so. The Media Campaign uses realistic hard-hitting messages to convince young people that drugs are the wrong way to go, and to encourage parents to talk to their children about this critical issue.

I joined the Nation's drug czar, General Barry McCaffrey, in pushing for the creation of this program last year. And since then, the campaign has been running in 12 pilot cities, including the City of Milwaukee in my Congressional District. We are already starting to see the campaign's impact in these cities. And just last month the campaign went nationwide. By the end of the year the Anti-Drug Media Campaign will be running at full force, with at least four advertising exposures reaching targeted audiences every week of the year.

It is important this Congress shows its lasting commitment to keeping kids off drugs by authorizing this program. This bill will support the program through the year 2002.

Through the inclusion of the Drug-Free Workplaces Act in this legislation, the bill will also provide drug-free working environments. This bill will create a demonstration program to make grants to nonprofit organizations that have expertise in this area. These organizations will then work with small businesses to develop comprehensive drug-free workplace programs. Because a majority of adults who use drugs are employed, and small businesses employ a majority of our Nation's work force, the workplace will be a critical battleground in our efforts against drugs.

It is important to note that this bill will require that employees have access to treatment options. We must ensure that drug-free workplace programs allow and actively encourage American workers who have addiction problems to seek treatment. Drug-free workplaces should be focused not on

punitive measures, but on helping employees overcome drug addictions.

Mr. Chairman, this bill will not end all drug abuse in America. It is not a Mark McGwire bill or a Sammy Sosa bill. One swing and a home run will not win this game. But this legislation will take steps to de-glamorize drugs in the eyes of young people, to give parents the tools to keep themselves and their children drug free, and to keep drug-addicted prisoners from continuing the cycle of drugs, crime and violence.

While I support efforts to interdict drugs and to strengthen our borders, the real drug war is not being fought only in Colombia, it is not being fought only in Mexico, it is also being fought in the hearts and minds of children in the school yards and the parents at home. We will not drive down drug abuse unless we commit ourselves to a comprehensive approach of prevention, education, treatment and interdiction. We owe it to our constituents to take this comprehensive approach to drug use. I urge my colleagues to pass this bill.

Mr. Chairman, I reserve the balance of my time.

Mr. PORTMAN. Mr. Chairman, I yield 1 minute to the gentleman from Illinois (Mr. HASTERT), the chairman of the Speaker's Task Force on a Drug-Free America, and a real leader on this issue both on the supply and the demand side.

Mr. HASTERT. Mr. Chairman, I want to thank the gentleman from Ohio for yielding me this time. I want to take a minute, I will not take long, and talk about the substance of the bill because I think the quality of this bill stands on its own.

I just want to thank the gentleman from Wisconsin, who is cosponsor. He sits with me on a subcommittee of the Committee on Government Reform and Oversight, and we have had hours and hours and hours of hearings on this.

I also want to acknowledge the gentleman from Maryland (Mr. ELIJAH CUMMINGS), who is not here; that gentleman certainly has a passion about what are the problems in his area; the gentleman from Ohio (Mr. ROB PORTMAN), who has done a wonderful job, and the other members, such as the gentleman from Indiana (Mr. MARK SOUDER), and others on our committee who have worked at this not just days and months, but literally years to get something done.

I think we are finally coming to fruition. There are two pieces to this issue, certainly the supply side, but the most important for our communities, so moms and dads and teachers and preachers can get together and get the job done, and that is demand.

I salute all these gentlemen and look forward to voting on this bill.

Mr. PORTMAN. Mr. Chairman, I yield 5 minutes to the gentleman from New York (Mr. GILMAN), the distinguished chairman of the Committee on International Relations, a leader on this issue for many years. We heard

from him earlier today on the supply side.

(Mr. GILMAN asked and was given permission to revise and extend his remarks.)

Mr. GILMAN. Mr. Chairman, I thank the gentleman for yielding me this time, and I rise today in strong support of H.R. 4450, the Drug Demand Reduction Act, and I want to commend the gentleman from Ohio (Mr. PORTMAN) for his extensive work in preparing this measure, authoring it, and offering it today for our consideration.

The threat posed by illegal drugs is one of the most critical national security threats confronting our Nation, and this is not mere rhetoric but the cold truth. The vast majority of illegal drugs in this Nation comes from overseas, and the sooner we recognize that drugs are as much a foreign as domestic problem, the more effective our response will be.

There are many who say we, as a Nation, spend too much on combating drugs. I argue that those critics ignore the true cost of drug use on our society. In addition to the cost of supply and demand reduction, drug use costs billions each year in health care costs, lost productivity. Drug use also has intangible costs in terms of broken families and destroyed lives, many of them young lives.

As chairman of our House Committee on International Relations, I have long been dedicated to fighting the scourge of illegal drugs. Regrettably, currently this is a battle which we as a Nation have been losing. Too many of our young people are following the seductive message advocating drug use only to find out too late that message leads to a future devoid of hope. Yes, drugs are not recreational and drugs are deadly.

During the 1980s we made remarkable progress in reducing illegal drug use, eliminating the perception that drugs and drug abuse were socially acceptable. Between 1979 and 1992, there was a 50 percent drop in "past month" drug users from over 25 million to just over 12 million. Our focus during that period was twofold and followed a dual-track of reducing both supply and demand.

Regrettably, the current administration abandoned that approach and focused on reducing demand. The result has been a sharp increase in the supply of drugs, the highest purity levels ever encountered, and a resurgence of teenage drug use. From 1992 to 1996, teenage marijuana use doubled. More distressing is the data showing a significant rise in heroin use among our teenage population.

In essence, this administration's policy of focusing on demand reduction is being overwhelmed by the current state of the drug market. And with many of our cities literally awash in heroin, the drug dealers are using supply to create demand.

In order to effectively combat the problem of illegal drug use, we are going to have to employ a balanced approach of reducing supply and reducing

demand and doing it simultaneously. It also requires efforts from all levels of government and society.

H.R. 4450 addresses the demand side of the drug equation by establishing several very important programs designed to reduce drug usage by children and adolescents. It does this through promoting anti-drug, anti-addiction medications, renewing a national anti-drug message using key public figures, and providing parents with additional resources to combat drug usage in their communities through organizations created for that purpose.

The third component is the most important part of this bill. Everyone knows the vital role parents play in instilling a sense of morals and values in their children. Government cannot solve the drug problem by itself. We need to return to the formula which worked in the 1980s, aggressive interdiction efforts at our borders and abroad, and a visible national "zero-tolerance" message here at home.

Accordingly, Mr. Chairman, I urge my colleagues to support this worthy legislation. For too long we have had a disjointed approach to combating illegal drug use. If we as a Nation are willing to reduce the use of tobacco, certainly we can do the same for the use of illegal drugs.

This bill provides significant assistance in reducing demand by targeting an Anti-Media Campaign, by a Drug-Free Workplace program, by a Drug-Free Teenage Drivers Act, by a Drug-Free Prisons and Drug-Free Jails Act, by a Drug-Free Schools Quality Assurance Act, by a Drug-Free Information Clearinghouse Act, and by a Drug-Free Parent Empowerment program. Excellent ideas and excellent programs. Certainly by working on all of these, along with supply reduction, we can win this war against drugs.

Mr. PORTMAN. Mr. Chairman, I yield 3½ minutes to the gentleman from Indiana (Mr. SOUDER), a good friend and expert on this issue who handles the drug-free schools part of this for the Speaker's Task Force on a Drug-Free America so well.

Mr. SOUDER. Mr. Chairman, I want to thank the gentleman from Ohio for his leadership, as well as the Speaker, who by putting this at the top of his agenda and our Republican agenda, has forced us and enabled us to work in multiple different ways.

I also want to pay tribute to former Congressman and chairman of the Committee on National Security, Mr. Bill Zeliff, who when the Republicans took over Congress, began these hearings 4 years ago, of which we have had over 30 in that subcommittee and have worked to follow up many years of effort of the gentleman from New York (Mr. GILMAN), when he was with the Narcotics Select Committee. This is not something that just popped up in an election year. Many of us have been working for years and years.

I want to illustrate, too, it is not just in this bill. Earlier we had the impres-

sion that, well, this is a few last-minute things thrown together. But, in fact, I have been working over in the higher education bill where we have a major breakthrough in student loans, where we are going to hold students accountable. If they are found guilty of using drugs, they can lose their loan for 1 year. They can get back by testing free during two drug tests. But then if they have a second drug offense, they lose it for 2 years. The third time and they are out. This is a major breakthrough.

We also have in that bill awards, where we have worked with the gentleman from Massachusetts (Mr. JOE KENNEDY), to establish some awards for colleges that have drug and alcohol abuse programs that are national models.

We have had several bills in the Committee on Education and the Workforce where we have included anti-drug education as one of the things that we need to do with parents. As the Speaker said, this needs to be a full court press everywhere, and we are trying to do that in prevention and treatment efforts.

In juvenile justice, as we heard in yesterday's debate, where we had accountability and prevention programs, the appropriations subcommittee chairman, the gentleman from Kentucky (Mr. ROGERS), included additional money for drug courts, a very creative effort to work with these different youth.

The gentleman from Ohio (Mr. PORTMAN) had one of the most creative initiatives, which we just this past week have had the first grants for community-wide drug efforts, and we worked that through different committees.

There was a reference earlier today, that we had not had hearings. There is a section in this bill, drug-free workplace, which is one of the largest sections. I know the subcommittee I chair is a small committee, it is called empowerment, it is dealing with people who do not have much power and how we can address these things. It is part of the Committee on Small Business that tends to get run over by some of the bigger committees, but the fact is we had a hearing, and we passed it through. The committee came in front of the House, but it is deadlocked in the Senate. And the only way to move that bill is to put it inside this bill. But just because we are not the Energy and Commerce Committee does not mean we did not have hearings.

We also have a provision in here for the Safe and Drug-Free Schools Act, an award that deals with schools. Now, that authorization is not up. We have the money in the Labor-HHS. I have one perfecting amendment later in this that we have worked with the gentleman from Pennsylvania (Mr. GOODLING), but it is an interim step. Clearly, we are in the process of revising and need to work with the major reauthorization.

The point here is that we are working for a comprehensive effort. I commend the gentleman's leadership. This bill also deals with the media, which is an important thing, which we have heard from the impact of Hollywood and the impact of the music industry, and I am proud to be associated with this. This is only part of a much larger effort but a part that if we did not put it here, it was not going to move.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentleman from Missouri (Mr. BLUNT), a good friend who has also been involved in the task force.

□ 1745

Mr. BLUNT. Mr. Chairman, I want to thank the gentleman from Ohio for his leadership in this critically important bill. Earlier today we addressed the other side of this problem, the supply side of this problem. The truth is if we were able to do everything we wanted to do in sealing our international borders, we would still have a drug problem. The truth is that the methamphetamine problem, the other domestic drug supply problem, is so great that no matter how effective a job we do on the important work we committed ourselves earlier today, we have to deal with this issue of demand. This is a great follow-up on the Drug-Free Communities Act that was passed last year. I was glad to hear our friend the gentleman from Indiana (Mr. SOUDER) mention that many of the things in this bill are things that we have given some funding to but have not fully authorized. And other things in this bill are items that have had hearings and have passed the House but have not gone further. We need to take all of those things and put them in such a powerful package that they can no longer resist becoming part of an overall effort to help parents, to help communities, to help schools in the fight against this problem.

This is a problem that Americans pay a dramatic price for every single day. This kind of approach to the demand side from a media campaign to schoolhouses, to parental involvement, is the kind of approach it takes to make that difference. This is the kind of commitment this Congress needs to make. It is the kind of commitment we need to direct the Federal Government to make, and it is the kind of commitment the country needs to understand how broad and how deep the commitment has to go. I believe this legislation does that. I am proud to be part of it and certainly proud to really recommend it to my colleagues and encourage the great efforts of the gentleman from Ohio (Mr. PORTMAN) here.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentlewoman from Texas (Ms. GRANGER), another active member of the task force who also happens to have been the mayor of a major city in America and has seen these problems firsthand.

Ms. GRANGER. Mr. Chairman, I rise today in strong support of the Drug Demand Reduction Act of 1998. This common sense proposal has an uncommon approach to the battle against drugs. In the past we have focused our attention on stopping the supply of drugs but this legislation would reduce the demand for drugs. How does it work? It works by providing incentives to States to encourage teenagers to be drug-free before getting their driver's license. Who does it help? It helps parents by creating an 800 number that parents can call to learn about how to talk to their children about drugs. Why is it needed? Because approximately 80 percent of all crimes committed in this country are drug-related. And why will it work? Because we are empowering local communities to deal with their local drug problems in their own local way.

When I was mayor of Fort Worth we mapped out a strategy for fighting drugs that worked in Fort Worth. But it might not work in Fort Wayne or Front Royal. Each community is different and each situation is distinct. The great thing about this bill is that it gives each community enough support to carry out the war on drugs but enough flexibility to fight their own battles in their own way.

As I close, I remind my colleagues that Henry Kissinger once said of guerrilla war, "Your enemy wins if he does not lose." For too long we have been losing the war on drugs simply and only because we have not had the courage to win it. By attacking both the supply and demand side of this issue and by giving local officials the tools they need, we can win the war on drugs for our community, for our children and also for our future.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentleman from New Hampshire (Mr. BASS).

Mr. BASS. Mr. Chairman, I want to commend my distinguished colleague from Ohio, a fellow Dartmouth alumnus, who has had the foresight to bring forward a bill that is as important and good as this one. I represent a rural New Hampshire district, but drugs are a problem there just as much as they are in any other district around the country.

I have a story here, just a couple of weeks ago from New Hampshire: Heroin, A Deadly Problem Statewide. We all share the same problems with drug abuse. As the father of a 7-year-old who has just entered the second grade at the Peterborough Elementary School and a son who is 4, it is shocking for me to understand now that children are first exposed to drugs and drug information when they enter the fourth grade.

As the father of two children, I am particularly interested in the provision of the bill that provides for \$10 million in each fiscal year after 1995 for community-based parent organizations to get grant money to help provide parent training for individuals. Mr. Chairman,

parents are in denial in many instances as to the problems that their children face.

As a Member of Congress in this last term, I have been able to offer at least two major conferences involving many members of communities with bringing parents in to teach them how to deal with drugs in their families and in their homes. I am hopeful that this particular provision, which is of great importance to me, will prevail, because parents just as much as children need to understand the problems of drug abuse, how to communicate with their children and how to keep their children off drugs. I strongly commend the individuals who have worked on this bill. I am proud to be a cosponsor. I rise in strong support of its passage.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentleman from Michigan (Mr. SMITH).

Mr. SMITH of Michigan. Mr. Chairman, I thank the gentleman for yielding time. I guess my message is, Drug dealers, while the economy is good, while there are jobs out there, you better start looking for another job, because here comes some aggressive legislation that is going to be serious about the war on drugs. These bills that we are passing today are going to be the beginning of a serious effort to get rid of a serious problem in this Nation.

I have been holding drug forums across my district in Charlotte, in Battle Creek, in Jackson, in Adrian, in Hillsdale and Branch counties. What has impressed me the most is that if communities get involved, if parents start taking action, then it happens. We cannot do it just here in Washington, D.C., and that is why the Drug-Free Communities Act, that is why this kind of legislation that starts empowering local communities and parents makes a huge difference.

Just a couple of statistics. If a youngster does not use drugs before they are 19 years old, then there is a 90 percent chance that they will never have a drug problem. If parents talk to their kids about the dangers of using drugs, then you reduce the chances of those kids ever having a drug problem by 33 percent. Parents might think they are talking to their kids but when you ask those kids, only one-third of those kids say their parents talk to them seriously about the problems of using drugs.

I met a father at one of my drug forums. He said, "My son was an athlete. He was on the starting line-up for the football team. He was getting A's. Then he got into drugs. Now, he is not in sports. He is moping around, doing bad in everything to do with school."

Drugs and alcohol are a major cause of crime, they are a major cause of a student not learning to their full potential. Parents and communities, just do it, get involved. This kind of legislation does it.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentlewoman

from Connecticut (Mrs. JOHNSON), my distinguished colleague and friend on the Committee on Ways and Means.

Mrs. JOHNSON of Connecticut. Mr. Chairman, I rise in strong support of this legislation, because it takes concrete, practical steps that will help us reduce the demand for drugs in our country. It will better fund the anti-drug message being televised in 12 pilot cities across the country. And it provides funds to parent groups and other community-based groups to provide parent training on how to deal with drugs not only in their homes but also in their communities. If we are going to win the battle against drugs, we must involve parents, businesses, whole communities in the antidrug effort. And we must better understand, be more honest, be dead honest about the nature of addiction and the importance of treatment. Admitting that you have an addiction problem is the first and hardest step to overcoming chemical dependency. We should ensure that those who take this tough step have access to the resources they need to meet their goal successfully. That is why I also support the amendment that the gentleman from Minnesota (Mr. RAMSTAD) plans to offer to this bill.

Since 1956, the AMA has recognized alcoholism and drug addiction as diseases. Some 26 million, or 10 percent of the population, suffer from these diseases. According to the Bureau of Labor Statistics, in 1995 roughly 80 percent of American workers' health plans covered a minimum level of treatment for addiction. More than 70 percent of those using illicit drugs and 75 percent of alcoholics are employed.

Substance abuse treatment saves health care dollars. It saves lives. It strengthens our work force. Companies that provide treatment have already achieved savings. Chevron reports saving \$10 for every \$1 spent on treatment.

Mr. Chairman, I strongly support this bill and I urge Members' support of the Ramstad amendment.

Mr. PORTMAN. Mr. Chairman, I yield 2 minutes to the gentleman from Kentucky (Mr. LEWIS) another member of the task force who has started a successful antidrug coalition in his own area.

The CHAIRMAN. The Chair would advise that the gentleman from Ohio (Mr. PORTMAN) has 1 minute remaining.

Mr. PORTMAN. Mr. Chairman, I would like to indulge my colleague and cosponsor and see if perhaps we could get an additional 2 minutes on this side.

Mr. BARRETT of Wisconsin. I would agree to a unanimous consent for an additional 2 minutes on each side.

The CHAIRMAN. Without objection, the gentleman from Ohio (Mr. PORTMAN) and the gentleman from Wisconsin (Mr. BARRETT) each will control 2 additional minutes.

There was no objection.

Mr. LEWIS of Kentucky. Mr. Chairman, I rise today to express my support for the Drug Demand Reduction

Act of 1998. Shortly after the Speaker established his Task Force for a Drug-Free America, we drafted an aggressive legislative agenda to win the war on drugs. To reach our goal of a drug-free America by 2002, we need to fight this battle on three fronts: Stopping the supply, increasing accountability and deterring demand. H.R. 4550 helps in ending the demand for drugs in our communities. It will fight that battle in the school yard, workplace and the prisons.

Last year, I started the Heartland Anti-Drug Coalition. Our mission is to bring together the grassroots antidrug organizations in my district so we can combine our efforts and resources to educate our youth about the dangers of drugs. Just as the Heartland Coalition has been successful in creating a unified effort to keep our children drug-free, H.R. 4550 will end the demand for drugs by combining many existing efforts. Specifically H.R. 4550 establishes an aggressive antidrug media campaign and assists organizations that provide the necessary tools for parents to help keep their children drug-free. The bill also consolidates information clearinghouses to provide a single source of information on fighting drug abuse. Earlier today we passed legislation to increase our efforts to prevent the entry of illegal drugs into the U.S. Now, let us take another important step to win the war on drugs by passing H.R. 4550.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield such time as he may consume to the gentleman from Michigan (Mr. LEVIN) who has been a real fighter on our side of the aisle and I think in the entire House on this issue. (Mr. LEVIN asked and was given permission to revise and extend his remarks.)

Mr. LEVIN. Mr. Chairman, to the gentleman from Wisconsin (Mr. BARRETT) and to the gentleman from Ohio (Mr. PORTMAN) who with others including myself have taken a leading advocacy position on this issue, I congratulate all of them. This is a fight worth fighting. This is a fight we cannot lose. This fight against drug use is in danger of spreading to parts of the Nation which have not fully seen this, though in a sense every sector has seen it. There has been a denial on the part of many people that the problem exists. Hopefully this bill will be another step to take away that denial and to realize that this is a national problem that requires national action. Most of the work is going to have to be done in our communities, but surely we can lead.

The most recent surveys indicate the depth of the problem that the use of some hard drugs is increasing. There is much misunderstanding within our country about marijuana use. There is more and more evidence that it is harmful. This bill draws on elements of the national strategy document put together by General McCaffrey. I have had the privilege of working with him on a number of drug issues, and I am proud to stand by his side. The record

has not been perfect, but it has been a record of action.

□ 1800

This bill enhances elements of programs that were started before. One is the National Youth Anti-drug Media Campaign. I had the privilege of helping to launch it in my home district with the help of K-Mart. We had a number of youths there, and it was encouraging to have them stand up and talk about the dangers of drugs and to talk about the need for us to meet head on this problem with the youth of America.

I saw the ads. I believe they are effective ones. The youth who were there thought they were effective, some more than others. But I remember them dramatically, I remember the reaction dramatically, and this bill will help us use the power of the media to give a clear message to kids and to ask them for their support.

This bill also addresses the problem of drug abuse in our prisons. We need to address that. We need to make sure that people who go into prison in so many cases with a drug problem, when they leave, if they do, that their drug problem has been addressed.

This bill also includes reference to a resolution regarding community anti-drug coalitions. The gentleman from Ohio (Mr. PORTMAN) and I have been privileged to represent two districts that have been used as models; in the case of Cincinnati, a comprehensive program that the gentleman from Ohio (Mr. PORTMAN) has helped to spark. In the case of the 12th District, it is a different model, of efforts from the grassroots up, and our office and our staff have tried to facilitate those coalitions.

And I say this without any hesitation: All of the Members of this Congress should get involved in anti-drug coalitions in their community. Our staff goes to meetings of every one of those anti-drug coalitions, and I am proud to have been associated with all of these efforts.

So, in a word, this bill is one not only worth supporting, it is worth advocating, and it is worth implementing. It is worth our personnel commitment to take a piece of legislation, take it back home and help make it work, and there is no greater responsibility.

The world has changed since my generation went to school. We did not know these problems. We have no choice but for this generation, for my grandchildren's generation, that we help America address this problem. As I said before, this is a fight worth fighting, this is a fight that we must win. Let us vote for this bill and then help to implement it.

Mr. BARRETT of Nebraska. Mr. Chairman, I yield myself such time as I may consume.

In closing on this side, Mr. Chairman, I simply want to say that I think this is a bill that does some good things. For me, the most important part of

this legislation is allowing us to have a new program in prisons so that we can treat prisoners before they get out on the streets. It does a very good job as well in creating incentives for drug-free workplaces, and I think it is extremely important for us to authorize the media campaign that is currently going on.

For those reasons, I would again ask my colleagues to support this bill.

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

Mr. PORTMAN. Mr. Chairman, I yield myself such time as I may consume.

I would like to in closing again thank my friend from Wisconsin (Mr. BARRETT) for being willing to cosponsor the legislation, help improve the legislation and get it to the floor today. I also want to thank the gentleman from Michigan (Mr. LEVIN) for the work he has done in the Drug-free Communities Act and in implementing that legislation. As he indicated, that sometimes is the most important thing we do here is being sure that we can back home and make sure this legislation actually works.

Let us take a step back for a moment, if we could, and reflect on what we are doing here this evening. And I think Bill Bennett wrote very articulately about the problem of substance abuse, and I would like to quote from him, former drug czar Bill Bennett. He said:

Using drugs is wrong not simply because drugs create medical problems, it is wrong because drugs destroy one's moral sense. People addicted to drugs neglect their duties, they want to neglect God, family, children, friends and jobs, everything in life that is important, noble, and worthwhile, for the sake of drugs.

As a parent and as a colleague, I would urge all the Members of this House to support this nonpartisan legislation that really will make a difference in terms of taking common-sense steps to rid our society of the devastating impact of illegal drugs.

Mr. PACKARD. Mr. Chairman, I rise today in support of H.R. 4550, The Drug Demand Reduction Act. Our nation's children are our most precious resource and we must protect them from the negative effects of illegal drugs.

Mr. Speaker, the sad truth is, 50% of state parole and probation violators are under the influence of drugs, alcohol or both when they commit new offenses. This is unacceptable! The Drug Demand Reduction Act will take steps to reduce drug abuse in prisons and increase the effectiveness of drug treatment programs. H.R. 4550 is a step in the right direction. We can not waste more time or more young lives on ineffective drug programs.

The issue of drug abuse can not be stopped from Washington, D.C. alone. It is critical that we involve communities. Parents know best what their children's needs are—not bureaucrats in Washington. The Drug Demand Reduction Act will empower parents, teachers, and communities to address the increased concern of teenage substance abuse. This legislation will go right to the heart of the drug problem by reducing the demand for drugs

through prevention, education and treatment at the local level.

Drugs not only burn the minds of those who use them, but they also scorch the lives of the abuser's families and loved ones. Mr. Speaker, I rise to support H.R. 4550, and protect our nation's children and families. We must put a stop to the use of these life destroying substances.

Mr. WAXMAN. Mr. Chairman, whatever its merits, the consideration of this bill at this time constitutes a gross dereliction of the care and due diligence this House owes to the consideration of our laws.

The bill was introduced on Friday. It was referred to six committees for hearings and deliberations. But here it is, after just three working days, up for a vote by the full House.

This bill is badly in need of scrutiny by the committees of jurisdiction. Let me give you an example of a very troubling, coercive provision. The Teen Drivers incentive program is intended to promote the voluntary drug testing of applicants for drivers licenses.

But there is nothing voluntary about having to choose between taking the test or having the State inform your insurance company that you've refused to take the test. There is no question the insurance company will raise the rates on anyone—whether an adult or minor, drug user or drug-free citizen—who refuses to take a drug test.

This is fundamental question of civil liberties. There are ample and legitimate reasons why a citizen with no history of illicit drug use and who constitutes no threat to public safety, might wish to decline a drug test.

If this provision were stricken, the States would still be free to develop model programs, with or without a notification requirements. If a State desires such a requirement, so be it. But we in Congress should not dictate the approach taken by the several States in such a sensitive and vital area of civil liberties and personal privacy. We should allow the States to develop programs without dictating only one model designees in Washington as if one size fits all.

Mr. Speaker, I also want to give another example of why this bill should be sent back to the committees of jurisdiction, consistent with the regular order.

The original Title II of his bill was a multi-billion dollar boondoggle. Any company which developed a new anti-addiction drug would receive an additional 6 months of market exclusivity on any drug of its choice.

That is an unbelievable gift to the drug industry. I can understand wanting to provide modest incentives for a worthy cause. But H.R. 4550 would have sucked literally billions of dollars out of the pockets of American consumers and taxpayers. It would have given a blank check to the drug industry.

At the last minute, Title II was changed by a manager's amendment. A study was substituted—a study, I might note, that duplicates two studies which are already done. Was the provision struck because people caught it in time and threatened to expose it for the boondoggle it was? I don't know. But I do know this is the wrong way to develop legislation.

I support the War on Drugs and I support programs which end illicit drug use. But I cannot support legislation developed in this manner.

Mrs. MORELLA. Mr. Chairman, I rise in strong support of the Ramstad amendment

which would prohibit group and individual health plans from imposing treatment limitations or financial requirements on the coverage of alcohol and substance abuse benefits if similar limitations or requirements are not imposed on medical and surgical benefits. I am pleased to be an original cosponsor of this legislation which creates a level playing field for the provision of alcohol and drug treatment services.

Alcohol and substance abuse are diseases just like cancer, diabetes, and heart disease, and alcohol and substance abuse can be effectively diagnosed and treated. Alcohol and drug treatment reduces health, criminal justice, and welfare costs. For example, data for the Center for Substance Abuse Treatment's (CSAT) Pregnant and Postpartum Women and Infant's programs in 1996 found that after treatment 67.4% of women were not using drugs or alcohol, 90.3% of women were not involved with the criminal justice system, 86.5% of children were living with their mothers, and employment of women increased by 820%.

Unfortunately, unlike other medical conditions, health coverage discrimination against alcohol and substance abuse treatment services is widespread. Currently, just 2% of the 16 million alcoholics and substance abusers covered by health insurance plans are actually receiving treatment, notwithstanding the purported "coverage" of chemical dependency treatment by the plans. This important legislation would provide for nondiscriminatory coverage for alcohol and substance abuse treatment services under private group and individual health plans. It would not require insurers to offer a standard benefit; it would instead establish parity coverage for those plans that offer substance abuse treatment coverage.

I urge my colleagues to support the Ramstad amendment. Let us take this important step to improve health insurance coverage for alcohol and drug treatment.

Mr. PORTMAN. Mr. Chairman, I yield back the balance of my time.

The CHAIRMAN. All time for general debate has expired.

Pursuant to the rule, the bill shall be considered for amendment under the 5-minute rule for 3 hours.

Before consideration of any other amendment, it shall be in order to consider the amendment printed in House Report 105-721 if offered by a Member designated in the report. That amendment shall be considered read, shall be debatable for the time specified in the report, equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question.

After disposition of the amendment, the provisions as then perfected shall be considered as original text for the purpose of further amendment and, without objection, considered as read.

There was no objection.

The CHAIRMAN. During consideration of the bill for amendment, the Chair may accord priority in recognition to a Member offering an amendment that he has printed in the designated place in the CONGRESSIONAL RECORD. Those amendments will be considered read.

The Chairman of the Committee of the Whole may postpone a request for a recorded vote on any amendment and may reduce to a minimum of 5 minutes the time for voting on any postponed question that immediately follows another vote provided that the time for voting on the first question shall be a minimum of 15 minutes.

AMENDMENT OFFERED BY MR. PORTMAN

Mr. PORTMAN. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment printed in House Report 105-721 offered by Mr. PORTMAN:

Page 10, line 9, insert "treatment," after "referral,".

Page 11, strike line 6 and all that follows through page 14, line 2, and insert the following:

Subtitle C—Drug-Free Teen Drivers

SEC. 121. SHORT TITLE.

This subtitle may be cited as the "Drug Free Teenage Drivers Act".

SEC. 122. MODEL PROGRAM.

(a) ESTABLISHMENT.—Not later than 1 year after the date of enactment of this Act, the Secretary of Transportation shall establish a model program to provide for the voluntary drug testing of all teenage applicants for a driver's license and, if a State adopting the model program elects, other first time applicants for a driver's license regardless of age.

(b) MINIMUM ELEMENTS.—The model program established under this section shall provide, at a minimum—

(1) that information respecting an applicant's choice not to take a drug test under the program or the result of a drug test on the applicant will be made available to the applicant's automobile insurance company, if any, or the parent of a teenage applicant, or both, as determined by a State that adopts the program; and

(2) if an applicant tests positive in the drug test, the State will not issue a license to the applicant and will require the applicant to complete a drug treatment program approved by the State and not test positive in a drug test before reapplying for a license.

(c) ADOPTION BY STATES.—The States may adopt and implement the model program established under this section. If a State adopts the model program, the State shall in carrying out subsection (b)(2) provide the treatment described in such subsection to low-income individuals who apply for drivers' licenses.

SEC. 123. INCENTIVE GRANT PROGRAM.

(a) IN GENERAL.—The Secretary of Transportation shall establish an incentive grant program to assist States in improving their laws relating to controlled substances and driving.

(b) GRANT REQUIREMENTS.—To qualify for a grant under subsection (a), a State shall meet each of the following requirements:

(1) Enact, actively enforce, and publicize a law that makes unlawful throughout the State the operation of a motor vehicle if the driver has any measurable amount of an illegal controlled substance in the driver's body. Individuals who are convicted of a violation of such law shall be referred to appropriate services, including intervention, counseling, and treatment.

(2) Enact, actively enforce, and publicize a law that makes unlawful throughout the State the operation of a motor vehicle if the ability of the driver to operate the vehicle is impaired by an illegal controlled substance.

The State shall provide that in the enforcement of such law the driver shall be tested for the presence of an illegal controlled substance when there is evidence of impaired driving. Individuals who are convicted of a violation of such law shall have their driver's license suspended and shall be referred to appropriate services, including intervention, counseling, and treatment.

(3) Enact, actively enforce, and publicize a law that requires the suspension of the driver's license of an individual who is convicted of any criminal offense relating to drugs.

(4) Enact a law that provides that individuals applying for, and individuals renewing, a driver's license will be provided information about the laws referred to in paragraphs (1), (2), and (3) and will be required to answer drug-related questions on their applications.

(c) USE.—A State may use a grant under subsection (a) only to implement, enforce, and publicize laws described in subsection (b).

(d) GRANT AMOUNTS.—The amount of a grant made to a State under this section in a fiscal year shall be determined by multiplying the total amount of funds made available to carry out this section for such fiscal year by the ratio of the amount of funds made available to the State under section 402 of title 23, United States Code, for such fiscal year to the aggregate amount of funds made available to carry out such section 402 for such fiscal year to all States to which grants will be made under this section in such fiscal year.

(e) DEFINITIONS.—In this section, the following definitions apply:

(1) CONTROLLED SUBSTANCES.—The term "controlled substances" has the meaning given such term in section 102(6) of the Controlled Substances Act (21 U.S.C. 802(6)).

(2) ILLEGAL CONTROLLED SUBSTANCE.—The term "illegal controlled substance" means a controlled substance for which an individual does not have a legal written prescription.

SEC. 124. TECHNICAL ASSISTANCE.

The Secretary of Transportation shall provide to the States technical assistance for—

(1) training law enforcement officers in the standardized field sobriety testing techniques to detect impaired drivers;

(2) expanding drug information and training by involving prosecutors in community drugged driving prevention programs; and

(3) promoting uniform sanctions for drugged driving offenses, referring drugged driving offenders to assessment and treatment programs, and involving judges in community drugged driving prevention programs.

SEC. 125. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated such sums as may be necessary to carry out this subtitle for fiscal years 1999 and 2000.

Page 30, strike line 19 and all that follows through page 36, line 15, and insert the following:

SEC. 203. REPORT REGARDING INCENTIVES FOR DEVELOPMENT OF ANTIADDICTION DRUGS.

(a) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the "Secretary"), in collaboration with the officials specified in subsection (b), shall conduct a study for the purpose of determining whether there is a need to establish particularized incentives for the development of drugs to treat dependence on alcohol or on any controlled substance as defined in section 102 of the Controlled Substances Act (referred to in this section as "qualifying antiaddiction drugs").

(b) COLLABORATION AMONG AGENCIES.—For purposes of subsection (a), the officials specified in this subsection are as follows:

(1) The Commissioner of Food and Drugs.

(2) The Director of the National Institute on Alcohol Abuse and Alcoholism.

(3) The Director of the National Institute on Drug Abuse.

(4) The Director of the National Institute of Mental Health.

(5) The Administrator of the Substance Abuse and Mental Health Services Administration.

(c) CERTAIN ELEMENTS OF STUDY.—If in conducting the study under subsection (a) the Secretary determines that there is a need to establish particularized incentives for the development of qualifying antiaddiction drugs, the Secretary shall determine whether the incentives should include one or both of the following:

(1) Providing for increased cooperation among the agencies referred to in subsection (b) in order to facilitate the development and approval of such drugs.

(2) Establishing under the Federal Food, Drug, and Cosmetic Act particularized financial incentives for the development of such drugs.

(d) REPORT.—Not later than one year after the date of the enactment of this Act, the Secretary shall complete the study required in subsection (a) and submit to the Committee on Commerce of the House of Representatives, and to the Committee on Labor and Human Resources of the Senate, a report describing the findings made in the study.

Page 40, line 24, strike "the presence" and all that follows through line 25 and insert "the presence of six of the members appointed under subsection (c)(2)."

The CHAIRMAN. Pursuant to House Resolution 538, the gentleman from Ohio (Mr. PORTMAN) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Ohio (Mr. PORTMAN).

Mr. PORTMAN. Mr. Chairman, as we discussed earlier, the manager's amendment made in order by the rule provides for some technical and clarifying amendments and accommodates the concerns of two of the committees that have jurisdiction over aspects of this legislation. In the drug-free workplace provision, the amendment makes clear that an employee assistance program should offer access to treatment for employees.

The Committee on Transportation and Infrastructure staff provided a substitute for our drug-free teen drivers provision in the bill that clarifies the organization of the program established under the legislation and provides an explicit authorization for appropriations under that part of the legislation.

The Committee on Commerce had requested that we replace the incentive for the development of anti-addiction medication, an issue that came up earlier in our debate, and we have indeed replaced the legislation that we had with regard to anti-addiction medication with a study for the need for such incentives. The amendment, therefore, grants their request.

Finally, the amendment sets the quorum for meetings of the Commission on Medical Education that is in the legislation so that the meetings of the Commission can take place without any concern of not having a quorum present.

Those, Mr. Chairman, are the changes in this manager's amendment.

They are straightforward, they are technical and clarifying in nature, and I would hope that my colleagues would support them.

Mr. Chairman, I reserve the balance of my time.

Mr. BARRETT of Wisconsin. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, very briefly, and I will not use the whole 5 minutes, I think that this is a good amendment, it addresses some of the concerns that have been raised, in particular the one pertaining to the anti-addiction medications, and for that reason I support it.

Also I should note that it also makes clear that treatment is an option in the drug-free workplace program.

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

Mr. PORTMAN. Mr. Chairman, I yield myself such time as I may consume. Again I want to thank my colleague for helping perfect this legislation, and that includes this manager's amendment.

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

The CHAIRMAN. The question is on the amendment offered by the gentleman from Ohio (Mr. PORTMAN).

The amendment was agreed to.

The text of H.R. 4550, as amended by the amendment printed in House Report 105-721, is as follows:

H.R. 4550

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Drug Demand Reduction Act".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—TARGETED SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAMS

Subtitle A—National Youth Anti-Drug Media Campaign

Sec. 101. Short title.

Sec. 102. Requirement to conduct national media campaign.

Sec. 103. Use of funds.

Sec. 104. Reports to Congress.

Sec. 105. Authorization of appropriations.

Subtitle B—Drug-Free Workplace Act

Sec. 111. Short title.

Sec. 112. Findings; purposes.

Sec. 113. Sense of Congress.

Sec. 114. Drug-free workplace demonstration program.

Sec. 115. Small business development centers.

Sec. 116. Contract authority.

Subtitle C—Drug-Free Teen Drivers

Sec. 121. Short title.

Sec. 122. Demonstration program.

Sec. 123. Incentive grant program.

Sec. 124. Technical assistance.

Subtitle D—Drug-Free Prisons and Jails

Sec. 131. Short title.

Sec. 132. Purpose.

Sec. 133. Program authorization.

Sec. 134. Grant application.

Sec. 135. Uses of funds.

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Subtitle E—Drug-Free Schools Quality Assurance

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Sec. 171. Short title.
Sec. 172. Drug-free parents empowerment.

TITLE II—PRIVATE SECTOR ANTI-DRUG PARTNERSHIPS

Subtitle A—Antiaddiction Medications

Sec. 201. Short title.
Sec. 202. Facilitation of approval for commercial distribution of antiaddiction drugs developed by National Institute of Drug Abuse.
Sec. 203. Incentives for development of qualifying antiaddiction drugs.

Subtitle B—Commission on Role of Medication Education in Reducing Substance Abuse

Sec. 211. National Commission on the Role of Medical Education in Reducing Substance Abuse.

TITLE III—STATEMENT OF NATIONAL ANTIDRUG POLICY

Subtitle A—Congressional Leadership in Community Coalitions

Sec. 301. Sense of Congress.
Subtitle B—Rejection of Legalization of Drugs
Sec. 311. Sense of Congress.

Subtitle C—Report on Streamlining Federal Prevention and Treatment Efforts

Sec. 321. Report on streamlining Federal prevention and treatment efforts.

TITLE I—TARGETED SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAMS

Subtitle A—National Youth Anti-Drug Media Campaign

SEC. 101. SHORT TITLE.

This subtitle may be cited as the “Drug-Free Media Campaign Act of 1998”.

SEC. 102. REQUIREMENT TO CONDUCT NATIONAL MEDIA CAMPAIGN.

(a) IN GENERAL.—The Director of the Office of National Drug Control Policy (in this subtitle referred to as the “Director”) shall conduct a national media campaign for the purpose of reducing and preventing drug abuse among young people in the United States.

(b) LOCAL TARGET REQUIREMENT.—The Director shall, to the maximum extent feasible, use the funds appropriated pursuant to the authorization in section 105 for media that focuses on, or includes specific information on, prevention or treatment resources for consumers within specific local areas.

SEC. 103. USE OF FUNDS.

(a) AUTHORIZED USES.—The funds authorized to be appropriated in section 105 for the support of a national media campaign may be used to fund—

(1) the purchase of media time and space;
(2) reimbursement of out of pocket advertising production costs for agencies that provide all creative development on a pro bono basis;

(3) the negotiated fee for the contract buying agency; and

(4) the evaluation of the effectiveness of the national media campaign.

(b) PROHIBITIONS.—None of the funds authorized to be appropriated in section 105 may be obligated or expended for the following purposes:

(1) To supplant current anti-drug community based coalitions.

(2) To supplant current pro bono public service time donated by national and local broadcasting networks.

(3) For partisan political purposes.

(4) To fund media campaigns that feature any elected officials, persons seeking elected office, cabinet level officials, or other Federal officials employed pursuant to section 213 of Schedule C of title 5, Code of Federal Regulations, unless the Director provides advance notice to the Committees on Appropriations of the House of Representatives and the Senate and the Committee on the Judiciary of the Senate.

(c) MATCHING REQUIREMENT.—Funds appropriated pursuant to the authorization in section 105 shall be matched by an equal amount of non-Federal funds for the campaign, or be matched with in-kind contributions to the campaign of the same value.

SEC. 104. REPORTS TO CONGRESS.

The Director shall—

(1) submit to Congress on a quarterly basis a report on the activities for which funds appropriated pursuant to the authorization in section 105 have been obligated during the preceding quarter, and on the specific parameters of the national media campaign; and

(2) not later than one year after the date of the enactment of this Act, submit to Congress a report on the effectiveness of the national media campaign based on measurable outcomes provided to Congress previously.

SEC. 105. AUTHORIZATION OF APPROPRIATIONS.

There are authorized to be appropriated for the Office of National Drug Control Policy to carry out this subtitle \$195,000,000 for each of fiscal years 1999 through 2002.

Subtitle B—Drug-Free Workplace Act

SEC. 111. SHORT TITLE.

This subtitle may be cited as the “Drug-Free Workplace Act of 1998”.

SEC. 112. FINDINGS; PURPOSES.

(a) FINDINGS.—Congress finds that—

(1) 74 percent of adults who use illegal drugs are employed;

(2) small business concerns employ over 50 percent of the Nation’s workforce;

(3) in over 88 percent of families with children under the age of 18, at least 1 parent is employed; and

(4) employees who use drugs increase costs for businesses and risk the health and safety of all employees because—

(A) absenteeism is 66 percent higher among drug users than nondrug users;

(B) health benefit utilization is 300 percent higher among drug users than nondrug users;

(C) 47 percent of workplace accidents are drug-related;

(D) disciplinary actions are 90 percent higher among drug users than nondrug users; and

(E) employee turnover is significantly higher among drug users than nondrug users.

(b) PURPOSES.—The purposes of this subtitle are to—

(1) educate small business concerns about the advantages of a drug-free workplace;

(2) provide financial incentives and technical assistance to enable small business concerns to create a drug-free workplace; and

(3) assist working parents in keeping their children drug-free.

SEC. 113. SENSE OF CONGRESS.

It is the sense of Congress that—

(1) businesses should adopt drug-free workplace programs; and

(2) States should consider financial incentives, such as reductions in workers’ compensation premiums, to encourage businesses to adopt drug-free workplace programs.

SEC. 114. DRUG-FREE WORKPLACE DEMONSTRATION PROGRAM.

The Small Business Act (15 U.S.C. 636 et seq.) is amended by—

(1) redesignating sections (30) and (31) as sections (31) and (32), respectively; and

(2) inserting the following new section:

“SEC. 30. DRUG-FREE WORKPLACE DEMONSTRATION PROGRAM.

“(a) ESTABLISHMENT.—There is established a drug-free workplace demonstration program, under which the Administration may make grants to eligible intermediaries for the purpose of providing financial and technical assistance to small business concerns seeking to start a drug-free workplace program.

“(b) ELIGIBILITY FOR PARTICIPATION.—An intermediary shall be eligible to receive a grant under subsection (a) if it meets the following criteria:

“(1) It is an organization described in section 501(c)(3) of the Internal Revenue Code of 1986 that is exempt from tax under section 5(a) of such Act, a program of such organization, or provides services to such organization.

“(2) Its primary purpose is to develop comprehensive drug-free workplace programs or to supply drug-free workplace services.

“(3) It has at least 2 years of experience in drug-free workplace programs.

“(4) It has a drug-free workplace policy in effect.

“(c) REQUIREMENTS FOR PROGRAM.—Any drug-free workplace program established as a result of this section shall include—

“(1) a written policy, including a clear statement of expectations for workplace behavior, prohibitions against substances in the workplace, and the consequences of violating such expectations and prohibitions;

“(2) training for at least 60 minutes for employees and supervisors;

“(3) additional training for supervisors and employees who are parents;

“(4) employee drug testing; and

“(5) employee access to an employee assistance program, including assessment, referral, treatment, and problem resolution.

“(d) AUTHORIZATION.—There are authorized to be appropriated to carry out the provisions of this section, \$10,000,000 for fiscal year 1999 and such sums may remain available until expended.

SEC. 115. SMALL BUSINESS DEVELOPMENT CENTERS.

Section 21(c)(3) of the Small Business Act (15 U.S.C. 648(c)(3)) is amended—

(1) in subparagraph (R) by striking “and”;

(2) in subparagraph (S) by striking the period and inserting “; and”; and

(3) by inserting after subparagraph (S) the following new subparagraph:

“(T) providing information and assistance to small business concerns with respect to developing drug-free workplace programs.”.

SEC. 116. CONTRACT AUTHORITY.

The Small Business Administrator may contract with and compensate government and private agencies or persons for services related to carrying out the provisions of this subtitle.

Subtitle C—Drug-Free Teen Drivers

SEC. 121. SHORT TITLE.

This subtitle may be cited as the “Drug Free Teenage Drivers Act”.

SEC. 122. MODEL PROGRAM.

(a) ESTABLISHMENT.—Not later than 1 year after the date of enactment of this Act, the Secretary of Transportation shall establish a model program to provide for the voluntary

drug testing of all teenage applicants for a driver's license and, if a State adopting the model program elects, other first time applicants for a driver's license regardless of age.

(b) **MINIMUM ELEMENTS.**—The model program established under this section shall provide, at a minimum—

(1) that information respecting an applicant's choice not to take a drug test under the program or the result of a drug test on the applicant will be made available to the applicant's automobile insurance company, if any, or the parent of a teenage applicant, or both, as determined by a State that adopts the program; and

(2) if an applicant tests positive in the drug test, the State will not issue a license to the applicant and will require the applicant to complete a drug treatment program approved by the State and not test positive in a drug test before reapplying for a license.

(c) **ADOPTION BY STATES.**—The States may adopt and implement the model program established under this section. If a State adopts the model program, the State shall in carrying out subsection (b)(2) provide the treatment described in such subsection to low-income individuals who apply for drivers' licenses.

SEC. 123. INCENTIVE GRANT PROGRAM.

(a) **IN GENERAL.**—The Secretary of Transportation shall establish an incentive grant program to assist States in improving their laws relating to controlled substances and driving.

(b) **GRANT REQUIREMENTS.**—To qualify for a grant under subsection (a), a State shall meet each of the following requirements:

(1) Enact, actively enforce, and publicize a law that makes unlawful throughout the State the operation of a motor vehicle if the driver has any measurable amount of an illegal controlled substance in the driver's body. Individuals who are convicted of a violation of such law shall be referred to appropriate services, including intervention, counseling, and treatment.

(2) Enact, actively enforce, and publicize a law that makes unlawful throughout the State the operation of a motor vehicle if the ability of the driver to operate the vehicle is impaired by an illegal controlled substance. The State shall provide that in the enforcement of such law the driver shall be tested for the presence of an illegal controlled substance when there is evidence of impaired driving. Individuals who are convicted of a violation of such law shall have their driver's license suspended and shall be referred to appropriate services, including intervention, counseling, and treatment.

(3) Enact, actively enforce, and publicize a law that requires the suspension of the driver's license of an individual who is convicted of any criminal offense relating to drugs.

(4) Enact a law that provides that individuals applying for, and individuals renewing, a driver's license will be provided information about the laws referred to in paragraphs (1), (2), and (3) and will be required to answer drug-related questions on their applications.

(c) **USE.**—A State may only use a grant under subsection (a) only to implement, enforce, and publicize laws described in subsection (b).

(d) **GRANT AMOUNTS.**—The amount of a grant made to a State under this section in a fiscal year shall be determined by multiplying the total amount of funds made available to carry out this section for such fiscal year by the ratio of the amount of funds made available to the State under section 402 of title 23, United States Code, for such fiscal year to the aggregate amount of funds made available to carry out such section 402 for such fiscal year to all States to which grants will be made under this section in such fiscal year.

(e) **DEFINITIONS.**—In this section, the following definitions apply:

(1) **CONTROLLED SUBSTANCES.**—The term "controlled substances" has the meaning given such term in section 102(6) of the Controlled Substances Act (21 U.S.C. 802(6)).

(2) **ILLEGAL CONTROLLED SUBSTANCE.**—The term "illegal controlled substance" means a controlled substance for which an individual does not have a legal written prescription.

SEC. 124. TECHNICAL ASSISTANCE.

The Secretary of Transportation shall provide to the States technical assistance for—

(1) training law enforcement officers in the standardized field sobriety testing techniques to detect impaired drivers;

(2) expanding drug information and training by involving prosecutors in community drugged driving prevention programs; and

(3) promoting uniform sanctions for drugged driving offenses, referring drugged driving offenders to assessment and treatment programs, and involving judges in community drugged prevention programs.

SEC. 125. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated such sums as may be necessary to carry out this subtitle for fiscal years 1999 and 2000.

Subtitle D—Drug-Free Prisons and Jails

SEC. 131. SHORT TITLE.

This subtitle may be cited as the "Drug-Free Prisons and Jails Act of 1998".

SEC. 132. PURPOSE.

The purpose of this subtitle is to provide model programs for comprehensive treatment of substance-involved offenders in the criminal justice system to reduce drug abuse and drug-related crime, and reduce the costs of the criminal justice system, that can be successfully replicated by States and local units of government through a comprehensive evaluation.

SEC. 133. PROGRAM AUTHORIZATION.

(a) **ESTABLISHMENT.**—The Director of the Bureau of Justice Assistance shall establish a model substance abuse treatment program for substance-involved offenders by—

(1) providing financial assistance to grant recipients selected in accordance with section 134(b); and

(2) evaluating the success of programs conducted pursuant to this subtitle.

(b) **GRANT AWARDS.**—The Director may award not more than 5 grants to units of local government and not more than 5 grants to States.

(c) **ADMINISTRATIVE COSTS.**—Not more than 5 percent of a grant award made pursuant to this subtitle may be used for administrative costs.

SEC. 134. GRANT APPLICATION.

(a) **CONTENTS.**—An application submitted by a unit of local government or a State for a grant award under this subtitle shall include the following:

(1) **STRATEGY.**—A strategy to coordinate programs and services for substance-involved offenders provided by the unit of local government or the State, as the case may be, developed in consultation with representatives from all components of the criminal justice system within the jurisdiction, including judges, law enforcement personnel, prosecutors, corrections personnel, probation personnel, parole personnel, substance abuse treatment personnel, and substance abuse prevention personnel.

(2) **CERTIFICATION.**—Certification that—

(A) Federal funds made available under this subtitle will not be used to supplant State or local funds, but will be used to increase the amounts of such funds that would, in the absence of Federal funds, be made available for law enforcement activities; and

(B) the programs developed pursuant to this subtitle meet all requirements of this subtitle.

(b) **REVIEW AND APPROVAL.**—Subject to section 133(b), the Director shall approve applications and make grant awards to units of local governments and States that show the most promise for accomplishing the purposes of this subtitle consistent with the provisions of section 135.

SEC. 135. USES OF FUNDS.

A unit of local government or State that receives a grant award under this subtitle shall use such funds to provide comprehensive treatment programs to inmates in prisons or jails, including not less than 3 of the following—

(1) tailored treatment programs to meet the special needs of different types of substance-involved offenders;

(2) random and frequent drug testing, including a system of sanctions;

(3) training and assistance for corrections officers and personnel to assist substance-involved offenders in correctional facilities;

(4) clinical assessment of incoming substance-involved offenders;

(5) availability of religious and spiritual activity and counseling to provide an environment that encourages recovery from substance involvement in correctional facilities;

(6) education and vocational training; and

(7) a substance-free correctional facility policy.

SEC. 136. EVALUATION AND RECOMMENDATION REPORT TO CONGRESS.

(a) **EVALUATION.**—

(1) **IN GENERAL.**—The Director shall enter into a contract, with an evaluating agency that has demonstrated experience in the evaluation of substance abuse treatment, to conduct an evaluation that incorporates the criteria described in paragraph (2).

(2) **EVALUATION CRITERIA.**—The Director, in consultation with the Directors of the appropriate National Institutes of Health, shall establish minimum criteria for evaluating each program. Such criteria shall include—

(A) reducing substance abuse among participants;

(B) reducing recidivism among participants;

(C) cost effectiveness of providing services to participants; and

(D) a data collection system that will produce data comparable to that used by the Office of Applied Studies of the Substance Abuse and Mental Health Services Administration and the Bureau of Justice Statistics of the Office of Justice Programs.

(b) **REPORT.**—The Director shall submit to the appropriate committees of Congress, at the same time as the President's budget for fiscal year 2001 is submitted, a report that—

(1) describes the activities funded by grant awards under this subtitle;

(2) includes the evaluation submitted pursuant to subsection (a); and

(3) makes recommendations regarding revisions to the authorization of the program, including extension, expansion, application requirements, reduction, and termination.

SEC. 137. DEFINITIONS.

For purposes of this subtitle:

(1) **SUBSTANCE-INVOLVED OFFENDER.**—The term "substance-involved offender" means an individual under the supervision of a State or local criminal justice system, awaiting trial or serving a sentence imposed by the criminal justice system, who—

(A) violated or has been arrested for violating a drug or alcohol law;

(B) was under the influence of alcohol or an illegal drug at the time the crime was committed;

(C) stole property to buy illegal drugs; or

(D) has a history of substance abuse and addiction.

(2) **DIRECTOR.**—The term "Director" means the Director of the Bureau of Justice Assistance;

(3) UNIT OF LOCAL GOVERNMENT.—The term “unit of local government” means any city, county, township, town, borough, parish, village, or other general purpose political subdivision of a State, an Indian tribe which performs law enforcement functions as determined by the Secretary of the Interior and any agency of the District of Columbia government or the United States Government performing law enforcement functions in and for the District of Columbia, and the Trust Territory of the Pacific Islands.

(4) APPROPRIATE CONGRESSIONAL COMMITTEE.—The term “appropriate Congressional Committee” means the Committees on the Judiciary and the Committees on Appropriations of the House of Representatives and the Senate.

SEC. 138. AUTHORIZATION OF APPROPRIATIONS.

(a) IN GENERAL.—There are authorized to be appropriated to carry out this subtitle from the Violent Crime Reduction Trust Fund as authorized by title 31 of the Violent Crime and Control and Law Enforcement Act of 1994 (Public Law 103-322) (42 U.S.C. 14211)—

(1) for fiscal year 1999, \$30,000,000; and

(2) for fiscal year 2000, \$20,000,000.

(b) RESERVATION.—The Director may reserve each fiscal year not more than 20 percent of the funds appropriated pursuant to subsection (a) for activities required under section 136.

Subtitle E—Drug-Free Schools Quality Assurance

SEC. 151. SHORT TITLE.

This subtitle may be cited as the “Drug-Free Schools Quality Assurance Act”.

SEC. 152. AMENDMENT TO SAFE AND DRUG-FREE SCHOOLS AND COMMUNITIES ACT.

Subpart 3 of title IV of the Elementary and Secondary Education Act of 1965 is amended by adding at the end the following:

“SEC. 4134. QUALITY RATING.

“(a) IN GENERAL.—The Secretary shall develop a rating system, or allow State educational agencies, to determine if a public school has a drug program that meets the qualification described in subsection (b).

“(b) CRITERIA.—The criteria to determine if a school has a quality drug program shall include, at a minimum, the following:

“(1) NEEDS ASSESSMENT.—A thorough needs assessment before implementation of a drug program.

“(2) RESEARCH.—Implementation of a research-based program.

“(3) PARENT AND COMMUNITY INVOLVEMENT.—Involvement of parents and community members in program design and review of existing community drug programs before implementation of a school program.

“(c) REQUEST FOR QUALITY RATING.—A school that wishes to receive a quality rating shall submit a request and documentation of compliance with this section to the Secretary.

“(d) PUBLIC NOTIFICATION.—Not less than once each year, the Secretary shall report in the Federal Register the names of schools that have received a quality rating as described in this section. The Secretary shall also ensure that a list of programs that received a quality rating is readily available to any individual who requests it from the Department of Education.”.

Subtitle F—Drug-Free National Clearinghouse

SEC. 161. SHORT TITLE.

This subtitle may be cited as the “Drug-Free National Clearinghouse Act of 1998”.

SEC. 162. ESTABLISHMENT OF CLEARINGHOUSE; FUNCTIONS.

(a) ESTABLISHMENT.—(1) There shall be established in the Office of National Drug Control Policy an office to be known as Drug-Free National Clearinghouse (in this subtitle referred to as the “Clearinghouse”).

(2) The Clearinghouse shall be established pursuant to paragraph (1) not later than 90 days after the date of the enactment of this Act.

(b) FUNCTIONS.—The functions of the Clearinghouse shall be—

(1) to consolidate and assume the drug prevention and drug treatment information clearinghouse roles currently performed by National Drug Control Program agencies (as that term is defined in section 1010(6) of the National Narcotics Leadership Act of 1988 (21 U.S.C. 1507(6))); and

(2) to ensure that drug prevention and drug treatment information is effectively disseminated by such agencies to individuals, State and local governments, and nongovernmental entities involved in demand reduction (as that term is defined in section 1010(4) of such Act (21 U.S.C. 1507(4))).

SEC. 163. DIRECTOR.

(a) APPOINTMENT.—There shall be at the head of the Clearinghouse a director, who shall be appointed by the Director of the Office of National Drug Control Policy in consultation with the Director of the National Institute on Drug Abuse.

(b) DUTIES.—The director of the Clearinghouse shall—

(1) encourage consultation between any National Drug Control Program agency that conducts or sponsors research on drug prevention or drug treatment, and any National Drug Control Program agency that disseminates such information;

(2) encourage, as appropriate, National Drug Control Program agencies to develop and implement drug prevention and drug treatment information dissemination plans that specifically target individuals, State and local governments, and nongovernmental entities involved in demand reduction;

(3) coordinate the dissemination of drug prevention and drug treatment information by such agencies to individuals, State and local governments, and nongovernmental entities involved in demand reduction.

SEC. 164. COOPERATION BY NATIONAL DRUG CONTROL PROGRAM AGENCIES.

Each National Drug Control Program agency shall cooperate with the director of the Clearinghouse in carrying out the provisions of this subtitle.

Subtitle G—Drug-Free Parents Empowerment

SEC. 171. SHORT TITLE.

This subtitle may be cited as the “Drug-Free Parents Empowerment Act”.

SEC. 172. DRUG-FREE PARENTS EMPOWERMENT.

(a) ESTABLISHMENT.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall make grants to support the efforts of parent organizations to develop and promote efforts to reduce illegal drug use among children in their communities.

(b) REQUIREMENTS.—A parent organization may receive a grant under subsection (a) only if the following conditions are met:

(1) The organization is a nonprofit organization that is exempt from taxation under section 501(c)(3) of the Internal Revenue Code of 1986.

(2) The organization is governed primarily by parents of children who reside in the community involved.

(3) The organization has not less than five years experience in training, informing, and involving parents in substance-abuse prevention activities within such community.

(4) The application submitted pursuant to subsection (c) by the organization includes a strategy for increasing the involvement of parents in prevention activities, including parent training, that are carried out in such

community and that complement the work of other parts of the community regarding such activities.

(5) The application contains an agreement by the organization that the organization will not expend more than 10 percent of the grant for administrative expenses involved in carrying out the purpose for which the grant is made.

(6) Such application has been approved pursuant to a process of peer review established by the Secretary.

(c) APPLICATION FOR GRANT.—The Secretary may make a grant under subsection (a) only if an application for the grant is submitted to the Secretary and the application is in such form, is made in such manner, and contains such agreements, assurances, and information as the Secretary determines to be necessary to carry out this section.

(d) LIMITATION ON AMOUNT OF GRANT.—A grant under subsection (a) for a fiscal year may not be made in an amount exceeding \$20,000.

(e) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there is authorized to be appropriated \$10,000,000 for each of the fiscal years 1999 through 2001.

TITLE II—PRIVATE SECTOR ANTI-DRUG PARTNERSHIPS

Subtitle A—Antiaddiction Medications

SEC. 201. SHORT TITLE.

This subtitle may be cited as the “Antiaddiction Medication Development Act”.

SEC. 202. FACILITATION OF APPROVAL FOR COMMERCIAL DISTRIBUTION OF ANTIADDICTION DRUGS DEVELOPED BY NATIONAL INSTITUTE OF DRUG ABUSE.

(a) IN GENERAL.—The Commissioner of Food and Drugs and the Attorney General of the United States shall, respectively, promptly provide to the Director of the National Institute on Drug Abuse a response to any request described in subsection (b) that is submitted to the Commissioner or the Attorney General by the Director regarding a drug—

(1) that is being developed by the Director as a maintenance or detoxification treatment for addiction to one or more narcotic substances;

(2) for which clinical trials are being or have been conducted to determine the safety and effectiveness of the drug; and

(3) for which the Director seeks or has approved a private entity to submit for the drug an application under section 505(b) of the Federal Food, Drug, and Cosmetic Act; and

(4) that likely will be added to one of the schedules of controlled substances pursuant to section 201 of the Controlled Substances Act.

(b) DESCRIPTION OF REQUEST.—For purposes of subsection (a), a request by the Director is a request that, with respect to a drug described in subsection (a), the Commissioner and the Attorney General exercise their discretion under the Federal Food, Drug, and Cosmetic Act, and the Controlled Substances Act, to accomplish one or more of the following (as applicable under the request):

(1) To carry out promptly section 201(b) of the Controlled Substances Act with respect to the drug (relating to the decision regarding on which of the schedules of controlled substances a drug is to be included).

(2) To advise the Director, and the sponsor of the application under section 505(b) of the Federal Food, Drug, and Cosmetic Act, on the actions that can be taken by the Director and the sponsor to facilitate the approval of the application.

(3) To designate the drug as a fast track product for purposes of section 506 of such Act.

(4) To provide the drug to physicians who request the drug for treatment purposes under section 561 of such Act (relating to the provision of investigational new drugs to patients who are not participating in clinical trials).

(5) To advise the Director and the sponsor of the application on the actions that can be taken to facilitate the designation of the drug under section 526 of such Act as being a drug for a rare disease or condition (commonly referred to as an orphan drug).

(c) PROCEDURES REGARDING SUBMISSION OF REQUEST; RESPONSE TO REQUEST.—

(1) REQUEST.—In making a request described in subsection (b), the Director shall—

(A) provide such information as the Commissioner or the Attorney General (as applicable) determines is necessary with respect to the request; and

(B) if the request is described in any of paragraphs (3) through (5) of such subsection, state the reasons underlying the determination of the Director that the drug involved may qualify for the status described in the paragraph involved.

(2) RESPONSE.—In providing a response to a request described in subsection (b), the Commissioner and the Attorney General shall state the reasons underlying the response, including as applicable, the reasons underlying any determination by the Secretary that providing a status described in any of paragraphs (3) through (5) of such subsection for the drug involved would be inconsistent with applicable law.

(d) DEFINITIONS.—For purposes of this section:

(1) The term “Commissioner” means the Commissioner of Food and Drugs.

(2) The term “Director” means the Director of the National Institute on Drug Abuse.

(3) The term “Attorney General” means the Attorney General of the United States.

SEC. 203. REPORT REGARDING INCENTIVES FOR DEVELOPMENT OF ANTIADDICTION DRUGS.

(a) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”), in collaboration with the officials specified in subsection (b), shall conduct a study for the purpose of determining whether there is a need to establish particularized incentives for the development of drugs to treat dependence on alcohol or on any controlled substance as defined in section 102 of the Controlled Substances Act (referred to in this section as “qualifying antiaddiction drugs”).

(b) COLLABORATION AMONG AGENCIES.—For purposes of subsection (a), the officials specified in this subsection are as follows:

(1) The Commissioner of Food and Drugs.

(2) The Director of the National Institute on Alcohol Abuse and Alcoholism.

(3) The Director of the National Institute on Drug Abuse.

(4) The Director of the National Institute of Mental Health.

(5) The Administrator of the Substance Abuse and Mental Health Services Administration.

(c) CERTAIN ELEMENTS OF STUDY.—If in conducting the study under subsection (a) the Secretary determines that there is a need to establish particularized incentives for the development of qualifying antiaddiction drugs, the Secretary shall determine whether the incentives should include one or both of the following:

(1) Providing for increased cooperation among the agencies referred to in subsection (b) in order to facilitate the development and approval of such drugs.

(2) Establishing under the Federal Food, Drug, and Cosmetic Act particularized financial incentives for the development of such drugs.

(d) REPORT.—Not later than one year after the date of the enactment of this Act, the Secretary shall complete the study required in subsection (a) and submit to the Committee on Commerce of the House of Representatives, and to the Committee on Labor and Human Resources of the Senate, a report describing the findings made in the study.

Subtitle B—Commission on Role of Medical Education in Reducing Substance Abuse

SEC. 211. NATIONAL COMMISSION ON THE ROLE OF MEDICAL EDUCATION IN REDUCING SUBSTANCE ABUSE.

(a) IN GENERAL.—The Secretary of Health and Human Services shall establish an advisory commission to be known as the National Commission on the Role of Medical Education in Reducing Substance Abuse.

(b) DUTIES.—

(1) IN GENERAL.—The Commission shall conduct a study for the purpose of determining the manner in which programs of initial and continuing medical education can be modified to improve the efforts of health professionals in preventing, diagnosing, and treating cases of substance abuse.

(2) DATE CERTAIN FOR COMPLETION.—Not later than one year after the date of the enactment of this Act, the Commission shall complete the study required in paragraph (1).

(3) REPORT.—Upon completing the study required in paragraph (1), the Commission shall prepare a report describing the findings made as a result of the study. The report shall be submitted to the President, to the appropriate departments and Federal agencies, and to the appropriate committees of the Congress. The Commission may include in the report any recommendations of the Commission regarding administrative or legislative actions. The Secretary shall disseminate the report to the public health officers of the States with the request that the States disseminate the report to public and private programs within the State that provide education in the health professions.

(c) MEMBERSHIP.—

(1) IN GENERAL.—The Commission shall be composed of 10 voting members appointed in accordance with paragraph (2) and the non-voting, ex officio members designated under paragraph (3).

(2) APPOINTMENT OF NON-FEDERAL INDIVIDUALS.—Subject to paragraph (3), the voting members of the Commission under paragraph (1) shall be appointed by the Secretary, and shall be appointed from among individuals who on the day before being appointed were not officers or employees of the Federal Government. Of such members—

(A) one shall be a representative of the American College of Physicians;

(B) one shall be a representative of the American Medical Association;

(C) one shall be a representative of the Association of Professors of Medicine;

(D) one shall be a representative of the American Academy of Pediatrics;

(E) one shall be a representative of the Association of American Medical Colleges;

(F) one shall be a representative of the Association for Substance Abuse Medicine;

(G) one shall be a representative of the American Society of Addiction Medicine;

(H) one shall be a representative of the American Academy of Family Physicians;

(I) one shall be a representative of the American Academy of Neurology; and

(J) one shall be a representative of the American College of Preventive Medicine.

(3) EX OFFICIO MEMBERS.—Each of the following officials (or the designees of the officials) shall serve as the ex officio members of the Commission under paragraph (1):

(A) The Director of the National Institutes of Health.

(B) The Director of National Drug Control Policy.

(C) The Director of the Center on Substance Abuse Prevention.

(D) The Director of the Center on Substance Abuse Treatment.

(E) The Surgeon General of the Public Health Service.

(d) CHAIR.—The Commission shall, from among the members appointed under subsection (c)(2), designate an individual to serve as the chair of the Commission.

(e) TERMS.—The term of a member of the Commission appointed under subsection (c)(2) is for the duration of the Commission.

(f) VACANCIES.—

(1) AUTHORITY OF COMMISSION.—A vacancy in the membership of the Commission does not affect the power of the remaining members to carry out the duties under subsection (b).

(2) APPOINTMENT OF SUCCESSORS.—A vacancy in the membership of the Commission shall be filled in the manner in which the original appointment was made.

(3) INCOMPLETE TERM.—If a member of the Commission does not serve the full term applicable to the member, the individual appointed to fill the resulting vacancy shall be appointed for the remainder of the term of the predecessor of the individual.

(g) MEETINGS.—

(1) IN GENERAL.—The Commission shall meet at the call of the Chair or a majority of the members. The Commission shall meet no fewer than four times.

(2) QUORUM.—A quorum for meetings of the Commission is constituted by the presence of six of the members appointed under subsection (c)(2).

(h) COMPENSATION; REIMBURSEMENT OF EXPENSES.—

(1) APPOINTED MEMBERS.—Members of the Commission appointed under subsection (c)(2) shall receive compensation for each day (including traveltime) engaged in carrying out the duties of the Committee. Such compensation may not be in an amount in excess of the daily equivalent of the annual maximum rate of basic pay payable under the General Schedule (under title 5, United States Code) for positions above GS-15.

(2) EX OFFICIO MEMBERS.—Members of the Commission who are designated under subsection (a)(4) may not receive compensation for service on the Commission in addition to the compensation otherwise received for duties carried out as Federal officers or employees.

(3) REIMBURSEMENT.—Members of the Commission may, in accordance with chapter 57 of title 5, United States Code, be reimbursed for travel, subsistence, and other necessary expenses incurred in carrying out the duties of the Commission.

(i) STAFF AND CONSULTANTS.—

(1) STAFF.—

(A) IN GENERAL.—The Commission may appoint and determine the compensation of such staff as may be necessary to carry out the duties of the Commission, including an executive director. Such appointments and compensation may be made without regard to the provisions of title 5, United States Code, that govern appointments in the competitive services, and the provisions of chapter 51 and subchapter III of chapter 53 of such title that relate to classifications and the General Schedule pay rates.

(B) LIMITATION.—Staff members appointed under paragraph (1) may not be compensated in excess of the maximum rate of basic pay payable for GS-15, except that the executive director may not be compensated in an amount exceeding the maximum rate of basic pay payable under the General Schedule for positions above GS-15.

(2) CONSULTANTS.—The Commission may procure such temporary and intermittent services of consultants under section 3109(b) of title 5, United States Code, as the Commission may determine to be appropriate in carrying out the duties under subsection (b). The Commission may not procure services under this subsection at any rate in excess of the daily equivalent of the maximum annual rate of basic pay payable under the General Schedule for positions above GS-15. Consultants under this subsection may, in accordance with chapter 57 of title 5, United States Code, be reimbursed for travel, subsistence, and other necessary expenses incurred for activities carried out on behalf of the Commission pursuant to subsection (b).

(j) ADMINISTRATIVE SUPPORT.—The Administrator of General Services shall, on a reimbursable basis, provide for the Commission such quarters and administrative support as may be necessary for the Commission to carry out the duties under subsection (b).

(k) DURATION OF COMMISSION.—The Commission terminates 45 days after the date on which the report under subsection (b)(3) is submitted under such subsection.

(l) DEFINITIONS.—For purposes of this section:

(1) The term "Commission" means the National Commission on the Role of Medical Education in Reducing Substance Abuse.

(2) The term "Secretary" means the Secretary of Health and Human Services

(m) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there is authorized to be appropriated \$1,000,000 for fiscal year 1999, to remain available until the termination of the Commission under subsection (k).

TITLE III—STATEMENT OF NATIONAL ANTIDRUG POLICY

Subtitle A—Congressional Leadership in Community Coalitions

SEC. 301. SENSE OF CONGRESS.

(a) FINDINGS.—The Congress finds the following:

(1) Illegal drug use is dangerous to the physical well-being of the Nation's youth.

(2) Illegal drug use can destroy the lives of the Nation's youth by diminishing their sense of morality and with it everything in life that is important and worthwhile.

(3) According to recently released national surveys, drug use among the Nation's youth remains at alarmingly high levels.

(4) National leadership is critical to conveying to the Nation's youth the message that drug use is dangerous and wrong.

(5) National leadership can help mobilize every sector of the community to support the implementation of comprehensive, sustainable, and effective programs to reduce drug abuse.

(6) As of September 1, 1998, 76 Members of the House of Representatives were establishing community-based anti-drug coalitions in their congressional districts or were actively supporting such coalitions that already existed.

(7) The individual Members of the House of Representatives can best help their constituents prevent drug use among the Nation's youth by establishing community-based anti-drug coalitions in their congressional districts or by actively supporting such coalitions that already exist.

(b) SENSE OF CONGRESS.—It is the sense of Congress that the individual Members of the House of Representatives, including the Delegates and the Resident Commissioner, should establish community-based anti-drug coalitions in their congressional districts or should actively support such coalitions that already exist.

Subtitle B—Rejection of Legalization of Drugs

SEC. 311. SENSE OF CONGRESS.

(a) FINDINGS.—The Congress finds the following:

(1) Illegal drug use is harmful and wrong.

(2) Illegal drug use can kill the individuals involved or cause the individuals to hurt or kill others, and such use strips the individuals of their moral sense.

(3) The greatest threat presented by such use is to the youth of the United States, who are illegally using drugs in increasingly greater numbers.

(4) The people of the United States are more concerned about illegal drug use and crimes associated with such use than with any other current social problem.

(5) Efforts to legalize or otherwise legitimize drug use present a message to the youth of the United States that drug use is acceptable.

(6) Article VI, clause 2 of the Constitution of the United States states that "[t]his Constitution, and the laws of the United States which shall be made in pursuance thereof; and all treaties made, or which shall be made, under the authority of the United States, shall be the supreme law of the land; and judges in every state shall be bound thereby, any thing in the Constitution or laws of any state to the contrary notwithstanding."

(7) The courts of the United States have repeatedly found that any State law that conflicts with a Federal law or treaty is preempted by such law or treaty.

(8) The Controlled Substances Act (title II of Public Law 91-513; 21 U.S.C. 801 et seq.) strictly regulates the use and possession of drugs.

(9) The United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances Treaty similarly regulates the use and possession of drugs.

(10) Any attempt to authorize under State law an activity prohibited under such Treaty or the Controlled Substances Act would conflict with that Treaty or Act.

(b) SENSE OF CONGRESS.—It is the sense of Congress that—

(1) the several States, and the citizens of such States, should reject the legalization of drugs through legislation, ballot proposition, constitutional amendment, or any other means; and

(2) every State should make efforts to be a drug-free State.

Subtitle C—Report on Streamlining Federal Prevention and Treatment Efforts

SEC. 321. REPORT ON STREAMLINING FEDERAL PREVENTION AND TREATMENT EFFORTS.

(a) SENSE OF CONGRESS.—It is the sense of Congress that—

(1) the efforts of the Federal Government to reduce the demand for illegal drugs in the United States are frustrated by the fragmentation of those efforts across multiple departments and agencies; and

(2) improvement of those efforts can best be achieved through consolidation and coordination.

(b) REPORT REQUIREMENT.—

(1) IN GENERAL.—Not later than 18 months after the date of enactment of this Act, the Director of National Drug Control Policy shall prepare and submit to the appropriate committee a report evaluating options for increasing the efficacy of drug prevention and treatment programs and activities by the Federal Government. Such option shall include the merits of a consolidation of programs into a single agency, transferring programs from one agency to another, and improving coordinating mechanisms and authorities.

(2) RECOMMENDATION AND EXPLANATORY STATEMENT.—The study submitted under paragraph (1) shall identify options the Director deems have merit, and an explanation which options should be implemented.

(3) AUTHORIZATION OF APPROPRIATIONS.—For purposes of carrying out this section, there are authorized to be appropriated to the Director of National Drug Control Policy \$1,000,000 for contracting, policy research, and related costs.

(c) APPROPRIATE COMMITTEE DEFINED.—In this section, the term "appropriate committees" means the Committee on Appropriations, the Committee on Commerce, and the Committee on Education and the Workforce of the House of Representatives, and the Committee on Appropriations, and Committee on Labor and Human Resources of the Senate.

Mr. DEFAZIO. Mr. Chairman, I move to strike the last word, and I rise in support of the bill.

(Mr. DEFAZIO asked and was given permission to revise and extend his remarks.)

The CHAIRMAN. Are there further amendments to the bill?

AMENDMENT OFFERED BY MS. ROS-LEHTINEN

Ms. ROS-LEHTINEN. Mr. Chairman, I offer an amendment.

The Clerk read as follows:

Amendment offered by Ms. ROS-LEHTINEN:

Page 26, line 16, strike "\$20,000" and insert "\$50,000".

Ms. ROS-LEHTINEN. Mr. Chairman, as an educator and as a parent of two daughters, I know firsthand that children learn most from their parents. Educating parents to teach children about the dangers of drugs has always been and continues to be the single most effective way of preventing children from using drugs.

Nancy Reagan, as a mother and as a First Lady, became an active and vocal crusader to empower the parent. By 1991, with the help of involved parents leading the war against drugs, Mr. Chairman, drug use dropped by 50 percent. Since then, drug use has once again increased despite the many funds we continue to pour into fighting this battle.

One of the problems is that we have failed to understand and take seriously the role of the parent as the leader in the drug war, and we have failed to identify the parent as the person in power.

I thank my colleague, the gentleman from Ohio (Mr. PORTMAN), for taking the initiative in introducing legislation that will authorize funds and encourage States to get parents involved in our battle against drugs. The gentleman from Ohio (Mr. PORTMAN) is regarded by the Congress as the leader in getting grass roots involvement in the drug battle. We all appreciate our colleague's effort and leadership. His bill merits an increase in limitation funds for grants awarded, and that is what my amendment would do. It would increase the competitive grant limitation amount from 20,000 to \$50,000 to establish and improve programs that seek to educate and prepare parents to teach their children about the hazard

of drugs. In the past, the lack of funding and proper training has inhibited the parental empowerment movement. Parents are our first line of defense in this national drug war, and so I ask my colleagues to support this amendment to bring us one step closer to victory.

Mr. BARRETT of Wisconsin. Mr. Chairman, I move to strike the last word.

Mr. Chairman, I just want my colleagues to know that this side accepts the amendment.

Mr. PORTMAN. Mr. Chairman, I move to strike the requisite number of words.

Briefly, Mr. Chairman, I want to thank the gentlewoman from Florida (Ms. ROS-LEHTINEN) for her help on this legislation. She is a champion for the parent movement around the country, and I think this is an improvement to the legislation. My colleague agrees, we support the amendment, and we urge our colleagues to do the same thing.

The CHAIRMAN. The question is on the amendment offered by the gentlewoman from Florida (Ms. ROS-LEHTINEN).

The amendment was agreed to.

AMENDMENT OFFERED BY MR. BARRETT OF WISCONSIN

Mr. BARRETT of Wisconsin. Mr. Chairman, I offer an amendment.

The Clerk read as follows:

Amendment offered by Mr. BARRETT of Wisconsin:

Page 10, line 7, insert after "employee drug testing" the following: "by a drug testing laboratory certified by the Substance Abuse and Mental Health Services Administration, or the College of American Pathologists, and each positive test result shall be reviewed by a Licensed Medical Review Officer".

Mr. BARRETT of Wisconsin. Mr. Chairman, this amendment simply makes the language in this bill identical to the language in a bill passed earlier this year, the Drug-free Workplace Act of 1998. That bill passed the House on June 23 by a 402-to-9 vote. It makes it clear that in those drug-free workplace grants that companies obtain or that nonprofits obtain, that the employee drug testing has to be done by a drug testing laboratory certified by the Substance Abuse and Mental Health Services Administration, the College of American Pathologists, and each positive test result shall be reviewed by a licensed medical review officer. Those are quality concerns.

Mr. PORTMAN. Mr. Chairman, I move to strike the last word.

I would just say, Mr. Chairman, that I very much support this amendment. I think it again improves the legislation. It clarifies the intent of the legislation. It also is consistent, as the gentleman from Wisconsin (Mr. BARRETT) says, with the changes which were made in the previous authorization which did pass the House with an overwhelming bipartisan margin.

So we would certainly accept that amendment, and I appreciate the gentleman's help in improving it.

□ 1815

The SPEAKER pro tempore. The question is on the amendment offered by the gentleman from Wisconsin (Mr. BARRETT).

The amendment was agreed to.

AMENDMENT OFFERED BY MR. SOUDER

Mr. SOUDER. Mr. Chairman, I offer an amendment.

Mr. BARRETT of Wisconsin. Mr. Chairman, I reserve a point of order.

The CHAIRMAN. A point of order is reserved.

The Clerk read as follows:

Beginning on page 21, strike lines 7 and all that follows through page 22, line 9, and insert the following:

"(a) IN GENERAL.—The chief executive officer of each State, or in the case of a State in which the constitution or law of such State designates another individual, entity, or agency in the State to be responsible for education activities, such individual, entity, or agency shall—

"(1) establish a standard of quality for drug prevention programs implemented in public schools in the States in accordance with subsection (b); and

"(2) identify and designate, upon application by a school, any public school that achieves such standard as a quality program school.

"(b) CRITERIA.—The standard referred to in subsection (a) shall address, at a minimum—

"(1) a comparison of the rate of illegal use of alcohol, tobacco, and drugs by students enrolled in the school for a period of time to be determined by the chief executive officer of the State;

"(2) the rate of suspensions or expulsions of students enrolled in the school for drug or alcohol related offenses;

"(3) the effectiveness of the program as proven by research;

"(4) the involvement of parents and community members in the design of the drug prevention program; and

"(5) the extent of review of existing community drug prevention programs before implementation of a public school program.

"(c) REQUEST FOR QUALITY PROGRAM DESIGNATION.—A school that wishes to receive a quality program designation shall submit a request and documentation of compliance with this section to the chief executive officer of the State or the individual, entity, or agency described in subsection (a), as the case may be.

"(d) PUBLIC NOTIFICATION.—Not less than once a year, the chief executive officer of each State or the individual, entity, or agency described in subsection (a), as the case may be, shall make available to the public a list of the names of each public school in the State that has received a quality program designation in accordance with this section."

Mr. SOUDER (during the reading). Mr. Chairman, I ask unanimous consent that the amendment be considered as read and printed in the RECORD.

The CHAIRMAN. Is there objection to the request of the gentleman from Indiana?

There was no objection.

Mr. BARRETT of Wisconsin. Mr. Chairman, I withdraw my point of order.

Mr. SOUDER. Mr. Chairman, I rise today to offer a perfecting amendment to this bill.

Let me be perfectly clear. I support the bill as it is currently drafted, and I

am one of 14 original cosponsors. I believe, however, that the bill could be perfected with the minor adjustment my amendment offers.

As the bill stands now, the subtitle that amends Safe and Drug Free Schools would allow the Secretary of Education to develop a rating system to determine whether a public school has a quality drug program. My perfecting amendment would change this provision to require that States, rather than the bureaucrats inside Washington, establish their own standard of quality for drug prevention programs within their borders.

My rationale in offering this change is simple. It would ensure that authority over education programs be maintained where it should be: at the State level.

It is important to keep in mind that while this amendment would require States to establish their own standards, my amendment would still require modest criteria to be considered by States in their determination of quality. At a minimum, the criteria required would be the following:

The rate of illegal use of alcohol, tobacco or drugs by the students enrolled in the school; the rate of suspensions or expulsions of students enrolled in the school for drug or alcohol-related offenses; the effectiveness of the program as proven by research; the involvement of parents and community members in the design of the drug prevention program; and the extent of review of existing community prevention programs before the implementation of a public school program.

While not being overly prescriptive for States, I believe these criteria will encourage schools to rely on necessary tools that will help them craft effective programs, such as: parental and community input into their drug prevention programs; an accurate assessment of the scope and the frequency of the problem in their school districts; and reliance on reliable research.

Additionally, my amendment continues the bill's current emphasis on the importance of publicly disclosing and highlighting effective programs. The amendment would require State authorities to open up for public inspection at least once per year the names of all schools that have been designated as having formulated quality drug programs.

As we all work in our home districts and our home States, we see that one of the things we need to encourage is the development and widespread dissemination of those programs that have been effective at tackling the problems.

In requiring public notification, I believe we close that loop of what we are trying to accomplish. Public notification is a vital part of the process.

Additionally, open information will facilitate the dissemination of the message to students that the use of illicit drugs and illegal alcohol and tobacco use will not be tolerated, either in schools or outside of them.

I believe my perfecting amendment, which I worked on with the gentleman from Pennsylvania (Mr. GOODLING) of the Committee on Education and the Workforce, and much of this was developed at his suggestion and his leadership, is in the process of formulating a highly effective piece of legislation. The students of America deserve nothing less.

Mr. BARRETT of Wisconsin. Mr. Chairman, I move to strike the last word.

Mr. Chairman, if the gentleman from Indiana would engage me perhaps on a couple of questions, I would request of the gentleman to tell me a little bit more about what his intent is, what his problem is with the current law.

Mr. SOUDER. Mr. Chairman, will the gentleman yield?

Mr. BARRETT of Wisconsin. I yield to the gentleman from Indiana.

Mr. SOUDER. Mr. Chairman, the discussion we had as part of this process in not going through the full Committee on Education and the Workforce, I talked with the gentleman from Pennsylvania (Mr. GOODLING), the chairman of the committee, as did the gentleman from Ohio (Mr. PORTMAN), and we tried to work this out yesterday and did not get to the Committee on Rules in time, because there is a strong feeling that this decision should be at the State level and we should encourage each State to develop the standards with these guidelines. It is a pattern that we have done in the Committee on Education and the Workforce, is to set national guidelines of what we expect, but leave the final decision-making to the States rather than the Department of Education.

Mr. BARRETT of Wisconsin. Mr. Chairman, reclaiming my time, could the gentleman inform me as to his problem with the current system?

Mr. SOUDER. Mr. Chairman, if the gentleman will continue to yield, we do not have a current system. This is just an amendment to the new bill that we have in.

In that bill, in our first draft we had the Department of Education doing it, and we felt, consistent with everything else we have been doing, it would be better to encourage the States to do it. It is not just saying hey, come up with a word. It is saying, here are the criteria. The criteria did not change. We merely moved the agency where the public dissemination will occur and where the awards will be given to the governors as opposed to the Secretary of Education.

Mr. PORTMAN. Mr. Chairman, will the gentleman yield?

Mr. BARRETT of Wisconsin. I yield to the gentleman from Ohio.

Mr. PORTMAN. Mr. Chairman, let me just try to further clarify.

I think under the legislation it is fair to say that the Secretary had the discretion either to do it at the Federal level or the State level. This change would say that indeed, it should be done at the State level, which I think

is consistent generally speaking with the legislation in the sense that we are trying to focus on State and local communities. It also happens to be something important to the chairman, and he gained a waiver. This is something that was raised with me.

This is a good provision. The quality assurance is going to enable parents to know whether these schools are using drug-free school money appropriately and forces them to have a needs assessment and forces them to bring parents in and have research-based programming. The question is just whether that will be a requirement at the State level or something at the Federal level.

Our legislation frankly left it open originally, and this would say it should be done at the State level.

Mr. SOUDER. Mr. Chairman, will the gentleman yield?

Mr. BARRETT of Wisconsin. I yield to the gentleman from Indiana.

Mr. SOUDER. Mr. Chairman, just briefly, I think it is also consistent with how we do the Safe and Drug Free Schools Act and this brings it all together. It is not that the other was bad, that is why I was an original cosponsor of this. It just clarifies it further.

The CHAIRMAN. The question is on the amendment offered by the gentleman from Indiana (Mr. SOUDER).

The amendment was agreed to.

AMENDMENT OFFERED BY MR. TAYLOR OF MISSISSIPPI

Mr. TAYLOR of Mississippi. Mr. Chairman, I offer an amendment.

The Clerk read as follows:

Amendment offered by Mr. TAYLOR of Mississippi:

Add at the end of the bill the following title:

TITLE IV—MISCELLANEOUS PROVISIONS
SEC. 401. DRUG TESTING AS CONDITION OF FEDERAL EMPLOYMENT.

Each individual appointed to an employment position with the Federal Government after the date of the enactment of this Act is appointed with the employment condition that the individual is subject to random, unannounced testing for the illegal use of any controlled substance (as defined in section 102 of the Controlled Substances Act).

Mr. TAYLOR of Mississippi. Mr. Chairman, earlier today we voted to increase the effort on the war on drugs by about \$2 billion. We have in different States, including my home State of Mississippi, some of the toughest laws on Earth with regard to drug dealers, a law that with others I helped pass in Mississippi, which says that if one sells 2 ounces of cocaine, 2 ounces of heroin, 100 pills or 10 pounds of marijuana over the course of a year, if one is caught and convicted, one will spend the rest of one's life in prison.

I have flown counterdrug missions with the Colombian National Police, the helicopters that go out and fly cover for the crop dusters. We have SEALs and special forces on the ground in Central America right now training their people in counternarcotics operations. We have a riverine school in Iquitos, Peru, using our Marines and our SEALs to train them in drug inter-

diction. We have had submarines off the coast, P-3s, E-3s, AWACS, just about everything in the American inventory involved in the war against drugs, and it is not working.

The reason it is not working is that we have this incredible double standard in America where we say, it is bad to sell drugs, but somehow it is all right to use them. It is not all right to use them.

I happened to enlist in the Coast Guard about the time that our armed forces hit rock bottom as far as drug usage. It was fairly common every night for our barracks to smell like the Marrakesh Express. Incidentally, almost every barracks around the world where there were American troops back then smelled like the Marrakesh Express, it was so common for marijuana and other illegal narcotics to be used.

By 1973 or so the military got serious about it and they implemented drug testing. First, it was a fairly lenient program that says, if we catch you, we are going to put you through treatment, we are going to give you a second chance, maybe even a third chance. That over the years has gotten tighter now to where if they catch someone using drugs, they are immediately removed from the force.

Guess what? The closest thing we have in America to a drug-free society is the American military, because they know that justice is sure and it is swift and if they are caught using drugs, they are going to be removed from the military.

Mr. Chairman, I do not think anyone who works for our Nation should be using drugs, illegal drugs, taking their Federal paycheck, paid for by the taxpayers of this country, and buying illegal drugs. I think this is a first step towards sending the message that we are not going to tolerate drug use in America.

For this reason I offer this amendment. I think it is just a first step. It would allow the supervisors to, if they have reason to believe one of their employees is using drugs, to demand a drug test. It does not call for them to be fired. But I would hope that the executive branch of the government would follow this up with hard and fast rules calling for treatment, calling for some way of getting people off drugs, and eventually tighten up those rules to where people who are caught using drugs, after adequate warning, are removed from the Federal payroll.

Mr. BARRETT of Wisconsin. Mr. Chairman, I move to strike the last word.

Mr. Chairman, this amendment, although well intentioned, is clearly unconstitutional. The courts have consistently held that when addressing the privacy considerations of Federal employees, that they have to be measured in a context that provides for a reasonable search. And in making the determination as to whether the search is reasonable, they look at the security

risks. That is why when the gentleman from Mississippi talked about the military, there clearly is a security risk dealing with military personnel.

Just last year there was a case, *Stigile v. Clinton*, decided by the United States Court of Appeals for the District of Columbia, decided April 15, 1997, and in that case, the Court held that employees of the White House who worked with the President and the Vice President on security could be subject to random drug searches. But it also went on to talk about the need for a nexus.

Clearly, there is no nexus provided by simply being a Federal employee and having the drug test. There has to be a nexus, there has to be a test as to whether it is reasonable. Simply working for the Federal Government, being an employee for the Federal Government in and of itself does not provide that nexus.

So this provision is clearly unconstitutional. It violates individuals' Fourth Amendment right to privacy, and it would be a huge mistake for this House to adopt this amendment. It not only would be unconstitutional, but I am sure it would doom this bill, and I ask my colleagues to strongly defeat this measure.

Mrs. MORELLA. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, I simply want to point out that I do not think this is a good idea for various constitutional reasons and other reasons. Also, we have to think about the cost, the fact that there would be a high error ratio; the fact that there would be retesting that would be necessary. It is the kind of issue we have discussed before and have stricken, and I think that it should be stricken again.

Because of the camaraderie, conviviality, nonpartisan situation in this Congress that I hope for, I yield to the gentleman who is the sponsor of this amendment, the gentleman from Mississippi (Mr. TAYLOR).

Mr. TAYLOR of Mississippi. Mr. Chairman, I thank the gentlewoman from Maryland, particularly for giving her thoughts on this measure.

□ 1830

In response to what has been said earlier, we are getting ready to have drug testing of teenage drivers just to get a driver's license. We are encouraging private sector employers through this bill, which is the main thrust of this bill, because are encouraging private sector employers to test their employees for drugs.

Ladies and gentlemen, we are the largest employer in America. Why on Earth would we tell all the other smaller employers that we think this is a great idea for them if we do not think it is a great idea for us?

There is a real war being fought on drugs. I visited a Colombian Lansero, that is their word for Ranger, battalion in February on a Thursday. They went

out the following Tuesday. There was 125 of them. By the following Thursday, only 18 of them were still alive or not captured. It is a real war.

You read in the paper of American crop dust pilots in training accidents over Colombia. Who is kidding who? They were shot down because there is a bounty on people who fly the crop dusters to eradicate the heroin in the coca fields, \$5,000 a plane. If you are a Colombian peasant, \$5,000 looks like a heck of a lot of money, and it is certainly worth taking a few potshots at an American pilot for.

It is a real war. I do not think it is fair to ask some Americans to put their lives on the line when we are not even going to ask other Americans who worked for this Nation to just be subject to a test to let us know that they are on our side, not on their side, on our side, that they are living within the law.

That is what the congressional inquiry into the President is all about: Is the highest elected official living by the law? Yes? No? I think every single Federal employee, Congressman, every one of us ought to live by the law and be subject to testing to make sure that we are living by the law.

That is why I offered this amendment. It is not enough to send troops all over Latin America, because when you solve the problem in Peru, it goes to Colombia. When you fix it in Colombia, it is going to go to Belize.

A lot of the heroin has come out of southeast Asia. We have tried to go over there and tell them our will. They did not like the idea. I do not think anyone is a proponent of sending more Americans over to Southeast Asia right now.

The problem is in America. It is not in Colombia. It is not in Peru. It is not in Belize. It is not in Thailand. It is here in America. I think the way we start solving the problem in America is by telling our employees, the people that work for America, do not use illegal drugs. It is real simple.

All the death sentences and drug kingpin laws are not going to do anything because there is so much money to be made; because if you go after this kingpin, he is just going to be replaced by another.

The way you solve the problem is one at a time when you start telling Americans we are not going to tolerate drug use. The bill says to the private sector we are going to encourage you, we are going to give you grants, we are going to do all these great things for you if you will ask your employees to quit using drugs.

Doggone it, if it is a good idea for them, it is a good idea for us. The bill is clearly constitutional. We have drug testing for any number of reasons in this country. I think everyone who works in our government in some way contributes to our national security.

The amendment has been ruled in order by the Parliamentarian, and I will be asking for a vote on it.

Mr. CUMMINGS. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, I would like to ask the sponsor of the amendment a question, and I will yield to him in a moment once I get the question asked.

I read the amendment. During the gentleman's discussion, he said that the way this thing would work is that if a supervisor had some kind of cause to believe, I think he said, and he can correct me if I am wrong, to believe that someone might be using drugs, that that might be the reason for a drug test, so that might be the cause; is that correct?

Mr. Chairman, I yield to the gentleman from Mississippi (Mr. TAYLOR) to answer that question.

Mr. TAYLOR of Mississippi. Mr. Chairman, right now, we have no means of asking someone who shows up at work apparently stoned out of their mind, there is absolutely nothing right now their supervisor can do. I would like to give him the opportunity to say, I think you ought to take a drug test.

Let me make this perfectly clear. In order to make it constitutional, since the gentleman did have a question, this is for new hires as a subject of a condition of employment. When someone walks in, from the passage of this bill forward, they know that if they accept a job with the Federal Government, as a condition of employment they are subject to drug testing. That is clearly constitutional, because it is done every day in the private sector as a condition of employment.

Mr. CUMMINGS. Mr. Chairman, I reclaim my time for another question. I guess the gentleman is still not answering my question. What I am going to ask is exactly the practicality of how this works.

In the gentleman's amendment, it talks about random unannounced testing. I am just asking, is there something; but in the gentleman's statement of explanation of the amendment, he talked about having some kind of cause to believe that this person, and he just did it again, as having some cause to believe that this person is using drugs.

I guess my question is, when the gentleman talks about random and unannounced, as I read this amendment, that means that we do not even have to have any kind of cause. I mean, is it one or the other, or is it both? Is the gentleman following me?

First of all, I believe that the gentleman's intentions are good, and I know the gentleman is concerned, because I know we have talked about this subject before. I guess I am trying to look at the practicality and trying to make sure that when the Members vote on the amendment, they understand what they are voting for.

It is one thing if the gentleman is saying that having some kind of a reasonable belief that this person is using drugs, that is one thing; to say that it

is just random and unannounced for anybody at any time, that is a whole other thing.

So I am asking the gentleman for clarification so that all of us will know what we are voting on, what the gentleman's intent of the amendment is.

Mr. Chairman, I will yield to the gentleman to answer.

Mr. TAYLOR of Mississippi. Mr. Chairman, it can be done at any time as a condition of employment, just as my daughter, the college athlete, is subject to a random drug test and it is on a regular basis a condition of an athlete at the college.

Mr. CUMMINGS. Mr. Chairman, I reclaim my time. So the gentleman is telling me, contrary to what he said a little bit earlier, there does not have to be any kind of cause. There does not have to be any kind of reason for believing or suspecting that that person may be using drugs. Is that correct?

Mr. Chairman, I yield to the gentleman from Mississippi to answer.

Mr. TAYLOR of Mississippi. Mr. Chairman, this is a democracy. We are a work in progress. If during the course of the debate of this bill, if during the conference the gentleman thinks it needs to be perfected, I would welcome that. But we have to start somewhere.

Mr. CUMMINGS. Mr. Chairman, reclaiming my time, the reason why I ask those questions is because, when the gentleman talked about having a reasonable belief that the person may be using drugs, I think that is a very, very tough determination to make.

I mean, it is one thing when somebody comes in stoned; it is another thing if somebody perhaps wants, and I have seen this in my State where there has been random drug testing and testing for cause, the kind of cause that the gentleman talked about a little bit earlier and what happened. There has been some abuse of that where a supervisor may have wanted to get rid of an employee or whatever, that kind of thing.

The other thing that I am concerned about is, once they discover the person is on drugs, having some kind of way so the person does not lose their job, I know that is the gentleman's intent, so that the person can get some type of treatment as opposed to that person losing their job.

We have seen that come up, like I said, in many instances in our Workman's Compensation laws in Maryland.

Mr. Chairman, I yield to the chairman of the subcommittee, the gentleman from Wisconsin (Mr. BARRETT).

Mr. BARRETT of Wisconsin. Mr. Chairman, I want to make it clear that this bill does not require drug testing for other employees. What it does have is it has a voluntary program, a demonstration program. In that program, companies who take advantage of it as one of the components must have a drug testing provision, but it does not necessarily apply to all employees. It does not necessarily apply to new employees. It can be simply enacted for

repeat offenders for an individual who has a drug problem. So let me make it very clear that this bill does not require drug testing for anyone who is in an employment situation.

Mr. PORTMAN. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, this amendment came as a surprise to us today. I just listened to the debate carefully and I have to say a couple of things. One is, I am very sympathetic in general to the idea that has been raised by the gentleman from Mississippi (Mr. TAYLOR), which is to have drug testing at the Federal Government level.

We already have drug testing, as I think my colleagues know, for safety-sensitive positions in the Federal Government. There are some concerns that have been raised today, including the fiscal impact. We would have not only a bureaucracy to administer this but we would have, I think necessarily, an employee assistance program. I certainly would think that that would be required. We would have to have some treatment options, which is in the legislation for the small business aspect of this. We would also have to have the costs of the test borne by the taxpayer.

I know CBO has not yet done an estimate of this legislation, but I would like to see what those costs are. I think that would be appropriate for the Congress to review before we acted on it.

The constitutional issues have been raised. I think there is some gray area here, but probably there would be a constitutional issue based on the case law that we have seen, looking at the issue of drug testing here in this Chamber. So I think that is a real issue, certainly. I am not saying that that is a reason not to do it. It would then become a test case, but it is certainly not clear at all.

In the legislation, we have the ability for small businesses to get technical assistance to put in place drug testing, but the legislation only requires that it be some kind of testing, including pre-employment drug testing, including employment drug testing for cause; in other words, after there has been an accident where there is some suspicion of use that there be drug testing. It would not require the small companies that took advantage of the program have unannounced or random drug testing. So this does go further than the legislation before us in that respect.

I guess what I would say to my friend, the gentleman from Mississippi (Mr. TAYLOR), who I am sympathetic with on this issue, I would like to work with him on it. Maybe there is something we can put together through a more thoughtful process where we look at some of these issues, get the costs, figure out whether there is a way to narrow it so it is more targeted. Yet, I think to add it to this legislation at this time is not something that I personally would be able to support.

Mr. SOUDER. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, I too want to say that I am very much in sympathy with this and, generally speaking, since the time I was a staff member in the other House and worked with Senator COATS in drafting the first drug testing in schools, allowable use of it for safe and drug-free schools, it is working in the drug testing clause in the higher ed bill that we are moving through right now and through my subcommittee we moved the workplace bill.

Among the things we heard in the hearings, however, is that unless the chief executives were being tested along with their employees, there was sort of a double standard. This obviously raises another question in the bill offered by the gentleman from Texas (Mr. BARTON) about drug testing Members of Congress. What I have learned as I have had myself drug tested, that in putting these things in, we cannot even use our staff allowances to do the drug testing.

It is not clear in this bill, and I understand why the gentleman from Mississippi (Mr. TAYLOR) does not have it, that we do not have it for the heads of the agencies rather than just the people coming in.

In addition to the concerns that the gentleman from Ohio (Mr. PORTMAN) read, I have to sort through what I am going to do on the bill, but I am concerned that we might wind up in a situation where we actually set back drug testing, when I ultimately agree with the gentleman's point that what we want to do is advance how we effectively do this.

When we drug test, it is the best prevention program. It is the way to have people be clean. Because the larger companies in this country are, in fact, doing drug testing, abusers have moved to the smaller companies. If we are not careful, they are going to move into Federal employment.

Like the gentleman has mentioned in his statement, that is one of the reasons the military has become clean. I am very empathetic to the gentleman's point, but I wish we could work together in trying to figure out how to do this in the most effective way. I remain uncertain how I am going to vote, but I am very sympathetic with the goals, and I want to make sure we can do it in the most effective way and make sure we actually have drug testing programs that work.

Mr. BARTON of Texas. Mr. Chairman, I move to strike the requisite number of words.

Mr. Chairman, first I want to thank the gentleman from Ohio (Mr. PORTMAN) for his excellent work on the base bill. He has done a tremendous job.

I am rising specifically to support the amendment of the gentleman from Mississippi (Mr. TAYLOR). The gentleman from New York (Mr. SOLOMON) and I have been working in this Congress to implement the House rule that

says all Members of Congress and the congressional staff shall be drug tested. We have a House rule that is ready to come to the floor. We have to honor the Speaker's request that there be a Republican conference on the proposed implementation of the House rule before we bring it to the floor, and I am still hopeful that we can hold that conference and bring that rule, House rule, to the floor in the next 3 weeks.

In the meantime, the amendment of the gentleman from Mississippi (Mr. TAYLOR) that would require as a condition of employment all Federal employees to be drug tested is a giant step in the right direction.

I have a drug testing plan in my office for myself and my congressional staff. I have had it since 1989. I have extensively worked with the business community, the social welfare community, on making sure that any drug testing plans, first that they are accurate, and second that they are confidential, and that they are implemented in a fair fashion.

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As has been pointed out, drug testing does work. It identifies the people that have the problem. It also in most plans gives an opportunity to go into drug counseling rehabilitation. And if we were to pass the Taylor amendment, which I will enthusiastically support, it would help combat the drug problem that faces our country.

So, again, I want to commend the gentleman from Ohio (Mr. PORTMAN) for bringing the base bill to the floor, and I thank the gentleman from Mississippi (Mr. TAYLOR) for taking the advantage of putting the amendment on, and I hope that we adopt this by unanimous consent.

The CHAIRMAN. The question is on the amendment offered by the gentleman from Mississippi (Mr. TAYLOR).

The question was taken; and the Chairman announced that the ayes appeared to have it.

Mr. BARRETT of Nebraska. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The CHAIRMAN. Pursuant to House Resolution 538, further proceedings on the amendment offered by the gentleman from Mississippi (Mr. TAYLOR) will be postponed.

The point of no quorum is considered withdrawn.

AMENDMENT NO. 2 OFFERED BY MR. RAMSTAD

Mr. RAMSTAD. Mr. Chairman, I offer an amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 2 offered by Mr. RAMSTAD:
At the end of title I, insert the following new subtitle (and conform the table of contents accordingly):

Subtitle H—Addiction Reduction Through Treatment

SEC. 181. SHORT TITLE OF SUBTITLE.

This subtitle may be cited as the "Addiction Reduction Act of 1998".

SEC. 182. FINDINGS.

Congress finds the following:

(1) Substance abuse, if left untreated, is a medical emergency.

(2) Parity should apply to benefits for treatment sought voluntarily, including treatment for substance abuse.

(3) Nothing in this subtitle should be construed as prohibiting application of the concept of parity to substance abuse treatment provided by faith-based treatment providers.

SEC. 183. PARITY IN SUBSTANCE ABUSE TREATMENT BENEFITS.

(a) GROUP HEALTH PLANS UNDER THE PUBLIC HEALTH SERVICE ACT.—(1) Subpart 2 of part A of title XXVII of the Public Health Service Act is amended by adding at the end the following new section:

"SEC. 2706. PARITY IN THE APPLICATION OF TREATMENT LIMITATIONS AND FINANCIAL REQUIREMENTS TO SUBSTANCE ABUSE TREATMENT BENEFITS.

"(a) IN GENERAL.—In the case of a group health plan (or health insurance coverage offered in connection with such a plan) that provides both medical and surgical benefits and substance abuse treatment benefits, the plan or coverage shall not impose treatment limitations or financial requirements on the substance abuse treatment benefits unless similar limitations or requirements are imposed for medical and surgical benefits.

"(b) CONSTRUCTION.—Nothing in this section shall be construed—

"(1) as requiring a group health plan (or health insurance coverage offered in connection with such a plan) to provide any substance abuse treatment benefits; or

"(2) to prevent a group health plan or a health insurance issuer offering group health insurance coverage from negotiating the level and type of reimbursement with a provider for care provided in accordance with this section.

"(c) EXEMPTIONS.—

"(1) SMALL EMPLOYER EXEMPTION.—

"(A) IN GENERAL.—This section shall not apply to any group health plan (and group health insurance coverage offered in connection with a group health plan) for any plan year of a small employer.

"(B) SMALL EMPLOYER.—For purposes of subparagraph (A), the term 'small employer' means, in connection with a group health plan with respect to a calendar year and a plan year, an employer who employed an average of at least 2 but not more than 50 employees on business days during the preceding calendar year and who employs at least 2 employees on the first day of the plan year.

"(C) APPLICATION OF CERTAIN RULES IN DETERMINATION OF EMPLOYER SIZE.—For purposes of this paragraph—

"(i) APPLICATION OF AGGREGATION RULE FOR EMPLOYERS.—Rules similar to the rules under subsections (b), (c), (m), and (o) of section 414 of the Internal Revenue Code of 1986 shall apply for purposes of treating persons as a single employer.

"(ii) EMPLOYERS NOT IN EXISTENCE IN PRECEDING YEAR.—In the case of an employer which was not in existence throughout the preceding calendar year, the determination of whether such employer is a small employer shall be based on the average number of employees that it is reasonably expected such employer will employ on business days in the current calendar year.

"(iii) PREDECESSORS.—Any reference in this paragraph to an employer shall include a reference to any predecessor of such employer.

"(2) INCREASED COST EXEMPTION.—This section shall not apply with respect to a group health plan (or health insurance coverage offered in connection with a group health plan) if the application of this section to such plan

(or to such coverage) results in an increase in the cost under the plan (or for such coverage) of at least 1 percent.

"(d) SEPARATE APPLICATION TO EACH OPTION OFFERED.—In the case of a group health plan that offers a participant or beneficiary two or more benefit package options under the plan, the requirements of this section shall be applied separately with respect to each such option.

"(e) DEFINITIONS.—For purposes of this section—

"(1) TREATMENT LIMITATION.—The term 'treatment limitation' means, with respect to benefits under a group health plan or health insurance coverage, any day or visit limits imposed on coverage of benefits under the plan or coverage during a period of time.

"(2) FINANCIAL REQUIREMENT.—The term 'financial requirement' means, with respect to benefits under a group health plan or health insurance coverage, any deductible, coinsurance, or cost-sharing or an annual or lifetime dollar limit imposed with respect to the benefits under the plan or coverage.

"(3) MEDICAL OR SURGICAL BENEFITS.—The term 'medical or surgical benefits' means benefits with respect to medical or surgical services, as defined under the terms of the plan or coverage (as the case may be), but does not include substance abuse treatment benefits.

"(4) SUBSTANCE ABUSE TREATMENT BENEFITS.—The term 'substance abuse treatment benefits' means benefits with respect to substance abuse treatment services but only insofar as such treatment services are abstinence-based.

"(5) SUBSTANCE ABUSE TREATMENT SERVICES.—The term 'substance abuse services' means any of the following items and services provided for the treatment of substance abuse:

"(A) Inpatient treatment, including detoxification.

"(B) Non-hospital residential treatment.

"(C) Outpatient treatment, including screening and assessment, medication management, individual, group, and family counseling, and relapse prevention.

"(D) Prevention services, including health education and individual and group counseling to encourage the reduction of risk factors for substance abuse.

"(6) SUBSTANCE ABUSE.—The term 'substance abuse' includes chemical dependency.

"(f) NOTICE.—A group health plan under this part shall comply with the notice requirement under section 711(d) of the Employee Retirement Income Security Act of 1974 with respect to the requirements of this section as if such section applied to such plan.

"(g) SUNSET.—This section shall not apply to benefits for services furnished on or after September 30, 2002."

(2) Section 2723(c) of such Act (42 U.S.C. 300gg-23(c)), as amended by section 604(b)(2) of Public Law 104-204, is amended by striking "section 2704" and inserting "sections 2704 and 2706".

(b) INDIVIDUAL HEALTH INSURANCE.—(1) Part B of title XXVII of the Public Health Service Act is amended by inserting after section 2751 the following new section:

"SEC. 2752. PARITY IN THE APPLICATION OF TREATMENT LIMITATIONS AND FINANCIAL REQUIREMENTS TO SUBSTANCE ABUSE BENEFITS.

"(a) IN GENERAL.—The provisions of section 2706 (other than subsection (e)) shall apply to health insurance coverage offered by a health insurance issuer in the individual market in the same manner as it applies to health insurance coverage offered by a health insurance issuer in connection with a group health plan in the small or large group market.

"(b) NOTICE.—A health insurance issuer under this part shall comply with the notice

requirement under section 713(f) of the Employee Retirement Income Security Act of 1974 with respect to the requirements referred to in subsection (a) as if such section applied to such issuer and such issuer were a group health plan."

(2) Section 2762(b)(2) of such Act (42 U.S.C. 300gg-62(b)(2)) is amended by striking "section 2751" and inserting "sections 2751 and 2752".

(c) EFFECTIVE DATES.—(1) Subject to paragraph (3), the amendments made by subsection (a) apply with respect to group health plans for plan years beginning on or after January 1, 2000.

(2) The amendments made by subsection (b) apply with respect to health insurance coverage offered, sold, issued, renewed, in effect, or operated in the individual market on or after such date.

(3) In the case of a group health plan maintained pursuant to 1 or more collective bargaining agreements between employee representatives and 1 or more employers ratified before the date of enactment of this Act, the amendments made subsection (a) shall not apply to plan years beginning before the later of—

(A) the date on which the last collective bargaining agreement relating to the plan terminates (determined without regard to any extension thereof agreed to after the date of enactment of this Act), or

(B) January 1, 2000.

For purposes of subparagraph (A), any plan amendment made pursuant to a collective bargaining agreement relating to the plan which amends the plan solely to conform to any requirement added by subsection (a) shall not be treated as a termination of such collective bargaining agreement.

Mr. HASTERT. Mr. Chairman, I reserve a point of order.

The CHAIRMAN. The gentleman from Illinois reserves a point of order.

Mr. RAMSTAD. Mr. Chairman, I rise to offer a critical missing component to the bill before us today. In an attempt to overcome germaneness hurdles, I have modified this amendment so it will not amend ERISA. However, I am aware that other parliamentary concerns have now been raised and I may be forced to withdraw my amendment.

Mr. Chairman, let me say this. While the goals of this anti-drug package before us today are certainly laudable, we will never even come close to a drug-free America until we knock down the barriers to chemical dependency treatment for the 26 million Americans out there tonight suffering the ravages of drug and alcohol addiction. Twenty-six million American addicts already today.

Since 1956, as we all know, the American Medical Association has said addiction is a disease. We all pay lip service to it, but only 2 percent, only 2 percent of the 16 million Americans covered by health insurance plans which purport to cover chemical dependency treatment are able to get effective treatment. Ninety-eight percent of those covered by insurance plans cannot get effective treatment.

Mr. Chairman, that is because treatment for addiction is discriminated against, unlike treatment for any other diseases. Barriers to chemical dependency treatment that the insurance

companies erect include discriminatory caps, artificially high deductibles and copayments, as well as other restrictions on treatments such as limited treatment stays that are not imposed on other diseases.

In fact, the average treatment stay allowed by health insurance plans is from 2 to 7 days. Every treatment professional in America, and every one of the 1.7 million Americans who are recovering from addiction, knows that no one can get effective treatment in less than one week. It is a fraud on the American people.

Truly, to reduce illegal drug use in America we must address the disease of addiction by putting chemical dependency treatment on par with treatment for other diseases. That is what this amendment does. It just says we should not discriminate against alcohol and drug addiction treatment any more than we would discriminate against treatment for diabetes or kidney failure, renal failure, heart disease, or any other disease.

We have all the empirical data in the world and all the actuarial studies to prove that parity for chemical dependency treatment will actually save money. For every dollar that we invest, it will save \$7 down the road. Health care costs for untreated alcoholics and addicts are 100 percent higher, as all the studies show, than for the cost of those who have been treated.

Mr. Chairman, we can build all the fences on our borders that money can buy. We can hire all the border guards that we can find. But simply dealing with the supply side of this problem and paying lip service to the demand side will not solve the problem of addiction.

Mr. Chairman, we are going to continue to be back here year after year with drug bills and we are not going to make a dent in the problem.

Mr. Chairman, as a recovering alcoholic myself, I know firsthand the value of treatment. As someone who stays close to other recovering people and addicts, alcoholics and addicts, I am alarmed by the dwindling access to treatment in America. Sixty percent of the adolescent treatment beds over the last 10 years are gone. Fifty percent of the treatment beds for adults over the last 10 years are gone because we continue to allow this discrimination, these barriers against treatment.

That is why we have, and I say "thank you" to them, my 93 colleagues, cosponsors from across the ideological spectrum here who have cosponsored this bill. Twenty called my office in the last 2 days to speak on this important amendment to provide access to treatment.

We must, Mr. Chairman, at some time listen to the experts, the experts about our Nation's number one public health and public safety problem. Addiction in America must be addressed before we will ever make significant progress in the illegal drug and alcohol abuse problem.

Mr. Chairman, we need to listen to the 93 colleagues who are cosponsors of my treatment parity legislation. We need to listen to General Barry McCaffrey, who said this is the single most important element in addressing the illegal drug problem. The single most important element is substance abuse treatment parity.

We need to listen to President and Mrs. Ford, who came to Washington to plead with us to pass drug and alcoholism treatment parity. We need to listen to the 17,000 treatment professionals who comprise the National Association of Alcohol and Drug Abuse Counselors, treatment professionals in the trenches and the field every day dealing with sick people who need help.

We need to listen to the physicians of the American Society of Addiction Medicine who support treatment parity, physicians like Navy Captain Ronald E. Smith and Captain Joseph A. Pursch, who support treatment parity.

Mr. Chairman, this is a life-or-death issue for 26 million Americans. This is not another political issue, and it should not be that. It clearly should be included in this package. I am deeply saddened that as we consider the bill designed to reduce demand for drugs in this country, I cannot offer this amendment.

Mrs. MCCARTHY of New York. Mr. Chairman, I rise today in support of Representative RAMSTAD's amendment which prohibits health insurance plans from providing lower levels of benefits for substance abuse treatment services than for medical and surgical benefits.

Illegal drug use is taking an enormous toll on our society—both financially and emotionally. Over 26 million Americans suffer from alcoholism and drug addiction and illegal drug use and alcohol abuse reduces workplace productivity, devastates families and contributes to a high crime rate. We must address this serious problem.

Today, we are considering a number of bills intended to end the scourge of drugs. A great deal of effort is focused on eliminating the flow of drugs into this country. But ending the flow of drugs is not enough. If we are truly committed to a drug-free society, we must also stop the demand for drugs. This means educating people, especially our children, on drug prevention. It also means treating those who are already suffering from drug and alcohol addiction. As a nurse, I know substance abuse addiction is a complicated disease. But I also know that treatment programs work. For every dollar invested in treatment, there are significant savings in health care costs. The statistics are clear—addicts who undergo treatment are less likely to require emergency room visits or hospitalization. They are also less likely to suffer the long-term medical complications that accompany drug and alcohol abuse. And treatment not only reduces health care costs, it reduces crime and increases workplace productivity.

Comprehensive substance abuse treatment just makes sense. But treatment is only effective if it is affordable and accessible. That is why I support Representative RAMSTAD's amendment. By extending parity in health care plans for substance abuse treatment to the private sector, Representative RAMSTAD's

amendment reinforces the overall goal of H.R. 4450. It ensures that all people who are suffering from the ravages of alcoholism or drug abuse have access to effective medical treatment.

As a nurse, I know that substance abuse treatment works. If we are truly serious about winning the war on drugs in this country, we must ensure that all addicts have access to effective treatment. That is why I urge all of my colleagues to support this important amendment.

Mr. SOUDER. Mr. Chairman, I rise in support of this amendment, which I believe will take an important first step toward ensuring that Americans have more meaningful and effective access to substance abuse treatment through their private insurance plans.

I am a cosponsor of the gentleman from Minnesota's bill because I believe that substance abuse treatment is an essential component of our overall drug strategy. As I said in this morning's debate on the drug interdiction bill, I have traveled to several of the major drug source countries and had the opportunity to have extensive discussions with the leaders of those countries whose citizens are fighting and dying to keep drugs out of the United States. And a major theme that keeps coming up in these discussions is the concern of those leaders that America also has to do its part to stop the demand for drugs that is creating the international drug trade.

Effective treatment is one of our most critical tools to help people who have become addicted to drugs stop the cycle of abuse. I recently visited the Northeastern Center in Kendallville, Indiana in my district. The patients told me without exception how the treatment had made a powerful difference in their lives and enabled them through fellowship and therapy to understand their addictions and learn how to resist the temptations to go back to drug abuse that come back hour after hour, day after day. For them, the struggle to stay away from substance abuse was constant, and that only the help they had received in treatment programs gave them the tools to stay away from drugs.

Many of the people who enter treatment have had their lives so destroyed by drugs that they are almost literally at the end of the line. Many patients face jail or losing their jobs if they could not successfully complete the program. Others have had their families and family life completely destroyed by their drug abuse. Some work in positions of critical public safety, like airplane pilots.

I believe that this amendment is an important first step toward improving the availability of substance abuse treatment. I want to make clear that neither this amendment or the gentleman's bill on which it is based would force any company or insurer to provide coverage or benefits for substance abuse treatment. Instead, it only says that those health plans that do include substance abuse benefits cannot place discriminatory caps, limits, or other conditions on treatment that they do not place on the other benefits in their insurance package. And the amendment before us today would not even go that far, because for parliamentary reasons it would only apply to between 20% and 35% of the insured population—those who are not covered by federal regulation under ERISA.

This amendment is necessary because many patients who seek treatment cannot re-

ceive a full and effective treatment program because of policy limits even though their insurance covers drug treatment and would not put the same limits on a hospital stay. Because of this, the dedicated patients who are devoted to treatment will go as far as selling their cars and other assets in order to be able to afford it. The less dedicated patients will give up on the treatment altogether and continue to abuse drugs.

This amendment will be an important first step—a demonstration of the benefits of facilitating access to substance abuse treatment. Some have raised legitimate issues for discussion on the question of whether we yet have effective means to make sure that we fully track the effectiveness of drug treatment outcomes, as well as questions about the most effective methods of treatment and problems with recidivism. All of these are important matters that we should continue to review and discuss as we go forward. But there can be little doubt that helping at least a few people have better access to ways of saving them from drug abuse is far better than doing it for none.

Mr. RAMSTAD. Mr. Chairman, I ask unanimous consent to withdraw my amendment.

The CHAIRMAN. Is there objection to the request of the gentleman from Minnesota?

There was no objection.

AMENDMENT OFFERED BY MR. KENNEDY OF MASSACHUSETTS

Mr. KENNEDY of Massachusetts. Mr. Chairman, I offer an amendment.

The Clerk read as follows:

Amendment offered by Mr. KENNEDY of Massachusetts:

Page 4, after line 13, insert the following subsection:

(c) ACTIVITIES REGARDING ALCOHOL ABUSE.—The national media campaign under subsection (a) shall include media activities for the purpose of reducing and preventing alcohol abuse among young people in the United States.

Page 4, line 6, strike "drug abuse" and insert "drug and alcohol abuse".

Page 5, line 4, insert "and anti-alcohol" after "anti-drug".

Mr. KENNEDY of Massachusetts (during the reading). Mr. Chairman, I ask unanimous consent that the amendment be considered as read and printed in the RECORD.

The CHAIRMAN. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

Mr. PORTMAN. Mr. Chairman, I reserve a point of order on this amendment.

The CHAIRMAN. The gentleman from Ohio reserves a point of order.

Mr. KENNEDY of Massachusetts. Mr. Chairman, I have a very simple amendment to offer. This measure would require the Office of National Drug Control Policy to include alcohol abuse in its \$195 million media campaign against drugs.

Mr. Chairman, the fight against substance abuse is a never-ending battle and in waging this campaign, we must not cede ground on any front to end the scourge that costs America so many lives and wastes so much human and economic potential. The fact is that

while waging a \$10 billion annual war on drugs, we risk losing sight of the biggest drug threat to our health and safety and that is alcohol. In this war, we simply must include alcohol in the campaign by the Office of National Drug Control Policy to raise the awareness of drug abuse.

Mr. Chairman, this amendment would require the agency to target alcohol abuse in its \$195 million ad campaign. Every day it seems that there is another reminder in the headlines of our newspapers, or on the evening news, reporting on the dangers of alcohol abuse. Alcohol is the number one killer of individuals in this country under the age of 24. It is the number one killer. It kills more people than all other illegal drugs combined. We spend \$10 billion fighting a war on drugs, and yet the number one drug of choice by young Americans is alcohol.

We say, oh, no, alcohol is somehow different because it is legal. But the truth of the matter is there are over 21 million Americans that claim that they are addicted to alcohol. Of those, there are about 4.5 million children that are addicted to alcohol.

Alcohol is the number one drug of choice of young people in America. It is also, in a bizarre world that we live in today, the one drug that we allow to be advertised in an unfettered manner on our television sets telling my sons, telling everybody's kids across America, that if they want to get a pretty girl or a good looking guy, if they want to be the first on the mountain, if they want to win a bicycle race, if they want to play touch football what should they do? Go out and have a drink.

Mr. Chairman, a lot of kids listen to those ads and they go out and have a drink and as a result we have so many kids that are finally addicted to alcohol.

If we are going to go ahead and anoint a campaign to get rid of drugs, then let us not take some arbitrary differentiation that says this is a legal drug and this is an illegal drug, so we are not going to go after the legal drug, despite the amount of carnage that is left on our streets, the amount of young people that are killed in driving accidents, the amount of people across our country that are arbitrarily killed as a result of people that drink and drive or use heavy equipment and drink.

What I am trying to suggest is that it is very, very important that America as a Nation comes to grips with the not-talked-about abuse of drugs that is centered around alcohol abuse. I believe very, very strongly that not only is this a position that I hold, but it is a position that I just have got off the phone with General McCaffrey, that he holds as well.

I understand that there are a lot of forces at work in this Capitol that have the ability of limiting the amount of legislation or the kind of legislation that gets passed. The alcohol companies have more clout in this city than

just about any other lobby. Particularly, when we recognize the fact that they not only have power themselves, but they have the power of convincing the television stations, the radio stations, the newspapers and everybody else to join up with them. So, we cannot get to a point where we can include alcohol abuse in a national advertising campaign on drugs, because if we do that it could threaten the whole bill.

Mr. Chairman, that kind of logic is the kind of bizarre logic that gets the whole country to think that everybody in Washington has got their head screwed on wrong. But nevertheless, that is what we are up against. So, I have been asked to not follow through and call for a vote on this amendment because it will threaten the entire package. I think it is hogwash. I do not think it is the truth. But I recognize that if we call for this vote and we end up in a situation where everybody does what always happens around here, which is that we lose to the alcohol lobby, then in fact we will take a step backwards.

So, with that I yield to the gentleman from Ohio (Mr. PORTMAN) if he has something nice to say about my amendment.

The CHAIRMAN. The time of the gentleman from Massachusetts has expired. Does the gentleman from Ohio (Mr. PORTMAN) wish to insist on his point of order?

Mr. PORTMAN. Mr. Chairman, I reserve my point of order.

The CHAIRMAN. The gentleman may proceed.

Mr. PORTMAN. Mr. Chairman, I move to strike the last word.

Briefly, I want to thank the gentleman from Massachusetts (Mr. KENNEDY) for what he has done, not just today but over the years, to focus on the alcoholism issue. He has been particularly involved in college campus alcoholism and he has taken this issue around the country and he is to be commended for that.

Mr. Chairman, in this legislation we do address alcohol. I was looking through the various provisions. The Drug-Free Parent Empowerment Act would include alcohol in the sense that it is for illegal substances, which of course would include alcohol for minors. In the Drug-Free Communities Act this Congress passed last year it was not just illegal drugs, it was illegal substances which would include alcoholism.

Many of the groups and organizations that will benefit from this legislation are involved also in teenage alcohol abuse. All of the various things we do here to try to make the Federal prevention effort work better, including a national clearinghouse, would be involved in alcoholism for our young people.

So, it is very much addressed in this legislation. The question is whether under subtitle (a) the anti-drug media campaign should be broadened to include alcohol. The gentleman is right,

there are a lot of forces at work. They are not the alcohol forces, pro or con. It is the people at the Office of National Drug Control Policy, the President's capable Drug Czar, Barry McCaffrey; it is the appropriators here in this Congress; it is those of us on the authorization side who are trying to make this anti-drug media campaign work.

It is very simple. We want this to focus primarily on drugs so that it makes a difference. That is what the \$195 million has been appropriated for and all we did in this bill was finally authorize that appropriation and make it last for 4 years. Earlier today there was some discussion about whether that was necessary. I think it is absolutely necessary for this Congress to go on record supporting the campaign and being sure that it is indeed sustained over time, because if it is not it will not make a difference.

Mr. Chairman, I commend the gentleman for what he is doing and I would tell him that alcoholism is addressed in various ways here, I think even indirectly in the media campaign that General McCaffrey is heading up, but because the language in this legislation has been carefully crafted with General McCaffrey, with the appropriators, we would not be able to accept an amendment to change it at this time.

Mr. KENNEDY of Massachusetts. Mr. Chairman, will the gentleman yield?

Mr. PORTMAN. I yield to the gentleman from Massachusetts.

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Mr. KENNEDY of Massachusetts. I would just like to point out that I did, on the gentleman's advice, go and talk with General McCaffrey, and he, I think, would be the first to recognize the fact that the gentleman has personally been involved in attempts to try to broaden and expand and recognize the whole issue of alcohol abuse in the country.

However, I should point out that we are spending, on the lowest estimate I have ever read, \$10 billion fighting a war on drugs. More like \$40 or \$50 billion, if we count all the other dollars that go into the war on drugs. None of those dollars are spent dealing with alcohol abuse. And, in fact, what we do in this country is we expand and promote alcohol use on our airwaves.

So my point is that while, yes, it is important to fight illegal drugs, and I do not mean to in any way diminish the fight against illegal drugs, but if we are sitting there and there is one drug that is killing more people than all of the other illegal drugs combined, then to have an advertising campaign that just focuses on illegal drugs is a little bizarre when so many more people are addicted to alcohol and so many more people are ultimately killed as a result of alcohol abuse, and there is nothing coming across our airwaves telling kids in America that they should not drink. That is what the real problem is, I believe.

But I very much appreciate and understand the limitations that my friend, the gentleman from Ohio (Mr. PORTMAN), has outlined. I would just say that General McCaffrey indicated he very much wants to include alcohol in this campaign, but recognizes, I think, some of the limitations that I was referring to as a reason why he could not support this at this time.

Mr. PORTMAN. Reclaiming my time, Mr. Chairman, I would ask the gentleman, will he continue to press for the amendment?

Mr. KENNEDY of Massachusetts. I have indicated that I am willing to withdraw it, but if someone else wants to speak about the amendment, I would be happy to have them speak on it.

Mr. PORTMAN. Mr. Chairman, how much time do I have?

The Chairman pro tempore (Mr. GIBBONS). The gentleman from Ohio (Mr. PORTMAN) has approximately 30 seconds remaining.

Mr. PORTMAN. Mr. Chairman, I would just say that if the gentleman has already withdrawn the amendment, I will withdraw my point of order, and I appreciate the dialogue.

Mr. KENNEDY of Massachusetts. Mr. Chairman, I did not withdraw my amendment as yet, but I only did not because I thought the gentlewoman from Texas wanted to speak on it.

The CHAIRMAN pro tempore. First, the Chair will ascertain if the gentleman from Ohio (Mr. PORTMAN) is going to reserve his point of order.

Mr. PORTMAN. I suppose I must, Mr. Chairman, until the gentleman withdraws his amendment.

Ms. JACKSON-LEE of Texas. Mr. Chairman, I move to strike the requisite number of words.

I first of all rise to support the Drug Demand Reduction Act of 1998, but I wanted to come to the floor and join my colleague, the gentleman from Massachusetts (Mr. KENNEDY), and also the words of the gentleman from Minnesota (Mr. RAMSTAD) on this very important issue dealing with alcohol.

As I look at the Drug Demand Reduction Act, I cannot disagree both with my good friend the gentleman from Wisconsin (Mr. BARRETT) and the gentleman from Ohio (Mr. PORTMAN) that we have an obligation to again get back on the record with America dealing with a media effort to say no. Obviously, as we move from the Reagan era, I believe that we looked at other issues which this bill still does not address, and I want to mention those as I rise in support of the gentleman's amendment on alcohol.

First of all, I think a key element is treatment, and although this bill works very well with telling people what not to do, it is difficult not to match this with treatment. It also is difficult when I see the very large numbers. On that premise, the fact that this is a "say no" bill, I think the reasonableness of the Kennedy amendment makes so much sense.

Though we do not have hard liquor on our airwaves, we do have them on

our billboards. And in my community in particular, in the 18th Congressional District in Houston, an inner city district, we have them on our radio programs. We have them hosting various good neighbor events. And let me say to all the good friends in the alcohol industry that I do not condemn them as public servants, but their message is everywhere.

If we are going to talk about eliminating the devastation of driving while intoxicated, whether an individual is intoxicated through drugs or through alcohol, I think it is important to match those enormous dollars with the recognition that alcohol is killing people in America. And to do that, it is likewise important to have an alcohol-free workplace. It is important to get teenagers not to drive while taking alcohol.

This subtitle C is a very important incentive to get teens to take a drug test and to determine that they are drug free. At the same time, I think it is key that we have the opportunity to do that with alcohol. Drug-free schools, drug-free prisons, this whole idea of anti-addiction medication is a unique provision that deals with the question of trying to get medicines not to be addictive, such as some of the over-the-counter medicines that appeal to those who take drugs, but they appeal also to those who take alcohol.

I would only say to the authors of this bill, it will be hard to say no to the bill, but I raise the question of concern of this very serious issue with the treatment question. I wish General McCaffrey would have come and we could have embraced an encompassing bill that talks about prevention and treatment. One of the reasons, of course, is that part of this whole aspect of drugs in inner-city communities. And this is not an inner city bill, I recognize this is a bill for America and I am supporting it, but there are unique concerns in our urban centers, and one of them happens to be HIV that happens to be transmitted by dirty needles. I wish General McCaffrey had been able to see the light on the dirty needles issue and that the Drug Demand Reduction Act could have included a viable policy that has been excluded.

And lastly, as I close, let me say it is important we not ignore, not ignore the devastation of alcohol and that we come again around the circle, whether it is General McCaffrey, or maybe we need a drug czar on alcohol. I am sorry to hear we might have had our friends in the alcohol lobby that disagree with us, because responsible drinking is important, but we cannot do it without the backdrop of explaining to people the devastation of drinking. Kids can go get 12 cans of beer, a six pack, let me not exaggerate, and be just as high as if they were using drugs.

So I would thank the gentleman from Massachusetts. I thank the proponents of this bill. I hope, Mr. Chairman, that we will come around to making this a

complete bill in the years to come, but I do support the legislation.

Mr. Chairman, I rise to speak on behalf of this bill, which authorizes funds to be used to reduce the demand of drugs throughout the country through the use of innovative programs.

This bill represents a strong attempt to tackle the drug problem at its most important stage, the beginning. It includes a \$195 million anti-drug media campaign, to further encourage our young children and teens to stay away from drugs.

H.R. 4550 also seeks to protect our children by instituting a voluntary drug testing program, to be used in conjunction with the issuance of driver's licenses to teenagers. This is an important element to this piece of legislation, simply because it places an extra, precautionary step in the process of giving a car, which we all know can be extremely dangerous in the hands of an intoxicated person, to a teenager.

Furthermore, this bill authorizes funds to be used by schools and non-profit parent groups for the purposes of reducing the use of drugs amongst children and teens. This measure is extremely important because it puts further power in the hands of the people that directly supervise our children—parents, and school authorities who stand in loco parentis.

Children are not the only beneficiaries of this bill. H.R. 4550 also includes a \$10 million commitment to prevent the use of drugs in the workplace, and especially in small businesses. This is important because it gives small business owners incentive to enact some of the same programs and policies being used effectively by larger businesses and government entities around the country.

I also strongly support this bill because it shows a newfound commitment to drug treatment. Treatment and recovery programs are crucial to fighting the war on drugs. Not only does it help stem the recidivism that plagues our criminal justice system, and therefore, save the taxpayers their hard earned money, it also stays true to the concept that we do not leave our wounded on the battlefield of this terrible war.

I firmly believe that to have a strong, comprehensive, and national drug policy, we must fully engage in efforts to prevent children and adults from wanting to take drugs in the first place. We must also extend our hands to help our fellow citizens whose momentarily lapse of strength has led them to drugs, and who want to recover to be participants in our society once again. I believe that this bill does all of those things, and urge you all to vote in favor of this bill.

Mr. KENNEDY of Massachusetts. Mr. Chairman, I ask unanimous consent to withdraw my amendment.

The CHAIRMAN pro tempore. Without objection, the amendment is withdrawn.

There was no objection.

AMENDMENT NO. 1 OFFERED BY MR. LATHAM

Mr. LATHAM. Mr. Chairman, I offer an amendment.

The CHAIRMAN pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 1 offered by Mr. LATHAM:
Page 49, after line 19, insert the following:

TITLE IV—DRUG DEALER LIABILITY

SEC. 401. SHORT TITLE.

This Act may be cited as the "Drug Dealer Liability Act of 1998".

SEC. 402. FEDERAL CAUSE OF ACTION FOR DRUG DEALER LIABILITY.

(a) IN GENERAL.—Part E of the Controlled Substances Act is amended by adding at the end the following:

"SEC. 521. FEDERAL CAUSE OF ACTION FOR DRUG DEALER LIABILITY.

"(a) IN GENERAL.—Except as provided in subsection (b), any person who manufactures or distributes a controlled substance in violation of this title or title III shall be liable in a civil action to any party harmed, directly or indirectly, by the use of that controlled substance.

"(b) EXCEPTION.—An individual user of a controlled substance may not bring an or maintain an action under this section unless all of the following conditions are met:

"(1) The individual personally discloses to narcotics enforcement authorities all of the information known to the individual regarding all that individual's sources of illegal controlled substances.

"(2) The individual has not used an illegal controlled substance within the 90 days before filing the action.

"(3) The individual continues to remain free of the use of an illegal controlled substance throughout the pendency of the action."

(b) CLERICAL AMENDMENT.—The table of sections for the Comprehensive Drug Abuse Prevention and Control Act of 1970 is amended by inserting after the time relating to section 520 the following new item:

"Sec. 521. Federal cause of action for drug dealer liability."

Mr. BARRETT of Wisconsin. Mr. Chairman, I reserve a point of order.

The CHAIRMAN pro tempore. The gentleman reserves a point of order.

The gentleman from Iowa (Mr. LATHAM) is recognized.

Mr. LATHAM. Mr. Chairman, as a member of the Speaker's Task Force For a Drug-Free America, I commend my good friend, the gentleman from Ohio (Mr. PORTMAN), for providing a platform to address the national tragedy of drug trafficking and abuse. Unfortunately, this is a growing trend across the Nation. For years, the Midwest States thought themselves immune from the drug problems on America's coasts and in the big cities. However, that is no longer the case.

In fact, nowhere is the drug problem growing faster than in America's heartland. As the Speaker noted earlier today, my home State of Iowa is experiencing an unprecedented influx of methamphetamine from Mexico and regional clandestine laboratories.

Meth is as addictive as crack cocaine and the stimulation, or high, is sustained much longer. Violent crime, destruction of families, and the greater likelihood for damage to the fetus of a meth-abusing mother make this an epidemic that has much more severe monetary costs as well, creating additional problems and challenges for law enforcement and human service providers in the Midwest.

Drug-addicted babies are clearly the most innocent and vulnerable of those affected by illegal drug use and are often the most physically and mentally

damaged due to the existence of the illegal drug market in a community. For many of the addicts, babies and adults alike, the only hope is extensive medical and psychological treatment, physical therapy, and special education.

All of these potential remedies are very expensive. These babies, through their legal guardians and through court-appointed guardians, should be able to recover damages from those in the community who have entered and participated in the marketing of the types of illegal drugs that have caused their injuries.

The amendment I am offering today, based on my bill H.R. 4204, The Drug Dealer Liability Act, is modeled after similar legislation recently enacted in the States of California, Arkansas, Illinois, Michigan, Utah, Georgia, Louisiana, Indiana, Hawaii, South Dakota and Oklahoma. The amendment is intended to provide a civil remedy for damages to persons in a community injured as a result of illegal drug use. These persons include parents, employers, insurers, health care and drug treatment providers, as well as drug-addicted babies. This amendment would enable them to recover damages from those persons in the illegal drug market who profited from their pain or loss.

It is my hope that the prospect of substantial monetary loss made possible by The Drug Dealer Liability Act would also act as a deterrent to entering the narcotics market. In addition, this amendment would establish an incentive for users to identify and seek payment for their own drug treatment from those dealers who have sold the drugs to the user in the past. While this legislation is not intended to be a silver bullet, it is another tool to combat and deter drug abuse and trafficking.

Today, in 39 States, it is not clear under established law that families who lose a child to drugs or a drug baby needing treatment and special education can compel dealers to pay for the injuries they cause. This is true even though in most States a producer of a product that injures a consumer can be liable for the injuries resulting from the use of that product. The Drug Dealer Liability Act fills the gap to make drug dealers liable, under civil law, for the injuries to the families of drug users.

The first lawsuit brought under a drug dealer liability law resulted in a judgment of \$1 million in favor of a Michigan drug baby, and more than \$7 million to the City of Detroit's expenses for providing drug treatment for the city's prison inmates.

In addition, this bill could fill a possible gap in asset forfeitures by law enforcement resulting from the decision handed down by the U.S. Supreme Court in June that may, under some circumstances, rule total forfeiture of a defendant's assets as an excessive fine under the eighth amendment's excessive fines clause.

Let us pass this amendment and give the victims of the illegal drug market an opportunity to hold the dealers of this poison accountable under criminal and civil law.

Again, I urge my colleagues to support the Latham amendment.

POINT OF ORDER

The CHAIRMAN pro tempore. Does the gentleman from Wisconsin (Mr. BARRETT) insist on his point of order?

Mr. BARRETT of Wisconsin. Yes, I do, Mr. Chairman. It is not germane to this bill, and I cite clause 7 of rule XVI. The subject matter of civil liability is not broached by the underlying bill and, consequently, this amendment is not germane to the bill.

The CHAIRMAN pro tempore. Does the gentleman from Iowa (Mr. LATHAM) wish to be heard on the point of order?

Mr. LATHAM. Well, I will concede the point of order, Mr. Chairman. But, quite honestly, when we look at the entire situation we have, we have to find some way of holding people accountable for their actions.

I think this is an opportunity that we will be missing by this point of order to hold people who are destroying children, babies, people all over this country, with no consequences as far as their civil liability. They are able to profit. Unfortunately, I understand the point of order, but I think it really is very unfortunate that it be insisted upon.

The CHAIRMAN pro tempore. The gentleman concedes the point of order? Does any other Member wish to be heard on the point of order? Hearing none, the point of order is conceded and sustained.

Mr. NETHERCUTT. Mr. Chairman, I move to strike the last word.

Mr. Chairman, I was hoping to rise before the point of order was ruled upon to support the amendment offered by my colleague on the Drug Task Force, the gentleman from Iowa (Mr. LATHAM).

Under current Federal law, individuals who are injured by the Federal drug trade have only one remedy and that is criminal prosecution. The problem with this is that while the drug dealer goes to jail, the victim or victims have no personal civil remedy. The Latham amendment would have changed that. The gentleman's amendment introduced the concept of civil liability to the Federal drug code.

□ 1915

The amendment is modeled after civil liability laws in 11 States. In those States not only do the dealers face jail time, they open themselves up to civil judgments every time they sell drugs. Parents of drug users, drug babies, employers, health insurers and local governments in those 11 States now have legal standing to recover the negative costs associated with drug use. Under this law, as the gentleman from Iowa stated, the city of Detroit recently was awarded \$7 million in damages for drug treatment expenses in its jails.

Mr. Chairman, earlier today we passed the Western Hemisphere Drug Elimination Act. I was a cosponsor of that bill because I believe we need to dedicate more resources to the interdiction of drugs before they get to the United States. But I also believe that Congress needs to focus more attention on reducing the demand for drugs stateside. One way to address the drug demand is to ensure that drug dealers are punished more severely, both criminally and personally. The Latham amendment does that. It says to the drug dealer that you will be held both criminally and civilly liable for the drugs you deal.

This amendment is not about abdicating the responsibility of the drug user. Under this amendment, a drug user could pursue a civil remedy, a civil suit against the drug dealer only if the user cooperates with authorities, has not used drugs within the 90 days prior to the filing of the lawsuit and remained drug-free during the duration of the lawsuit.

Mr. Chairman, the Latham amendment reduces the incentive for individuals to become involved in the drug trade. It was a good amendment. It is a good amendment. I would hope that it will receive further attention and widespread support.

Mr. PORTMAN. Mr. Chairman, will the gentleman yield?

Mr. NETHERCUTT. I yield to the gentleman from Ohio.

Mr. PORTMAN. Mr. Chairman, I, too, want to commend the gentleman from Iowa (Mr. LATHAM) for his efforts on the task force and also for his amendment today which I think would provide an additional reason for people not to get involved with drugs and it would be a powerful remedy for victims of drug abuse. I understand that the point of order has been sustained, but I wanted to add to what the gentleman from Washington (Mr. NETHERCUTT) said about the importance of this legislation. Perhaps we can work on it in the future.

Mr. SCOTT. Mr. Chairman, I move to strike the last word.

Mr. Chairman, yesterday the majority decided to subvert the legislative process and turn a much supported and noncontroversial bill, the reauthorization of the National Center for Missing and Exploited Children, into a controversial bill grounded in bad juvenile crime policy. Today we find ourselves about to pass another allegedly noncontroversial bill, the Drug Demand Reduction Act, but without the opportunity for public review or comments so we cannot be sure whether it is controversial or not.

Yesterday when we passed the bill that increased the number of juveniles to be treated as adults, we ignored the fact that the adult time that the juveniles will get for their adult crime will for the affected juveniles be actually less time as an adult rather than more time as an adult.

We need to subject these ideas to public scrutiny and comment rather

than basing our decision solely on soundbites. Needless to say, this bill has been introduced very recently. It was referred to the Committee on the Judiciary, the Committee on Commerce, the Committee on Government Reform and Oversight, the Committee on Small Business, the Committee on Education and the Workforce and the Committee on Transportation and Infrastructure, but none of those committees have had hearings. There has been no opportunity for our people to subject the bill to scrutiny. No input from criminologists or medical doctors or sociologists or victims or budget analysts. No opportunity to prioritize this spending as opposed to other ideas that people may have.

Because there might be some good ideas, I am going to vote for the bill, but it is no way to legislate.

AMENDMENT OFFERED BY MR. PORTMAN

Mr. PORTMAN. Mr. Chairman, I offer an amendment on behalf of the gentlewoman from New Jersey (Mrs. ROUKEMA).

The Clerk read as follows:

Amendment offered by Mr. PORTMAN:

Page 39, after line 8, insert the following the following subparagraphs:

(K) one shall be a representative of the American Psychiatric Association;

(L) one shall be a representative of the American Academy of Child and Adolescent Psychiatry; and

(M) one shall be a representative of the American Academy of Addiction Psychiatry.

Page 38, line 3, strike "10 voting members" and insert "13 voting members".

Page 39, line 6, strike "and" after the semicolon.

In section 211(g)(2), strike "the presence of" and all that follows and insert "the presence of 7 members."

Mr. PORTMAN. Mr. Chairman, this is a very simple amendment to add to the Commission on Medical Education three psychiatric group representatives whose opinions and views will be very important to the commission. This commission is established under our legislation which in essence helps bring together the representatives from all the leading medical groups to help study and report on methods to enhance prevention, diagnosis and treatment of substance abuse by medical professionals through initial and continuing medical education.

Mr. BARRETT of Wisconsin. Mr. Chairman, will the gentleman yield?

Mr. PORTMAN. I yield to the gentleman from Wisconsin.

Mr. BARRETT of Wisconsin. Mr. Chairman, we have reviewed this amendment and it is acceptable to our side.

Mr. PORTMAN. I thank the gentleman. I appreciate his working with us on this. I think this is a very important aspect of the legislation to help medical professionals diagnose and treat addiction, and I think it is appropriate and important that we add the perspective of the psychiatric groups. I thank the gentlewoman from New Jersey (Mrs. ROUKEMA) for bringing this to our attention.

Mrs. ROUKEMA. Mr. Chairman, I am most pleased that Representative PORTMAN offered my amendment since a television interview preceded my being on the floor, my amendment would add three important groups to the Commission created in this bill that is charged with studying the role of medical education in reducing substance abuse.

The National Commission is responsible for making recommendations on how medical education can be improved to better respond to the needs of patients with substance use disorders.

My amendment would add the American Psychiatric Association, the American Academy of Child and Adolescent Psychiatry and the American Academy of Addiction Psychiatry to this Commission.

The American Psychiatric Association is the national medical specialty society representing more than 40,000 psychiatric physicians. Through education, training, and clinical experience psychiatrists are among those on the front lines of the diagnosis and treatment of substance use disorders.

The second organization, the American Academy of Child and Adolescent Psychiatry, is the national organization representing more than 6,000 physicians with at least 5 years of additional training beyond medical school in both general and child and adolescent psychiatry.

And the third organization, the American Academy of Addiction Psychiatry, is the national organization representing more than 1,000 board certified psychiatrists who have specialized in addiction psychiatry.

All three of these organization make vital contributions to the diagnosis and treatment of substance use disorders across the general population, as well as in particular at risk populations such as children and adolescents.

As a result, this Commission would be well-served to have the benefit of input from these three commendable organizations.

The CHAIRMAN pro tempore (Mr. GIBBONS). The question is on the amendment offered by the gentleman from Ohio (Mr. PORTMAN).

The amendment was agreed to.

AMENDMENT OFFERED BY MR. TAYLOR OF MISSISSIPPI

The CHAIRMAN pro tempore. The pending business is the demand for a recorded vote on the amendment offered by the gentleman from Mississippi (Mr. TAYLOR) on which further proceedings were postponed and on which the ayes prevailed by voice vote.

The Clerk will designate the amendment.

The Clerk designated the amendment.

RECORDED VOTE

The CHAIRMAN pro tempore. A recorded vote has been demanded.

A recorded vote was ordered.

The vote was taken by electronic device, and there were—ayes 123, noes 281, not voting 30, as follows:

[Roll No. 443]

AYES—123

Aderholt
Bachus
Ballenger
Bartlett
Barton
Billbray

Bilirakis
Bishop
Bryant
Burr
Burton
Buyer

Callahan
Calvert
Camp
Canady
Cannon
Chabot

Chambliss
Chenoweth
Coble
Coburn
Combest
Condit
Cook
Cooksey
Cunningham
Deal
Dickey
Duncan
Dunn
Ehlers
Emerson
Everett
Fawell
Foley
Fossella
Fowler
Fox
Franks (NJ)
Gallegly
Gibbons
Gilman
Goode
Goodling
Graham
Granger
Gutknecht
Hall (TX)
Hansen
Hayworth
Hefley
Herger

Hilleary
Hostettler
Hunter
Inglis
Istook
Jenkins
Jones
LaHood
Largent
Latham
LoBiondo
Maloney (CT)
McCollum
McHugh
McInnis
McIntosh
McIntyre
Metcalf
Mica
Miller (FL)
Myrick
Nethercutt
Neumann
Nussle
Packard
Pappas
Parker
Paxon
Pease
Pickering
Quinn
Radanovich
Riley
Rohrabacher
Roukema

Ryun
Salmon
Sanford
Scarborough
Schaefer, Dan
Schaffer, Bob
Sessions
Shadegg
Shaw
Shays
Shimkus
Smith (MI)
Smith (TX)
Smith, Linda
Snowbarger
Solomon
Souder
Spence
Stearns
Stenholm
Stump
Talent
Taylor (MS)
Taylor (NC)
Thune
Tiahrt
Traffant
Turner
Upton
Walsh
Wamp
Watkins
Weldon (FL)
Weller
White

NOES—281

Abercrombie
Ackerman
Allen
Andrews
Archer
Armey
Baesler
Baker
Baldacci
Barcia
Barr
Barrett (NE)
Barrett (WI)
Bass
Becerra
Bentsen
Bereuter
Berman
Berry
Blagojevich
Bliley
Blumenauer
Boehlert
Boehner
Bonilla
Bonior
Bono
Borski
Boucher
Boyd
Brady (PA)
Brown (CA)
Brown (FL)
Brown (OH)
Bunning
Campbell
Capps
Cardin
Carson
Castle
Christensen
Clement
Collins
Conyers
Costello
Cox
Coyne
Cramer
Crane
Crapo
Cubin
Cummings
Davis (FL)
Davis (IL)
Davis (VA)
DeFazio
DeGette
Delahunt
DeLauro
DeLay
Deutsch
Diaz-Balart

Dingell
Dixon
Doggett
Doolittle
Doyle
Dreier
Edwards
Ehrlich
Engel
English
Ensign
Eshoo
Etheridge
Evans
Ewing
Farr
Fattah
Filner
Forbes
Ford
Frank (MA)
Frelinghuysen
Frost
Furse
Ganske
Gekas
Gephardt
Gilchrest
Gillmor
Goodlatte
Gordon
Green
Greenwood
Gutierrez
Hall (OH)
Hamilton
Hastert
Hastings (FL)
Hastings (WA)
Hill
Hilliard
Hinchev
Hinojosa
Hobson
Hoekstra
Holden
Hoolley
Houghton
Hoyer
Hulshof
Hutchinson
Hyde
Jackson (IL)
Jackson-Lee
(TX)
Jefferson
Johnson (CT)
Johnson (WI)
Johnson, E. B.
Johnson, Sam
Kanjorski

Kaptur
Kasich
Kelly
Kennedy (MA)
Kennedy (RI)
Kennelly
Kildee
Kilpatrick
Kim
Kind (WI)
King (NY)
Kingston
Kleczka
Klink
Klug
Knollenberg
Kolbe
Kucinich
LaFalce
Lampson
LaTourrette
Lazio
Leach
Lee
Levin
Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
Lipinski
Livingston
Lofgren
Lowey
Lucas
Luther
Maloney (NY)
Manton
Manzullo
Markey
Martinez
Mascara
Matsui
McCarthy (MO)
McCarthy (NY)
McCrery
McDade
McDermott
McGovern
McHale
McKeon
McKinney
McNulty
Meehan
Meek (FL)
Menendez
Millender
McDonald
Miller (CA)
Minge
Mink
Moakley
Mollohan

Moran (KS)	Redmond	Spratt
Moran (VA)	Regula	Stabenow
Morella	Reyes	Stark
Murtha	Rivers	Strickland
Nadler	Rodriguez	Stupak
Neal	Roemer	Sununu
Ney	Rogan	Tanner
Northup	Rogers	Tauscher
Norwood	Ros-Lehtinen	Thomas
Oberstar	Rothman	Thompson
Obey	Roybal-Allard	Thornberry
Olver	Royce	Thurman
Ortiz	Rush	Tierney
Owens	Sabo	Torres
Oxley	Sanchez	Velazquez
Pallone	Sanders	Vento
Pascarell	Sandlin	Visclosky
Pastor	Sawyer	Watt (NC)
Paul	Saxton	Watts (OK)
Payne	Scott	Waxman
Pelosi	Sensenbrenner	Weldon (PA)
Peterson (MN)	Serrano	Weygand
Petri	Sherman	Whitfield
Pickett	Shuster	Wicker
Pitts	Sisisky	Wilson
Pombo	Skaggs	Wise
Pomeroy	Skeen	Wolf
Porter	Skelton	Woolsey
Portman	Slaughter	Wynn
Price (NC)	Smith (NJ)	Young (AK)
Rahall	Smith (OR)	Young (FL)
Ramstad	Smith, Adam	
Rangel	Snyder	

NOT VOTING—30

Bateman	Gejdenson	Poshard
Blunt	Gonzalez	Pryce (OH)
Boswell	Goss	Riggs
Brady (TX)	Harman	Schumer
Clay	Hefner	Stokes
Clayton	Horn	Tauzin
Clyburn	John	Towns
Danner	Lantos	Waters
Dicks	Meeks (NY)	Wexler
Fazio	Peterson (PA)	Yates

□ 1943

Messrs. LINDER, LEWIS of California, BERRY, DIAZ-BALART and WATTS of Oklahoma changed their vote from "aye" to "no."

Messrs. PARKER, DICKEY, ADERHOLT, GILMAN, GALLEGLY, JONES, BARTLETT of Maryland and INGLIS of South Carolina changed their vote from "no" to "aye."

So the amendment was rejected.

The result of the vote was announced as above recorded.

□ 1945

Mr. SOLOMON. Mr. Speaker, I move to strike the last word.

(Mr. SOLOMON asked and was given permission to revise and extend his remarks.)

Mr. SOLOMON. Mr. Chairman, illegal drug use is the single most serious problem facing the United States and I am proud to support this bill which will reduce the demand for illegal drugs in this country.

Strong interdiction and law enforcement programs alone cannot win the war on drugs. We must possess an effective effort to reduce the demand for illegal drugs and I commend Mr. Portman for moving this very important bill.

This bill enhances the ability to test employees for illegal drugs.

This bill also improves the effectiveness of drug awareness programs in schools and ensures that the money we spend to make children aware of the dangers of illegal drug use is used wisely.

Illegal drug use is the common denominator in the problems facing America. Illegal drugs are the reason why our health care costs are so high—with emergency room visits from drug overdoses and the victims of drive-by shootings.

Thousands of babies are born each year addicted to illegal drugs and illegal drug use contributes to the rapid spread of AIDS.

Illegal drug use is also behind most of the violence in this country. Over 50% of all men arrested for homicide test positive for illicit drugs at the time of arrest and illegal drugs are a factor in half of all family violence, most of it directed against women and children.

Illegal drugs are also the single most serious problem facing America's educational system. It has always bewildered me how President Clinton can claim to be the education President when drug use by school age children has doubled since he was elected president.

There is an obvious connection between the increase in illegal drug use which has occurred since President Clinton first took office and the educational problems facing our nation.

Illegal drug use has doubled since this President took office and according to the most recent reports drug use is still on the rise among eighth graders.

A person who uses illegal drugs is five times more likely to drop out of school than a non drug user. Scientific studies show that illegal drugs—including marijuana—rob students of their motivation and self-esteem, leaving them unable to concentrate and indifferent to learning.

A recent study of 11th graders in our major cities showed that over half of the heavy drug users dropped out—twice the rate of those who are drug-free.

During the Reagan/Bush years drug use dropped, from 24 million in 1979 to 11 million in 1992. These hard fought gains were wasted by President Clinton.

There is not a parent in America who sends their children off to school without worrying that they will become exposed to illegal drugs. And it is not just teenagers anymore. Parents now need to be very concerned about 7th and 8th grade children getting involved with illegal drugs.

Today in America one third of all high school kids smoke marijuana.

Today, more than half of all high school seniors have admitted to using illegal drugs. Since President Clinton was first elected the trends of casual drug use for high schools students have reversed and increased for virtually every illegal drug, including heroin, crack, cocaine, LSD and marijuana. This rise in teenage drug use also correlates closely with rising violence in our schools.

A recent study has also shown that students with the lowest grades were four times more likely to use marijuana in the past month than those with the highest grade point average.

Since 1992, marijuana use has jumped 150% among 12 and 13 year old students and 200% among high school students. Nearly 1.5 million more middle school and high school students use illegal drugs than when President Clinton was first elected.

I repeat, you cannot claim to be a President who cares about the education of our youth and not care about the illegal drug problem in this country. And President Clinton has demonstrated by his words—or lack of words—and by his deeds that he is not serious about winning the war on drugs. And our school systems have the casualties to prove it!

I commend Congressman PORTMAN for his find work on this demand reduction legislation and ask my colleagues to support the bill.

The CHAIRMAN pro tempore (Mr. GIBBONS). Under the rule, the Committee rises.

Accordingly, the Committee rose; and the Speaker pro tempore (Mr. DICKEY) having assumed the chair, Mr. GIBBONS, Chairman pro tempore of the Committee of the Whole House on the State of the Union, reported that that Committee, having had under consideration the bill (H.R. 4550) to provide for programs to facilitate a significant reduction in the incidence and prevalence of substance abuse through reducing the demand for illegal drugs and the inappropriate use of legal drugs, pursuant to House Resolution 538, he reported the bill back to the House with sundry amendments adopted by the Committee of the Whole.

The SPEAKER pro tempore. Under the rule, the previous question is ordered.

Is a separate vote demanded on any amendment? If not, the Chair would put them en gros.

The amendments were agreed to.

The SPEAKER pro tempore. The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

The SPEAKER pro tempore. The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. PORTMAN. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The vote was taken by electronic device, and there were—ayes 396, noes 9, not voting 29, as follows:

[Roll No. 444]

AYES—396

Abercrombie	Brady (PA)	Cummings
Ackerman	Brown (CA)	Cunningham
Aderholt	Brown (FL)	Davis (FL)
Allen	Brown (OH)	Davis (IL)
Andrews	Bryant	Davis (VA)
Archer	Bunning	Deal
Armey	Burr	DeFazio
Bachus	Burton	DeGette
Baessler	Callahan	Delahunt
Baker	Calvert	DeLauro
Baldacci	Camp	DeLay
Ballenger	Campbell	Deutsch
Barcia	Canady	Diaz-Balart
Barr	Cannon	Dickey
Barrett (NE)	Capps	Dixon
Barrett (WI)	Cardin	Doggett
Bartlett	Carson	Dooley
Barton	Castle	Doolittle
Bass	Chabot	Doyle
Becerra	Chambliss	Dreier
Bentsen	Chenoweth	Duncan
Berman	Christensen	Dunn
Berry	Clayton	Edwards
Bilbray	Clement	Ehlers
Bilirakis	Coble	Ehrlich
Bishop	Coburn	Emerson
Blagojevich	Collins	Engel
Bliley	Combest	English
Blumenauer	Condit	Ensign
Boehler	Cook	Eshoo
Boehner	Cooksey	Etheridge
Bonilla	Costello	Evans
Bonior	Cox	Everett
Bono	Coyne	Ewing
Borski	Cramer	Farr
Boswell	Crane	Fattah
Boucher	Crapo	Fawell
Boyd	Cubin	Filner

Foley
Forbes
Ford
Fossella
Fowler
Fox
Franks (NJ)
Frelinghuysen
Frost
Furse
Gallegly
Ganske
Gekas
Gephardt
Gibbons
Gilchrest
Gillmor
Gilman
Goode
Goodlatte
Goodling
Gordon
Graham
Granger
Green
Greenwood
Gutierrez
Gutknecht
Hall (OH)
Hall (TX)
Hamilton
Hansen
Hastert
Hastings (FL)
Hastings (WA)
Hayworth
Hefley
Herger
Hill
Hillery
Hilliard
Hinchey
Hinojosa
Hobson
Hoekstra
Holden
Hooley
Hostettler
Houghton
Hoyer
Hulshof
Hunter
Hutchinson
Hyde
Inglis
Istook
Jackson (IL)
Jackson-Lee
(TX)
Jefferson
Jenkins
Johnson (CT)
Johnson (WI)
Johnson, E. B.
Johnson, Sam
Jones
Kanjorski
Kaptur
Kasich
Kelly
Kennedy (MA)
Kennedy (RI)
Kennelly
Kildee
Kilpatrick
Kim
Kind (WI)
King (NY)
Kingston
Klecza
Klink
Klug
Knollenberg
Kolbe
Kucinich
LaFalce
LaHood
Lampson
Largent
Latham
LaTourette
Lazio
Leach
Lee
Levin

Lewis (CA)
Lewis (GA)
Lewis (KY)
Linder
Lipinski
Livingston
LoBiondo
Lofgren
Lowe
Lucas
Luther
Maloney (CT)
Maloney (NY)
Manton
Manzullo
Markey
Martinez
Mascara
Matsui
McCarthy (MO)
McCarthy (NY)
McCollum
McCrery
McDade
McDermott
McGovern
McHale
McHugh
McInnis
McIntosh
McIntyre
McKeon
McKinney
McNulty
Meehan
Meek (FL)
Menendez
Metcalf
Mica
Millender-
McDonald
Miller (CA)
Miller (FL)
Minge
Mink
Moakley
Mollohan
Moran (KS)
Moran (VA)
Morella
Murtha
Myrick
Neal
Nethercutt
Neumann
Ney
Northup
Norwood
Nussle
Oberstar
Olver
Ortiz
Owens
Oxley
Packard
Pallone
Pappas
Parker
Pascrell
Pastor
Paxon
Payne
Pease
Pelosi
Peterson (MN)
Peterson (PA)
Petri
Pickering
Pickett
Pitts
Pombo
Pomeroy
Porter
Portman
Price (NC)
Quinn
Radanovich
Rahall
Ramstad
Rangel
Redmond
Regula
Reyes
Riley
Rivers

Rodriguez
Roemer
Rogan
Rogers
Rohrabacher
Ros-Lehtinen
Rothman
Roukema
Roybal-Allard
Royce
Rush
Ryun
Sabo
Salmon
Sanchez
Sanders
Sandlin
Sanford
Sawyer
Saxton
Scarborough
Schaefer, Dan
Schaffer, Bob
Sensenbrenner
Serrano
Sessions
Shadegg
Shaw
Shays
Sherman
Shimkus
Shuster
Sisisky
Skeen
Skelton
Slaughter
Smith (MI)
Smith (NJ)
Smith (OR)
Smith (TX)
Smith, Adam
Smith, Linda
Snowbarger
Snyder
Solomon
Souder
Spence
Spratt
Stabenow
Stark
Stearns
Stenholm
Strickland
Stump
Stupak
Sununu
Talent
Tanner
Tauscher
Taylor (MS)
Taylor (NC)
Thomas
Thompson
Thornberry
Thune
Thurman
Tiahrt
Tierney
Torres
Traficant
Turner
Upton
Velazquez
Vento
Visclosky
Walsh
Wamp
Watkins
Watt (NC)
Watts (OK)
Weldon (FL)
Weldon (PA)
Weller
Weygand
White
Whitfield
Wicker
Wilson
Wise
Wolf
Woolsey
Wynn
Young (AK)
Young (FL)

NOES—9

Conyers
Dingell
Frank (MA)
Nadler
Obey
Paul
Scott
Skaggs
Waxman

NOT VOTING—29

Bateman
Bereuter
Blunt
Brady (TX)
Buyer
Clay
Clyburn
Danner
Dicks
Fazio
Gejdenson
Gonzalez
Goss
Harman
Hefner
Horn
John
Lantos
Meeks (NY)
Poshard
Pryce (OH)
Riggs
Schumer
Stokes
Tauzin
Towns
Waters
Wexler
Yates

□ 2006

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. BLUNT. Mr. Speaker, on rollcall No. 444, I was inadvertently detained. Had I been present, I would have voted "aye."

AUTHORIZING THE CLERK TO
MAKE CORRECTIONS IN THE EN-
GROSSMENT OF H.R. 4550, DRUG
DEMAND REDUCTION ACT

Mr. PORTMAN. Mr. Speaker, I ask unanimous consent that in the engrossment of the bill, H.R. 4550, the Clerk be authorized to make technical corrections and conforming changes to the bill.

The SPEAKER pro tempore (Mr. GIBBONS). Is there objection to the request of the gentleman from Ohio?

There was no objection.

GENERAL LEAVE

Mr. PORTMAN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on H.R. 4550.

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

There was no objection.

APPOINTMENT OF CONFEREES ON
S. 1260, SECURITIES LITIGATION
UNIFORM STANDARDS ACT OF
1998

Mr. OXLEY. Mr. Speaker, I ask unanimous consent to take from the Speaker's table the Senate bill (S. 1260) to amend the Securities Act of 1933 and the Securities Exchange Act of 1934 to limit the conduct of securities class actions under State law, and for other purposes, with a House amendment thereto, insist on the House amendment, and agree to the conference asked by the Senate.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Ohio? The Chair hears none and, without objection, appoints the following conferees: Messrs. BLILEY, OXLEY, TAUZIN, COX of California,

WHITE, DINGELL, STUPAK, and Ms. ESHOO.

There was no objection.

PERSONAL EXPLANATION

Mr. GREEN. Mr. Speaker, because of the visit from Energy Secretary Bill Richardson in my district, I missed roll call votes 426 to 430. Had I been present, I would have voted yes on roll call 426; yes on roll call 427; yes on roll call 428; yes on roll call 429; and yes on roll call 430.

ANNUAL REPORT OF THE COM-
MODITY CREDIT CORPORATION,
FY 1996—MESSAGE FROM THE
PRESIDENT OF THE UNITED
STATES

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Agriculture:

To the Congress of the United States:

As required by the provisions of section 13, Public Law 806, 80th Congress (15 U.S.C. 714k), I transmit herewith the report of the Commodity Credit Corporation for fiscal year 1996.

WILLIAM J. CLINTON.

THE WHITE HOUSE, *September 16, 1998.*

ELECTION OF MEMBER TO
COMMITTEE ON SCIENCE

Mr. PALLONE. Mr. Speaker, at the direction of the Democratic Caucus, I offer a privileged resolution (H. Res. 540) and ask for its immediate consideration.

The Clerk read the resolution, as follows:

HOUSE RESOLUTION 540

Resolved, That the following named Member be, and is hereby, elected to the following standing committee of the House of Representatives: Committee on Science, Mr. Sherman.

The resolution was agreed to.

A motion to reconsider was laid on the table.

SPECIAL ORDERS

The SPEAKER pro tempore (Mr. GIBBONS). Under the Speaker's announced policy of January 7, 1997, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. LANTOS) is recognized for 5 minutes.

(Mr. LANTOS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. MILLER) is recognized for 5 minutes.